

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

## **ANNUAL STATEMENT**

FOR THE YEAR ENDED DECEMBER 31, 2020 OF THE CONDITION AND AFFAIRS OF THE

Cape Verity III, Inc.

NAIC Group Code Organized under the Laws of		rior)	e <u>15473</u> Employer's I		46-348	5456 IA	
	IOWa			iii y		IA .	
Country of Domicile		United States	of America				
Licensed as business type:	Life,	Accident and Health X F	raternal Benefit Societies				
Incorporated/Organized	08/23/2013		Commenced Business		08/	/23/2013	
Statutory Home Office	215 10th Street Su	ite 1100 ,		Des Moin	es, IA, US 503	09	
	(Street and Nun	nber)	(City o	or Town, Sta	te, Country and	d Zip Code)	
Main Administrative Office		215 10th Street					
Des Moines	IA US 50309	(Street and	Number)	855	5-887-4487		
(City or Town, State,	Country and Zip Co	ode)	()	Area Code)	(Telephone Nu	mber)	
	10th Street Suite 11				es, IA, US 503		
(Street	and Number or P.O	). Box)	(City o	or Town, Sta	te, Country and	d Zip Code)	
Primary Location of Books and Records		215 10th Stree					
Des Moines	IA, US 50309	(Street and	Number)	85	5-887-4487		
(City or Town, State,	Country and Zip Co	de)	(,	Area Code)	(Telephone Nu	ımber)	
Internet Website Address		N/A					
Statutory Statement Contact	Tonya Rac	chelle Maxwell			515-393-372	5	
fan a maye	(N rell=guaf ,com	lame)			ođe) (Telephor 1-369-3684	ne Number)	
	Address)				X Number)		
PresidentChief Executive Officer	David Paul V		Chief Financial Officer Vice President, Assistant General Counsel, Secretary			Allen Jacob auren Freund #	
John Nicholas Giamalis Treas Bryan Edward Nelson, Vice President a		OTHI Vi inia Ho e Johnsor				Maxwell, Vice President ging Director, Associate General	
Actualy		Philip William Sherrill	Mana in Director	Counsel and Assistant Secretary			
Robert Michael Arena Jr.		DIRECTORS OF Hanben I	David Paul Wilken				
State of Iowa County of Polk		SS:					
Tolk							
The officers of this reporting entity being du all of the herein described assets were the statement, together with related exhibits, so condition and affairs of the said reporting er in accordance with the NAIC Annual Stater rules or regulations require differences in respectively. Furthermore, the scope of this exact copy (except for formatting difference to the enclosed statement.	absolute property hedules and explan ntity as of the reporti ment Instructions ar reporting not rela s attestation by the	of the said reporting entity, ations therein contained, an ing period stated above, and and Accounting Practices and ted to accounting practices described officers also incl	free and clear from any lien nexed or referred to, is a full I of its income and deduction Procedures manual except a and procedures, according udes the related correspondi	is or claims and true stand is therefrom to the exter g to the be ing electroni	thereon, exceptement of all the for the period of that: (1) state at of their info c filing with the	pt as herein stated, and that this se assets and liabilities and of the ended, and have been completed e law may differ; or, (2) that state formation, knowledge and belief a NAIC, when required, that is an	
DocuSigned by:		DocuSigned by:		- b	ocuSigned by:		
David P. Will		DECREE ODBRAGED	nd	Da	wid Jacoby		
David Paul Wilken President		Kathryn Laur Vice President, Assista Secre	nt General Counsel,			avid Allen Jacoby ef Financial Officer	
Subscilled and sworn to before me this day of	neity	2001	a. Is this an original filir b. If no, 1. State the amendn 2. Date filed 3. Number of pages	nent numbe	r	Yes[X]No[]	

Lisa K Ridenour Notary Public Seal State of Indiana Hendricks County
My Commission Expires 07/13/2024

# **ASSETS**

		Current Year		Prior Year	
		1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
1.	Bonds (Schedule D)	152,970,213		152,970,213	132,876,163
	Stocks (Schedule D):				
	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 (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				
0.	(\$				
	investments (\$	22 455 454		22 455 454	8 909 942
6.	Contract loans (including \$ premium notes)				
7.	Derivatives (Schedule DB)			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	10,000,001
8.	Other invested assets (Schedule BA)				
9.	Receivables for securities				
10.	Securities lending reinvested collateral assets (Schedule DL)				
	Aggregate write-ins for invested assets				
12.	Subtotals, cash and invested assets (Lines 1 to 11)				
	Title plants less \$ charged off (for Title insurers	100,004,000			
13.	only)				
14.	Investment income due and accrued				
	Premiums and considerations:	1,000,100		1,000,100	1,707,200
13.	15.1 Uncollected premiums and agents' balances in the course of collection.				
	15.2 Deferred premiums and agents' balances and installments booked but				
	deferred and not yet due (including \$				
	earned but unbilled premiums)	6 774 132		6 774 132	7 478 996
	15.3 Accrued retrospective premiums (\$	0,774,102		0,774,102	, , 470, 550
	contracts subject to redetermination (\$				
16.	Reinsurance:				
10.	16.1 Amounts recoverable from reinsurers				
	16.2 Funds held by or deposited with reinsured companies			3,236,799,637	2 945 803 647
	16.3 Other amounts receivable under reinsurance contracts				73,874,849
17.	Amounts receivable relating to uninsured plans				
	Current federal and foreign income tax recoverable and interest thereon				
	Net deferred tax asset				
19.	Guaranty funds receivable or on deposit				
	•				
20. 21.	Electronic data processing equipment and software				
۲۱.	(\$				
22.	Net adjustment in assets and liabilities due to foreign exchange rates				
23.	Receivables from parent, subsidiaries and affiliates				
23. 24.	Health care (\$) and other amounts receivable				
24. 25.	Aggregate write-ins for other than invested assets				
25. 26.	Total assets excluding Separate Accounts, Segregated Accounts and	1,201,120,193		1,201,120,183	1,204,000,040
20.	Protected Cell Accounts (Lines 12 to 25)	4,959,221,555	215,497,806	4,743,723,749	4,454,373,074
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts				
28.	Total (Lines 26 and 27)	4,959,221,555	215,497,806	4,743,723,749	4,454,373,074
	DETAILS OF WRITE-INS				
1101.					
1102.					
1103.					
1198.	Summary of remaining write-ins for Line 11 from overflow page				
1199.	Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)				
2501.	Contingent Note	1,207,720,793		1,207,720,793	1,264,036,340
2502.					
2503.					
2598.	Summary of remaining write-ins for Line 25 from overflow page				
2599.	Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	1,207,720,793		1,207,720,793	1,264,036,340

# LIABILITIES, SURPLUS AND OTHER FUNDS

	LIABILITIES, SORFEOS AND OTTLER TO	1 Current Year	2 Prior Year
1.	Aggregate reserve for life contracts \$ 4,343,296,686 (Exh. 5, Line 9999999) less \$ included in Line 6.3 (including \$ Modco Reserve)	4 242 206 606	4 110 00E 660
2.			
3.	Liability for deposit-type contracts (Exhibit 7, Line 14, Col. 1) (including \$ Modco Reserve)		
4.	Contract claims:		
	4.1 Life (Exhibit 8, Part 1, Line 4.4, Col. 1 less sum of Cols. 9, 10 and 11)		
5.	Policyholders' dividends/refunds to members \$		
	and unpaid (Exhibit 4, Line 10)		
6.	Provision for policyholders' dividends, refunds to members and coupons payable in following calendar year - estimated amounts:		
	6.1 Policyholders' dividends and refunds to members apportioned for payment (including \$		
	6.2 Policyholders' dividends and refunds to members not yet apportioned (including \$ Modco)		
7.	6.3 Coupons and similar benefits (including \$ Modco)  Amount provisionally held for deferred dividend policies not included in Line 6		
8.	Premiums and annuity considerations for life and accident and health contracts received in advance less		
	\$ discount; including \$ accident and health premiums (Exhibit 1,		
9.	Part 1, Col. 1, sum of lines 4 and 14)  Contract liabilities not included elsewhere:		
9.	9.1 Surrender values on canceled contracts		
	9.2 Provision for experience rating refunds, including the liability of \$ accident and health		
	experience rating refunds of which \$ is for medical loss ratio rebate per the Public Health		
	Service Act		
	ceded	71,302,019	69,238,461
	9.4 Interest maintenance reserve (IMR, Line 6)		
10.	Commissions to agents due or accrued-life and annuity contracts \$ accident and health		
11.	\$ and deposit-type contract funds \$  Commissions and expense allowances payable on reinsurance assumed	2 335 868	2 514 509
12.	General expenses due or accrued (Exhibit 2, Line 12, Col. 7)		
13.	Transfers to Separate Accounts due or accrued (net) (including \$ accrued for expense		
14	allowances recognized in reserves, net of reinsured allowances)		
15.1	Current federal and foreign income taxes, including \$ on realized capital gains (losses)		
	Net deferred tax liability		
16.	Unearned investment income		
17. 18.	Amounts withheld or retained by reporting entity as agent or trustee		
19.	Remittances and items not allocated	4	
20.	Net adjustment in assets and liabilities due to foreign exchange rates		
21. 22.	Liability for benefits for employees and agents if not included above		
23.	Dividends to stockholders declared and unpaid		
24.	Miscellaneous liabilities:		
	24.01 Asset valuation reserve (AVR, Line 16, Col. 7)	731,469	344,695
	24.02 Reinsurance in unauthorized and certified (\$) companies		
	24.04 Payable to parent, subsidiaries and affiliates		
	24.05 Drafts outstanding		
	24.06 Liability for amounts held under uninsured plans		
	24.07 Funds field drider consulance		
	24.09 Payable for securities		
	24.10 Payable for securities lending		
25.	24.11 Capital notes \$ and interest thereon \$ Aggregate write-ins for liabilities		
26.	Total liabilities excluding Separate Accounts business (Lines 1 to 25)		4, 197, 037, 722
27.	From Separate Accounts Statement		
28.	Total liabilities (Lines 26 and 27)	., , ,	4,197,037,722
29. 30.	Common capital stock	2,500,000	
31.	Aggregate write-ins for other than special surplus funds	1,207,720,792	
32.	Surplus notes		
33. 34	Gross paid in and contributed surplus (Page 3, Line 33, Col. 2 plus Page 4, Line 51.1, Col. 1)	311,532,945	191,532,945
34. 35.	Aggregate write-ins for special surplus funds	(1.222.780 006)	(1.200.733 933)
36.	Less treasury stock, at cost:		, . , 5 , . 50 , 500 /
Ì	36.1 shares common (value included in Line 29 \$ )		
1	36.2 shares preferred (value included in Line 30 \$ )	ł	
37		206 172 721	<b>ኃ</b> ፍለ <b>፬</b> Չፍ ኃፍሳ
37. 38.	Surplus (Total Lines 31+32+33+34+35-36) (including \$ in Separate Accounts Statement)		254,835,352 257,335,352
		296,473,731 298,973,731 4,743,723,749	
38. 39.	Surplus (Total Lines 31+32+33+34+35-36) (including \$ in Separate Accounts Statement)  Totals of Lines 29, 30 and 37 (Page 4, Line 55)	298,973,731	257,335,352
38. 39. 2501.	Surplus (Total Lines 31+32+33+34+35-36) (including \$ in Separate Accounts Statement)  Totals of Lines 29, 30 and 37 (Page 4, Line 55)  Totals of Lines 28 and 38 (Page 2, Line 28, Col. 3)  DETAILS OF WRITE-INS	298,973,731 4,743,723,749	257,335,352 4,454,373,074
38. 39.	Surplus (Total Lines 31+32+33+34+35-36) (including \$ in Separate Accounts Statement)	298,973,731 4,743,723,749	257,335,352 4,454,373,074
38. 39. 2501. 2502.	Surplus (Total Lines 31+32+33+34+35-36) (including \$ in Separate Accounts Statement)  Totals of Lines 29, 30 and 37 (Page 4, Line 55)  Totals of Lines 28 and 38 (Page 2, Line 28, Col. 3)  DETAILS OF WRITE-INS	298,973,731 4,743,723,749	257,335,352 4,454,373,074
38. 39. 2501. 2502. 2503. 2598. 2599.	Surplus (Total Lines 31+32+33+34+35-36) (including \$ in Separate Accounts Statement)	298,973,731 4,743,723,749	257,335,352 4,454,373,074
38. 39. 2501. 2502. 2503. 2598. 2599. 3101.	Surplus (Total Lines 31+32+33+34+35-36) (including \$ in Separate Accounts Statement)	298,973,731 4,743,723,749 4,743,723,749	257,335,352 4,454,373,074
38. 39. 2501. 2502. 2503. 2598. 2599.	Surplus (Total Lines 31+32+33+34+35-36) (including \$ in Separate Accounts Statement)	298,973,731 4,743,723,749 4,743,723,749	257,335,352 4,454,373,074 4,454,373,074
38. 39. 2501. 2502. 2503. 2598. 2599. 3101. 3102. 3103. 3198.	Surplus (Total Lines 31+32+33+34+35-36) (including \$ in Separate Accounts Statement)	298,973,731 4,743,723,749 4,743,723,749	257,335,352 4,454,373,074 
38. 39. 2501. 2502. 2503. 2598. 2599. 3101. 3102. 3103. 3198. 3199.	Surplus (Total Lines 31+32+33+34+35-36) (including \$ in Separate Accounts Statement)	298,973,731 4,743,723,749 4,743,723,749 1,207,720,792	257,335,352 4,454,373,074 
38. 39. 2501. 2502. 2503. 2598. 2599. 3101. 3102. 3103. 3198. 3199.	Surplus (Total Lines 31+32+33+34+35-36) (including \$ in Separate Accounts Statement)	298,973,731 4,743,723,749 4,743,723,749 1,207,720,792	257,335,352 4,454,373,074 
38. 39. 2501. 2502. 2503. 2598. 2599. 3101. 3102. 3103. 3198. 3199.	Surplus (Total Lines 31+32+33+34+35-36) (including \$ in Separate Accounts Statement)	298,973,731 4,743,723,749 4,743,723,749 1,207,720,792	257,335,352 4,454,373,074 
38. 39. 2501. 2502. 2503. 2598. 2599. 3101. 3102. 3103. 3198. 3199. 3401. 3402.	Surplus (Total Lines 31+32+33+34+35-36) (including \$ in Separate Accounts Statement)	298,973,731 4,743,723,749 1,207,720,792 1,207,720,792	257,335,352 4,454,373,074 

# **SUMMARY OF OPERATIONS**

		1	2
1.	Premiums and annuity considerations for life and accident and health contracts (Exhibit 1, Part 1, Line 20.4, Col. 1, less	Current Year	Prior Year
	Col. 11)		
2. 3.	Considerations for supplementary contracts with life contingencies  Net investment income (Exhibit of Net Investment Income, Line 17)		
3. 4.	Amortization of Interest Maintenance Reserve (IMR, Line 5)		
5.	Separate Accounts net gain from operations excluding unrealized gains or losses		
6.	Commissions and expense allowances on reinsurance ceded (Exhibit 1, Part 2, Line 26.1, Col. 1)		
7. 8.	Reserve adjustments on reinsurance ceded		
0.	8.1 Income from fees associated with investment management, administration and contract guarantees from Separate		
	Accounts		
	8.2 Charges and fees for deposit-type contracts  8.3 Aggregate write-ins for miscellaneous income	200,406,006	139,760,021
9.	Total (Lines 1 to 8.3)	307,080,889	2,392,155,392
10.	Death benefits	75,100,439	52,394,430
11.	Matured endowments (excluding guaranteed annual pure endowments)		
12. 13.	Annuity benefits (Exhibit 8, Part 2, Line 6.4, Cols. 4 + 8)  Disability benefits and benefits under accident and health contracts		
14.	Coupons, guaranteed annual pure endowments and similar benefits		
15.	Surrender benefits and withdrawals for life contracts		
16. 17.	Group conversions  Interest and adjustments on contract or deposit-type contract funds		
18.	Payments on supplementary contracts with life contingencies		
19.	Increase in aggregate reserves for life and accident and health contracts		3,278,975,434
20.	Totals (Lines 10 to 19)	323,661,690	3,343,084,486
21.	Commissions on premiums, annuity considerations, and deposit-type contract funds (direct business only) (Exhibit 1, Part 2, Line 31, Col. 1)		
22.	Commissions and expense allowances on reinsurance assumed (Exhibit 1, Part 2, Line 26.2, Col. 1)	9,438,274	8,111,688
23.	General insurance expenses and fraternal expenses (Exhibit 2, Line 10, Cols. 1, 2, 3, 4 and 6)		
24. 25.	Insurance taxes, licenses and fees, excluding federal income taxes (Exhibit 3, Line 7, Cols. 1 + 2 + 3 + 5)		
26.	Net transfers to or (from) Separate Accounts net of reinsurance.		
27.	Aggregate write-ins for deductions		
28.	Totals (Lines 20 to 27)	333,099,964	3,351,196,174
29.	Net gain from operations before dividends to policyholders, refunds to members and federal income taxes (Line 9 minus Line 28)	(26,019,075)	(959,040,782)
30.	Dividends to policyholders and refunds to members	, , , ,	
31.	Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29	(06 010 075)	(050 040 700)
32.	minus Line 30)	4,373,049	(26,713,822)
33.	Net gain from operations after dividends to policyholders, refunds to members and federal income taxes and before		
	realized capital gains or (losses) (Line 31 minus Line 32)	(30,392,124)	(932,326,960)
34.	Net realized capital gains (losses) (excluding gains (losses) transferred to the IMR) less capital gains tax of \$(3,772,617) (excluding taxes of \$4,273,800 transferred to the IMR)	4,008,472	224,384
35.	Net income (Line 33 plus Line 34)		(932, 102, 576)
	CAPITAL AND SURPLUS ACCOUNT		
36.	Capital and surplus, December 31, prior year (Page 3, Line 38, Col. 2)	257,335,352	69,263,804
37. 38.	Net income (Line 35)		
39.	Change in net unrealized capital gains (losses) less capital gains tax of \$\frac{1}{2}\$.		
40.	Change in net deferred income tax	6, 195, 121	174,605,522
41.	Change in nonadmitted assets		
42. 43.	Change in liability for reinsurance in unauthorized and certified companies		
44.	Change in asset valuation reserve		
45.	Change in treasury stock (Page 3, Lines 36.1 and 36.2, Col. 2 minus Col. 1)		
46. 47.	Surplus (contributed to) withdrawn from Separate Accounts during period  Other changes in surplus in Separate Accounts Statement		
48.	Change in surplus notes		
49.	Cumulative effect of changes in accounting principles		
50.	Capital changes:		
Ì	50.1 Paid in		
	50.3 Transferred to surplus		
51.	Surplus adjustment:		400 000 000
	51.1 Paid in		
	51.2 Transferred to capital (Stock Dividend)		
	51.4 Change in surplus as a result of reinsurance		
52.	Dividends to stockholders		
53. 54.	Aggregate write-ins for gains and losses in surplus	(51,441,316) 41,638,379	954,381,840 188,071,548
55.	Capital and surplus, December 31, current year (Lines 36 + 54) (Page 3, Line 38)	298,973,731	257,335,352
	DETAILS OF WRITE-INS		
	Funds Withheld Miscellaneous Income		
	Summary of remaining write-ins for Line 8.3 from overflow page		
	Totals (Lines 08.301 thru 08.303 plus 08.398)(Line 8.3 above)	200,406,006	139,760,021
	Summary of remaining write-ins for Line 27 from overflow page		
2700	Totals (Lines 2701 thru 2703 plus 2798)(Line 27 above)		
2133.	Contingent Note Surplus	(56 315 548)	981,350,384
5301.			(00 050 405)
5301. 5302.	Tax Sharing Agreement	4,874,232	
5301. 5302. 5303.		4,874,232	(318,379)

## **CASH FLOW**

	07.0111 2011		
		1	2
		Current Year	Prior Year
	Cash from Operations		
1.	Premiums collected net of reinsurance	140,589,722	64, 192,648
2.	Net investment income	21,046,903	3,747,351
3.	Miscellaneous income	(123,880,823)	(51,589,655)
4.	Total (Lines 1 through 3)	37,755,803	16,350,344
5.	Benefit and loss related payments	(56,484,936)	18,065,067
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts		
7.	Commissions, expenses paid and aggregate write-ins for deductions	5,995,401	6,381,191
8.	Dividends paid to policyholders		
9.	Federal and foreign income taxes paid (recovered) net of \$ tax on capital gains (losses)		
10.	Total (Lines 5 through 9)	(50,489,535)	24,446,258
11.	Net cash from operations (Line 4 minus Line 10)	88,245,338	(8,095,914)
	Cash from Investments		
12.	Proceeds from investments sold, matured or repaid:		
	12.1 Bonds	22,134,791	15,988,131
	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		1,264
	12.7 Miscellaneous proceeds		
	12.8 Total investment proceeds (Lines 12.1 to 12.7)	22,134,791	15,989,395
13.	Cost of investments acquired (long-term only):		
	13.1 Bonds	224,590,959	8,748,812
	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)	224,590,959	8,748,812
14.	Net increase (decrease) in contract loans and premium notes	(1,756,482)	1,872,165
15.	Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14)	(200,699,687)	5,368,418
	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	120,000,000	2,663,406
	16.3 Borrowed funds		
	16.4 Net deposits on deposit-type contracts and other insurance liabilities		
	16.5 Dividends to stockholders		
	16.6 Other cash provided (applied)	5,999,860	(1)
17.	Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)	125,999,860	2,663,405
	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)	13,545,510	(64,091)
19.	Cash, cash equivalents and short-term investments:	-,,	(,
	19.1 Beginning of year	8,909,943	8,974,034
	19.2 End of year (Line 18 plus Line 19.1)	22,455,453	8,909,943

Note: Supplementa	I disclosures of cas	h flow information f	or non-cash transactions:
Note. Supplementa	i uisciosuies di cas	sii ilow ililolilialioli i	ui iluii-casii ilalisaciiulis.

20.0001. Settled assumed reinsurance obligation	248,899,110	
20.0002. Settled ceded reinsurance obligation		38,918,586
20.0003. APIC CVII Retro Cession		149,767,905

### ANALYSIS OF OPERATIONS BY LINES OF BUSINESS - SUMMARY

	A	NAL 1 313 UF			2 OF BOSINE					
		1	2	3	4	5	6	7	8	9
		Total	Individual Life	Group Life	Individual Annuities	Group Annuities	Accident and Health	Fraternal	Other Lines of Business	YRT Mortality Risk Only
1.	Premiums and annuity considerations for life and accident and health contracts	98,402,239	98,402,239							
2.	Considerations for supplementary contracts with life contingencies	, ,	XXX	XXX			XXX	XXX		XXX
3.	Net investment income	7,264,603	7,264,603							
4.	Amortization of Interest Maintenance Reserve (IMR)	1,008,041	1,008,041							
5.	Separate Accounts net gain from operations excluding unrealized gains or losses	., ,						XXX		
6.	Commissions and expense allowances on reinsurance ceded							XXX	-	
7.	Reserve adjustments on reinsurance ceded							XXX	-	
8.	Miscellaneous Income:								-	
0.	8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts							XXX		
	8.2 Charges and fees for deposit-type contracts						XXX	XXX		
	8.3 Aggregate write-ins for miscellaneous income	200.406.006	200,406,006				3000			
9.	Totals (Lines 1 to 8.3)	307.080.889	307.080.889							
10.	Death benefits	75, 100, 439	75, 100, 439				2004	100		
		75, 100,439	75, 100,439				XXX	XXX		
11.	Matured endowments (excluding guaranteed annual pure endowments)						XXX	XXX		
12.	Annuity benefits		XXX	XXX			XXX	XXX		XXX
13.	Disability benefits and benefits under accident and health contracts							XXX		
14.	Coupons, guaranteed annual pure endowments and similar benefits	40 400 000	40, 400, 000					XXX		
15.	Surrender benefits and withdrawals for life contracts	18 , 190 , 233	18 , 190 , 233				XXX	XXX		
16.	Group conversions							XXX		
17.	Interest and adjustments on contract or deposit-type contract funds							XXX		
18.	Payments on supplementary contracts with life contingencies						XXX	XXX		
19.	Increase in aggregate reserves for life and accident and health contracts	230,371,018	230,371,018					XXX		
20.	Totals (Lines 10 to 19)	323,661,690	323,661,690					XXX		
21.	Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only)									xxx
22.	Commissions and expense allowances on reinsurance assumed	9,438,274	9,438,274					XXX		
23.	General insurance expenses and fraternal expenses.									
24.	Insurance taxes, licenses and fees, excluding federal income taxes									
25.	Increase in loading on deferred and uncollected premiums							XXX		
26.	Net transfers to or (from) Separate Accounts net of reinsurance							XXX		
27.	Aggregate write-ins for deductions									
28.	Totals (Lines 20 to 27)	333,099,964	333,099,964							
29.	Net gain from operations before dividends to policyholders, refunds to members and federal income taxes (Line 9 minus Line 28)	(26,019,075)	(26,019,075)							
30.	Dividends to policyholders and refunds to members							XXX		
31.	Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30)	(26,019,075)	(26,019,075)							
32.	Federal income taxes incurred (excluding tax on capital gains)	4,373,049	4,373,049							
33.	Net gain from operations after dividends to policyholders, refunds to members and federal income taxes and before realized capital gains or (losses) (Line 31 minus									
	Line 32)	(30,392,124)	(30, 392, 124)							
34.	Policies/certificates in force end of year							XXX		
	DETAILS OF WRITE-INS									
08.301	Funds Withheld Miscellaneous Income	200,406,006	200,406,006							
08.302		, ,	, , , , , , , , , , , , , , , , , , , ,							
08.303										
	Summary of remaining write-ins for Line 8.3 from overflow page									
	. Totals (Lines 08.301 thru 08.303 plus 08.398) (Line 8.3 above)	200,406,006	200,406,006							
2701.		,,	-,,							
2702.										
2702.										
2798.	Summary of remaining write-ins for Line 27 from overflow page									
	Totals (Lines 2701 thru 2703 plus 2798) (Line 27 above)									
4100.	Totalo (Lines 2101 tilla 2100 pias 2100) (Lille 21 above)					l .			1	1

## ANALYSIS OF OPERATIONS BY LINES OF BUSINESS - INDIVIDUAL LIFE INSURANCE (b)

		LISIS UF	OFERAII		INES OF BO	DOINEGO	טטועוטאוו -	AL LIFE III	SURANC				
		1	2	3	4	5	6	7	8	9	10	11	12
								Universal Life		Variable	Crodit Lif-	Other Individual	YRT Mortality
		Total	Industrial Life	Whole Life	Term Life	Indexed Life	Universal Life	With Secondary Guarantees	Variable Life	Universal Life	Credit Life (c)	Other Individual	Risk Only
1.	Premiums for life contracts (a)	98,402,239	muusmai Liie	VVIIOIE LIIE	(817.239)	ilidexed Lile	Offiversal Life	99,219,478	Variable Life	Offiversal Life	(0)	LIIC	Nisk Offiy
2.	Considerations for supplementary contracts with life contingencies	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3.	Net investment income	7,264,603			192,549			7,072,054					
3. 4	Amortization of Interest Maintenance Reserve (IMR)	1,008,041			26,499			981.542					
5.	Separate Accounts net gain from operations excluding unrealized gains or	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			20, 400								
J.	losses												
6.	Commissions and expense allowances on reinsurance ceded												
7.	Reserve adjustments on reinsurance ceded												
8.	Miscellaneous Income:												
	8.1 Income from fees associated with investment management,												
	administration and contract guarantees from Separate Accounts												
	8.2 Charges and fees for deposit-type contracts												
	8.3 Aggregate write-ins for miscellaneous income	200,406,006						200,406,006					
9.	Totals (Lines 1 to 8.3)	307,080,889			(598, 191)			307,679,080					
10.	Death benefits	75,100,439			2,801,322			72,299,117					
11.	Matured endowments (excluding guaranteed annual pure endowments)												
12.	Annuity benefits	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13.	Disability benefits and benefits under accident and health contracts												
14.	Coupons, guaranteed annual pure endowments and similar benefits												
15.	Surrender benefits and withdrawals for life contracts	18,190,233						18, 190, 233					
16.	Group conversions												
17.	Interest and adjustments on contract or deposit-type contract funds												
18.	Payments on supplementary contracts with life contingencies												
19.	Increase in aggregate reserves for life and accident and health contracts	230,371,018			688,754			229,682,264					
20.	Totals (Lines 10 to 19)	323,661,690			3,490,076			320, 171, 614					
21.	Commissions on premiums, annuity considerations and deposit-type												
	contract funds (direct business only)	0.400.074			077 000			0.700.044					XXX
22.	Commissions and expense allowances on reinsurance assumed	9,438,274			677,363			8,760,911					
23.	General insurance expenses												• • • • • • • • • • • • • • • • • • • •
24.	Insurance taxes, licenses and fees, excluding federal income taxes												• • • • • • • • • • • • • • • • • • • •
25.	Increase in loading on deferred and uncollected premiums												
26. 27.	Aggregate write-ins for deductions												
	Totals (Lines 20 to 27)	333.099.964			4.167.439			328.932.525					
28.	` ,	333,099,904			4, 107, 439			320,932,323					
29.	Net gain from operations before dividends to policyholders, refunds to members and federal income taxes (Line 9 minus Line 28)	(26,019,075)			(4,765,630)			(21,253,445)					
30.	Dividends to policyholders and refunds to members	(20,013,070)			(4,700,000)			(21,200,440)					
31.	Net gain from operations after dividends to policyholders, refunds to												
31.	members and before federal income taxes (Line 29 minus Line 30)	(26,019,075)			(4,765,630)			(21,253,445)					
32.	Federal income taxes incurred (excluding tax on capital gains)	4,373,049			, , , , ,			4,373,049					
33.	Net gain from operations after dividends to policyholders, refunds to	, ,						, ,					
	members and federal income taxes and before realized capital gains or												
	(losses) (Line 31 minus Line 32)	(30,392,124)			(4,765,630)			(25,626,494)					
34.	Policies/certificates in force end of year												
	DETAILS OF WRITE-INS												
	. Funds Withheld Miscellaneous Income	200,406,006						200,406,006					
08.302					ļ					<b></b>		ļ	
08.303										<b>-</b>			
	. Summary of remaining write-ins for Line 8.3 from overflow page				ļ								
08.399	. Totals (Lines 08.301 thru 08.303 plus 08.398) (Line 8.3 above)	200,406,006						200,406,006					
2701.					ļ			<b> </b>		<b></b>		<b>{</b>	ļ
2702.					ļ			<b></b>		<b></b>		<del> </del>	ļ
2703.										<b></b>		<b></b>	
2798.	Summary of remaining write-ins for Line 27 from overflow page												
2799.	Totals (Lines 2701 thru 2703 plus 2798) (Line 27 above)											<u> </u>	

<sup>(</sup>a) Include premium amounts for preneed plans included in Line 1

<sup>(</sup>b) Indicate if blocks of business in run-off that comprise less than 5% of premiums and less than 5% of reserve and loans liability are aggregated with material blocks of business and which columns are affected.

<sup>(</sup>c) Individual and Group Credit Life are combined and included on page. (Indicate whether included with Individual or Group.)

# Analysis of Operations by Lines of Business - Group Life Insurance ${f N}$ ${f O}$ ${f N}$ ${f E}$

Analysis of Operations by Lines of Business - Individual Annuities **NONE** 

Analysis of Operations by Lines of Business - Group Annuities  ${f N}$   ${f O}$   ${f N}$   ${f E}$ 

Analysis of Operations by Lines of Business - Accident and Health  ${f N}$   ${f O}$   ${f N}$   ${f E}$ 

## 7.

#### ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Cape Verity III, Inc.

#### ANALYSIS OF INCREASE IN RESERVES DURING THE YEAR - INDIVIDUAL LIFE INSURANCE (a)

ANALI	313 OI 1140	JILASE II	4 IVESEIVA	E2 DOKING	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		IDOAL LII		INCL .			
	1	2	3	4	5	6	7	8	9	10	11	12
							Universal Life					YRT
							With Secondary		Variable	Credit Life (b)	Other Individual	Mortality
	Total	Industrial Life	Whole Life	Term Life	Indexed Life	Universal Life	Guarantees	Variable Life	Universal Life	(N/A Fratermal)	Life	Risk Only
Involving Life or Disability Contingencies (Reserves) (Net of Reinsurance Ceded)												
Reserve December 31 of prior year	4, 112, 925, 668			109,679,298			4,003,246,370					<b></b>
Tabular net premiums or considerations	98,402,239			(817,239)			99,219,478					<b></b>
Present value of disability claims incurred												
4. Tabular interest	161,748,757			4,364,887			157,383,870					<b>L</b>
Tabular less actual reserve released												<b>L</b>
6. Increase in reserve on account of change in valuation basis												L
6.1 Change in excess of VM-20 deterministic/stochastic reserve over net premium reserve		XXX								XXX		
7. Other increases (net)	117,364,366						117,364,366					i
8. Totals (Lines 1 to 7)	4,490,441,030			113,226,946			4,377,214,084					
9. Tabular cost	53,853,671			57,572			53,796,099					l
10. Reserves released by death	75,100,439			2,801,322			72,299,117					L
11. Reserves released by other terminations (net)	18,190,233						18, 190, 233					<b>L</b>
12. Annuity, supplementary contract and disability payments involving life contingencies												
13. Net transfers to or (from) Separate Accounts												i
14. Total Deductions (Lines 9 to 13)	147,144,343			2,858,894			144,285,449					
15. Reserve December 31 of current year	4,343,296,687			110,368,052			4,232,928,635					
Cash Surrender Value and Policy Loans												
16. CSV Ending balance December 31, current year	1,750,468,571						1,750,468,571					L
17. Amount Available for Policy Loans Based upon Line 16 CSV												i
,				1		1			1		T .	

<sup>(</sup>a) Indicate if blocks of business in run-off that comprise less than 5% of premiums and less than 5% of reserve and loans liability are aggregated with material blocks of business and which columns are affected.

<sup>(</sup>b) Individual and Group Credit Life are combined and included on page. (Indicate whether included with Individual or Group.)

# Analysis of Increase in Reserves During the Year - Group Life Insurance ${f N}$ ${f O}$ ${f N}$ ${f E}$

Analysis of Increase in Reserves During the Year - Individual Annuities  ${f N} \ {f O} \ {f N} \ {f E}$ 

Analysis of Increase in Reserves During the Year - Group Annuities  ${f N}$   ${f O}$   ${f N}$   ${f E}$ 

## **EXHIBIT OF NET INVESTMENT INCOME**

		1	2
		Collected During Year	Earned During Year
1.	U.S. Government bonds	(a)	
1.1	Bonds exempt from U.S. tax	\- /	
1.2	Other bonds (unaffiliated)	(a)7,257,483	
1.3		` '	
2.1	Preferred stocks (unaffiliated)		
2.11	Preferred stocks of affiliates		
2.2	Common stocks (unaffiliated)		
2.21			
3.	Mortgage loans	` '	
4.		` '	
5	Contract loans		
6	Cash, cash equivalents and short-term investments		
7	Derivative instruments	* *	
8.	Other invested assets		
9.	Aggregate write-ins for investment income		7 000 000
10.	Total gross investment income	7,411,065	
11.	Investment expenses		
12.	Investment taxes, licenses and fees, excluding federal income taxes		,
13.	Interest expense		* /
14.	Depreciation on real estate and other invested assets		(i)
15.	Aggregate write-ins for deductions from investment income		4,398
16.	Total deductions (Lines 11 through 15)		7,264,603
17.	Net investment income (Line 10 minus Line 16)		7,204,000
0004	DETAILS OF WRITE-INS		
0901.			
0902.			
0903. 0998.	Cumpage of remaining write ing fact line O from quartery page		
0999.	Summary of remaining write-ins for Line 9 from overflow page		
1501.	Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above)  Miscel I aneous Expense		1 200
1501.			
1502.			
1503.			
1596.	Summary of remaining write-ins for Line 15 from overflow page		4,399
1333.	Totals (Lines 1301 tillu 1303 pius 1330) (Line 13, above)		4,000
(a) Inclu	des \$482,702 accrual of discount less \$732,144 amortization of premium and less \$1,313,1	38 paid for accrued int	erest on purchases.
(b) Inclu	des \$ accrual of discount less \$ amortization of premium and less \$	paid for accrued div	vidends on purchases.
(c) Inclu	des \$ accrual of discount less \$ amortization of premium and less \$	paid for accrued int	erest on purchases.
(d) Inclu	des \$ for company's occupancy of its own buildings; and excludes \$ interest on en	cumbrances.	
(e) Inclu	des \$ accrual of discount less \$ amortization of premium and less \$	paid for accrued int	erest on purchases.
(f) Include			•
• •			
(g) Inclu segr	des \$ investment expenses and \$ investment taxes, licenses and fees, excluding feegated and Separate Accounts.	ederal income taxes, att	ributable to
(h) Inclu	des \$ interest on surplus notes and \$ interest on capital notes.		

**EXHIBIT OF CAPITAL GAINS (LOSSES)** 

(i) Includes \$ depreciation on real estate and \$ depreciation on other invested assets.

	EVUIDII	OF CAPI	I AL GAIN	O (LUOOE	.3)	
		1	2	3	4	5
		Realized Gain (Loss) On Sales or Maturity	Other Realized Adjustments	Total Realized Capital Gain (Loss) (Columns 1 + 2)	Change in Unrealized Capital Gain (Loss)	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 (unaffiliated)	20,587,010		20,587,010		
1.3	Bonds of affiliates					
2.1	Preferred stocks (unaffiliated)					
2.11	Preferred stocks of affiliates					
2.2	Common stocks (unaffiliated)					
2.21	Common stocks of affiliates					
3.	Mortgage loans					
4.	Real estate					
5.	Contract loans					
6.	Cash, cash equivalents and short-term investments			271		
7.	Derivative instruments					
8.	Other invested assets					
9.	Aggregate write-ins for capital gains (losses)					
10.	Total capital gains (losses)	20,587,281		20,587,281		
	DETAILS OF WRITE-INS					
0901.						
0902.						
0903.						
0998.	Summary of remaining write-ins for Line 9 from overflow page					
0999.	Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above)					

#### .\_

## ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Cape Verity III, Inc.

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

	EXHIBIT - 1 PAR	I I - PKEI	VIIUIVIS ANL	ANNUIT	CONSIDE	KATIONS F	OR LIFE AI		ENI AND	HEALIR CO	JNIKACI	•	
		1	2	Ordi	narv	5	Gro			Accident and Health	1	11	12
		·	_	3	4 Individual	Credit Life (Group	6	7	8	9 Credit (Group and	10	Aggregate of All Other Lines of	Fraternal (Fraternal Benefit
		Total	Industrial Life	Life Insurance	Annuities	and Individual)	Life Insurance	Annuities	Group	Individual)	Other	Business	Societies Only)
	FIRST YEAR (other than single)					,				,			•
	Uncollected												
2.	Deferred and accrued Deferred , accrued and uncollected:												
3.	3.1 Direct												
	3.2 Reinsurance assumed												
	3.3 Reinsurance ceded												
	3.4 Net (Line 1 + Line 2)												
4.	Advance												
	Line 3.4 - Line 4 Collected during year:												
0.	6.1 Direct												
	6.2 Reinsurance assumed												
	6.3 Reinsurance ceded												
	6.4 Net												
7.	Line 5 + Line 6.4												
8. 9.	Prior year (uncollected + deferred and accrued - advance) First year premiums and considerations: 9.1 Direct												
	9.2 Reinsurance assumed												
	9.3 Reinsurance ceded												
	9.4 Net (Line 7 - Line 8)												
	SINGLE												
10.	Single premiums and considerations:												
	10.1 Direct												
	10.2 Reinsurance assumed 10.3 Reinsurance ceded												
	10.4 Net					-							
	RENEWAL												
	Uncollected												
	Deferred and accrued	6,774,13	2	6,774,132									
13.	Deferred, accrued and uncollected: 13.1 Direct												
	13.1 Direct	6,774,13		6.774.132									
	13.3 Reinsurance ceded	0,774,10		0,774,102									
	13.4 Net (Line 11 + Line 12)	6,774,13	2	6,774,132									
	Advance												
	Line 13.4 - Line 14	6,774,13	2	6,774,132									
16.	Collected during year: 16.1 Direct												
	16.2 Reinsurance assumed		3	99, 107, 103									
	16.3 Reinsurance ceded												
	16.4 Net	99, 107, 10		99, 107, 103									
17.	Line 15 + Line 16.4	105,881,23		105,881,236									
18.	Prior year (uncollected + deferred and accrued - advance) .	7,478,99	6	7,478,996					ļ			ļ	
19.	Renewal premiums and considerations: 19.1 Direct												
	19.1 Direct	98,402,24	n						·				
	19.3 Reinsurance ceded	, 402, 24											
	19.4 Net (Line 17 - Line 18)	98,402,24	0	98,402,240									
	TOTAL							<u> </u>					
20.	Total premiums and annuity considerations:												
	20.1 Direct	98,402,24		98.402.240									
	20.3 Reinsurance ceded	90,402,24	·	90,402,240									
	20.4 Net (Lines 9.4 + 10.4 + 19.4)	98,402,24	0	98,402,240		-							
		00, .3E,E,	- 1	00, .02,210		1			l .	1		1	1

## \_

## ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Cape Verity III, Inc.

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

			TOL ALLO	WAITOLO A	IND COM	WII SOIONS IN	Insur	,	Siliess Oi	ii <b>y</b> /			
		1	2	Ordin	nary	5	Gro	oup		Accident and Health		11	12
		Total	Industrial Life	3 Life Insurance	4 Individual Annuities	Credit Life (Group and Individual)	6 Life Insurance	7 Annuities	8 Group	9 Credit (Group and Individual)	10 Other	Aggregate of All Other Lines of Business	Fraternal (Fraternal Benefit Societies Only)
		Total	ilidustilai Lile	Life irisurance	Ailiuilles	and individual)	Life insurance	Armunes	Group	iliulviduai)	Other	Dusiness	Societies Only)
	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	9,438,274		9,438,274									
	25.3 Net ceded less assumed	(9,438,274)		(9,438,274)									
26.	Totals:												
	26.1 Reinsurance ceded (Page 6, Line 6)												
	26.2 Reinsurance assumed (Page 6, Line 22)	9,438,274		9,438,274									
	26.3 Net ceded less assumed	(9,438,274)		(9,438,274)									
	COMMISSIONS INCURRED (direct business only)			(0,100,00									
27	First year (other than single)												
	Single												
	Renewal												
	Deposit-type contract funds												
	Totals (to agree with Page 6, Line 21)												

# Exhibit 2 - General Expenses

# NONE

Exhibit 3 - Taxes, Licenses and Fees **NONE** 

Exhibit 4 - Dividends or Refunds

NONE

## **EXHIBIT 5 - AGGREGATE RESERVE FOR LIFE CONTRACTS**

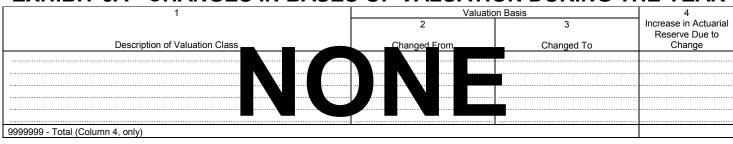
1	2	3	4	5 Credit (Group and	6
Valuation Standard	Total (a)	Industrial	Ordinary	Individual)	Group
	116,897,324		116,897,324		
	3,930,584,301		3,930,584,301		
100003. 2001 CSO 3.50% NLP 2013-NB	99,954,374		99,954,374		
199997. Totals (Gross)	4,147,435,999		4,147,435,999		
199998. Reinsurance ceded					
199999. Life Insurance: Totals (Net)	4,147,435,999		4,147,435,999		
299998. Reinsurance ceded		XXX		XXX	
299999. Annuities: Totals (Net)		XXX		XXX	
399998. Reinsurance ceded					
399999. SCWLC: Totals (Net)					
499998. Reinsurance ceded					
499999. Accidental Death Benefits: Totals (Net)					
599998. Reinsurance ceded					
599999. Disability-Active Lives: Totals (Net)					
699998. Reinsurance ceded					
699999. Disability-Disabled Lives: Totals (Net)					
700001. For excess of valuation net premiums over					
corresponding gross premiums on respective					
policies, computed according to the standard	105 000 000		405 202 205		
of valuation required by this state	195,860,687		195,860,687		
799997. Totals (Gross)	195,860,687		195,860,687		
799998. Reinsurance ceded	105 000 005		105.000.005		
799999. Miscellaneous Reserves: Totals (Net)	195,860,687		195,860,687		
999999. Totals (Net) - Page 3, Line 1	4,343,296,686	_	4,343,296,686		_

а	) Included in the above table are amou	unts of deposit-type contracts that originally co	ontained a mortality risk. Amounts of deposit-type contra	acts in Column 2 that no longer contain	ı
	a mortality risk are Life Insurance \$	; Annuities \$	; Supplementary Contracts with Life Con	ntingencies \$;	
	Accidental Death Benefits \$	; Disability - Active Lives \$	; Disability - Disabled Lives \$	;	
	Miscellaneous Reserves \$				

## **EXHIBIT 5 - INTERROGATORIES**

1.1	Has the reporting entity ever issued both participating and non-participating contracts?	Yes	] :	] 1	No [X	]
1.2	If not, state which kind is issued.					
	Assumed Business Only					
2.1	Does the reporting entity at present issue both participating and non-participating contracts?	. Yes	] :	] 1	No [X	]
2.2	If not, state which kind is issued.					
	Assumed Business Only					
3.	Does the reporting entity at present issue or have in force contracts that contain non-guaranteed elements?		; [ X	. ] 1	No [	]
	If so, attach a statement that contains the determination procedures, answers to the interrogatories and an actuarial opinion as described in the instructions.		-			
4.	Has the reporting entity any assessment or stipulated premium contracts in force?	Yes	] :	] 1	No [X	]
	If so, state:					
	4.1 Amount of insurance?	·				
	4.2 Amount of reserve?					
	4.3 Basis of reserve:					
	4.4 Basis of regular assessments:					
	4.5 Basis of special assessments:					
	4.6 Assessments collected during the year\$					
5.	If the contract loan interest rate guaranteed in any one or more of its currently issued contracts is less than 5%, not in advance, state the contract loan rate guarantees on any such contracts.					
6.	Does the reporting entity hold reserves for any annuity contracts that are less than the reserves that would be held on a standard basis?				No [X	
	6.1 If so, state the amount of reserve on such contracts on the basis actually held:					
	6.2 That would have been held (on an exact or approximate basis) using the actual ages of the annuitants; the interest rate(s) used in 6.1; and the same mortality basis used by the reporting entity for the valuation of comparable annuity benefits issued to standard lives. If the reporting entity has no comparable annuity benefits for standard lives to be valued, the mortality basis shall be the table most recently approved by the state of domicile for valuing individual annuity benefits:  \$\$\text{\$\text{\$}}\$\$					
	Attach statement of methods employed in their valuation.					
7.	Does the reporting entity have any Synthetic GIC contracts or agreements in effect as of December 31 of the current year?	. Yes	] :	1 1	X 1 ok	1
	7.1 If yes, state the total dollar amount of assets covered by these contracts or agreements\$					
	7.2 Specify the basis (fair value, amortized cost, etc.) for determining the amount:					
	7.3 State the amount of reserves established for this business: \$					
	7.4 Identify where the reserves are reported in the blank:					
8.	Does the reporting entity have any Contingent Deferred Annuity contracts or agreements in effect as of December 31 of the current year?					
	8.1 If yes, state the total dollar amount of account value covered by these contracts or agreements:					
	8.2 State the amount of reserves established for this business:\$					
	8.3 Identify where the reserves are reported in the blank:					
9.	Does the reporting entity have any Guaranteed Lifetime Income Benefit contracts, agreements or riders in effect as of December 31 of the current year?		] :	1 1	No [ X	1
	9.1 If yes, state the total dollar amount of any account value associated with these contracts, agreements or riders:					-
	9.2 State the amount of reserves established for this business:					
	9.3 Identify where the reserves are reported in the blank:					

# **EXHIBIT 5A - CHANGES IN BASES OF VALUATION DURING THE YEAR**



# Exhibit 6 - Aggregate Reserves for Accident and Health Contracts ${f N}$ ${f O}$ ${f N}$ ${f E}$

# Exhibit 7 - Deposit-Type Contracts **NONE**

Exhibit 8 - Contract Claims - Part 1 - Liability End of Current Year **NONE** 

## **EXHIBIT 8 - CLAIMS FOR LIFE AND ACCIDENT AND HEALTH CONTRACTS**

PART 2 - Incurred During the Year

	1	2		Ordinary		6	Gro	up		Accident and Health	
			3	4	5		7	8	9	10	11
	Total	Industrial Life (a)	Life Insurance (b)	Individual Annuities	Supplementary Contracts	Credit Life (Group and Individual)	Life Insurance (c)	Annuities	Group	Credit (Group and Individual)	Other
Settlements During the Year:											
1.1 Direct											
1.2 Reinsurance assumed	75,100,440		75,100,440								
1.3 Reinsurance ceded											
1.4 Net	(d)75,100,440		75,100,440								
Liability December 31, current year from Part 1:											
2.1 Direct											
2.2 Reinsurance assumed											
2.3 Reinsurance ceded											
2.4 Net											
Amounts recoverable from reinsurers December 31, curren year	t										
Liability December 31, prior year:     4.1 Direct											
4.2 Reinsurance assumed											
4.3 Reinsurance ceded											
4.4 Net											
Amounts recoverable from reinsurers December 31, prior year											
6. Incurred Benefits											
6.1 Direct											
6.2 Reinsurance assumed	75,100,440		75,100,440								
6.3 Reinsurance ceded											
6.4 Net	75,100,440		75,100,440								
ncluding matured endowments (but no	t guaranteed annual pure	endowments) amounting to	\$	in Line 1.1	, \$	in Line 1.4.	-			·	
<u> </u>	5 part	,	•	in Line 6.1	, ,						

\$ in Line 6.1, and \$ in Line 6.4.

(b) Including matured endowments (but not guaranteed annual pure endowments) amounting to \$ in Line 6.1, and \$ in Line 6.4.

(c) Including matured endowments (but not guaranteed annual pure endowments) amounting to \$ in Line 6.1, and \$ in Line 6.4.

(c) Including matured endowments (but not guaranteed annual pure endowments) amounting to \$ in Line 6.1, and \$ in Line 6.4.

(d) Includes \$ in Line 6.1, and \$ in Line 6.4.

# **EXHIBIT OF NON-ADMITTED ASSETS**

	EXHIBIT OF NON-ADMITTE	1	2	3
		Current Year Total Nonadmitted Assets	Prior Year Total Nonadmitted Assets	Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1.	Bonds (Schedule D)			,
2.	Stocks (Schedule D):			
	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 E - Part 1), cash equivalents (Schedule E - Part 2) and short-term investments (Schedule DA)			
6.	Contract loans			
7.	Derivatives (Schedule DB)			
8.	Other invested assets (Schedule BA)			
9.	Receivables for securities			(151,783)
10.	Securities lending reinvested collateral assets (Schedule DL)			
11.	Aggregate write-ins for invested assets			
12.	Subtotals, cash and invested assets (Lines 1 to 11)			
13.	Title plants (for Title insurers only)			
14.	Investment income due and 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 redetermination			
16.	Reinsurance:			
10.	16.1 Amounts recoverable 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 uninsured plans			
	Current federal and foreign income tax recoverable and interest thereon			
	Net deferred tax asset			
	Guaranty funds receivable or on deposit		200,100,302	
19. 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 parent, subsidiaries and affiliates			
24.	Health care and other amounts receivable		1 004	
25.	Aggregate write-ins for other than invested assets		1,904	1,904
26. 27.	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)  From Separate Accounts, Segregated Accounts and Protected Cell Accounts			
28.	Total (Lines 26 and 27)	215,497,806	209,152,806	
20.	DETAILS OF WRITE-INS	210,401,000	200, 102,000	(0,040,000)
1101				
1101.				
1102.				
1103.	Cumman of remaining units ine fact ine 44 from granflow need			
1198.	Summary of remaining write-ins for Line 11 from overflow page			
1199.	Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)		1.00	1.00:
2501.	Accounts Receivable - Misc		1,904	1,904
2502.				
2503.				
2598.	Summary of remaining write-ins for Line 25 from overflow page			
2599.	Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)		1,904	1,904

#### 1. Summary of Significant Accounting Policies and Going Concern

#### A. Accounting Practices

The accompanying financial statements of Cape Verity III, Inc. ("Cape Verity III" or "the Company") are presented on the basis of accounting practices prescribed or permitted by the Insurance Division, Department of Commerce, of the State of Iowa (Iowa Department). The National Association of Insurance Commissioners ("NAIC") Accounting Practices & Procedures Manual (NAIC SAP) has been adopted as a component of prescribed or permitted practices by the State of Iowa.

Pursuant to lowa Administrative Code ("IAC") Section 191-99.11(3), *Limited Purpose Subsidiary Life Insurance Company*, the Company has included as an admitted asset the outstanding principal amount of a Variable Funding Puttable Note (contingent note) serving as collateral for reinsurance credit taken by an affiliated cedant in connection with a reinsurance agreement entered into between the Company and the affiliated cedant. The contingent note was issued by RGA Worldwide Reinsurance Company, Ltd, and is held for the benefit of the affiliated cedant. The contingent note is not included as a risk-based asset in the Company's risk-based capital calculation.

A reconciliation of the Company's net income (loss) and statutory surplus between practices prescribed and permitted by the State of Iowa and NAIC SAP is shown below:

	SSAP#	F/S Page	F/S Line #	2020	2019
Net Income					
(1) State basis (Page 4, Line 35, Columns 1 & 2)	XXX	XXX	XXX	\$(26,383,653)	\$(932,102,576)
(2) State prescribed practices that are an increase / (decrease) from NAIC SAP:					
(3) State permitted practices that are an increase / (decrease) from NAIC SAP:					
(4) NAIC SAP (1-2-3=4)	xxx	XXX	xxx	\$ (26,383,653)	\$ (932,102,576)
Surplus					
(5) State basis (Page 3, Line 38, Columns 1 & 2)	XXX	XXX	XXX	\$ 298,973,731	\$ 257,335,352
(6) State prescribed practices that are an increase / (decrease) from NAIC SAP:					
	SSAP 4	3	31	1,207,720,792	1,264,036,340
(7) State permitted practices that are an increase / (decrease) from NAIC SAP:					
(8) NAIC SAP (5-6-7=8)	XXX	XXX	XXX	\$ (908,747,061)	\$(1,006,700,988)

If the Company had not been permitted to include the contingent note in surplus, the Company's risk-based capital would have been below Mandatory Control Level.

#### B. Use of Estimates in the Preparation of the Financial Statements

The preparation of financial statements in conformity with Statutory Accounting Principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities. It also requires disclosure of contingent assets and liabilities as of the date of the financial statements and the reported amounts of revenue and expenses during the period. Actual results could differ from those estimates.

#### C. Accounting Policy

Life premiums are recognized as income over the premium paying period of the related policies. Reinsurance treaties that do not meet the definition of risk transfer are recorded under the rules of deposit accounting as prescribed in Statement of Statutory Accounting Principles ("SSAP") No. 61R – *Life, Deposit-Type and Accident and Health Reinsurance* and are carried as a deposit liability, net income and expenses are shown in the aggregate write in line on the summary of operations. Expenses incurred in connection with acquiring new insurance business, including the acquisition costs such as sales commissions, are charged to operations as incurred.

In addition, the Company uses the following accounting policies, as applicable:

- (1) Short-term investments that have original maturities of greater than three months and less than twelve months at date of purchase are carried at amortized cost, which approximates fair value.
- (2) Bonds not backed by other loans are stated at amortized cost or fair value, using the modified scientific method, in accordance with the NAIC *Purposes and Procedures* Manual of the Capital Markets and Investment Analysis Office.
- (3) Common stocks Not Applicable
- (4) Preferred stocks Not Applicable
- (5) Mortgage loans Not Applicable
- (6) Loan-backed securities Not Applicable
- (7) Investments in subsidiaries, controlled and affiliated entities Not Applicable
- $(8) \quad \text{Investments in joint ventures, partnerships and limited liability entities Not Applicable}$
- (9) Derivatives Not Applicable
- (10) Investment income as a factor in the premium deficiency calculation Not Applicable
- (11) Liabilities for losses and loss/claim adjustment expenses Not Applicable
- (12) Changes in capitalization policy Not Applicable
- (13) Pharmaceutical rebate receivables Not Applicable

#### D. Going Concern

There is no substantial doubt about the Company's ability to continue as a going concern.

#### 2. Accounting Changes and Corrections of Errors

During the 2018 audit, corrections were made to 2018 and prior period balances resulting in a \$42,041 increase in Renewal Premiums and a \$445,052 decrease in Reserves. This resulted in taxes being understated by \$84,632. In accordance with SSAP No. 3 - Accounting Changes and Corrections of Errors, the net of tax impact of these changes are being treated as a correction of an error and presented as an adjustment to unassigned surplus of \$0 for the year ended December 31, 2020.

#### 3. Business Combinations and Goodwill

- A. Statutory Purchase Method Not Applicable
- B. Statutory Merger Not Applicable
- C. Assumption Reinsurance Not Applicable
- D. Impairment Loss Not Applicable
- 4. Discontinued Operations Not Applicable

#### 5. Investments

- A. Mortgage Loans, including Mezzanine Real Estate Loans Not Applicable
- B. Debt Restructuring Not Applicable
- C. Reverse Mortgages Not Applicable
- D. Loan-Backed Securities
  - (1) Loan-backed and structured securities ("LBASS") are valued and reported in accordance with SSAP 43R Loan-Backed and Structured Securities. Prepayment assumptions are primarily obtained from external sources or internal estimates. These assumptions are consistent with the current interest rate and economic environment. The prospective adjustment method is used on most non-agency LBASS. Fair values are based on independent pricing sources. The Company reviews securities at least quarterly for other-than-temporary impairments ("OTTI") using current cash flow assumptions. The Company did not recognize any OTTI charges on loan-backed securities as of December 31, 2020 and December 31, 2019, respectively.
  - (2) Loan-backed and structured securities with a recognized other-than-temporary impairment (OTTI) None
  - (3) Securities held that were other-than-temporarily impaired due to the present value of cash flows expected to be collected was less than the amortized cost of securities None
  - (4) All impaired securities for which an OTTI has not been recognized in earnings as a realized loss
    - a. The aggregate amount of unrealized losses:
      - Less than 12 months
         12 months or longer
         The aggregate related fair value of securities with unrealized losses:
    - b. The aggregate related fair value of securities with unrealized losses:

      - 2. 12 months or longer.....
  - (5) The Company evaluates whether credit impairment exists by considering primarily the following factors: a) changes in the financial condition, credit rating and near term prospects of the issuer, b) whether the issuer is current on contractually obligated interest and principal payments, c) changes in the financial condition of the security's underlying collateral, d) the payment structure of the security and 3) the length of time and extent to which the fair value has been less than amortized cost of the security.
- E. Dollar Repurchase Agreements and/or Securities Lending Transactions Not Applicable
- F. Repurchase Agreements Transactions Accounted for as Secured Borrowing Not Applicable
- ${\sf G.} \quad {\sf Reverse \ Repurchase \ Agreements \ Transactions \ Accounted \ for \ as \ Secured \ Borrowing Not \ Applicable}$
- H. Repurchase Agreements Transactions Accounted for as a Sale Not Applicable
- I. Reverse Repurchase Agreements Transactions Accounted for as a Sale Not Applicable
- J. Real Estate Not Applicable
- K. Low-Income Housing Tax Credits (LIHTC) Not Applicable
- L. Restricted Assets Not Applicable
- M. Working Capital Finance Investments Not Applicable
- N. Offsetting and Netting of Assets and Liabilities Not Applicable
- O. 5GI Securities Not Applicable
- P. Short Sales Not Applicable
- Q. Prepayment Penalty and Acceleration Fees

	General Account	Separate Account
(1) Number of CUSIPs	1	
(2) Aggregate amount of investment income	\$ 1,198,533	\$

#### 6. Joint Ventures, Partnerships and Limited Liability Companies

A. Investments in Joint Ventures, Partnerships or Limited Liability Companies that Exceed 10% of Admitted Assets

The Company has no investments in joint venture, partnerships or limited liability companies that exceed 10% of its admitted assets as of December 31, 2020 and December 31, 2019.

B. Impaired Investments in Joint Ventures, Partnerships and Limited Liability Companies

The Company recognizes impairments when it is probable that it will be unable to recover the carrying amount of the investment or there is evidence indicating inability of the investee to sustain earnings that would justify the carrying value of the investment. The Company did not have any impairment in joint ventures, partnerships, or limited liability companies as of December 31, 2020 and December 31, 2019.

- 7. Investment Income Not Applicable
- 8. Derivative Instruments Not Applicable

#### 9. Income Taxes

- A. Components of the Net Deferred Tax Asset/(Liability)
  - (1) Change between years by tax character

			2020			2019			Change	
		(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
		Ordinary	Capital	Total (Col 1+2)	Ordinary	Capital	Total (Col 4+5)	Ordinary (Col 1-4)	Capital (Col 2-5)	Total (Col 7+8)
(a)	Gross deferred tax assets	\$ 226,858,082	\$	\$ 226,858,082	\$ 217,814,930	\$	\$ 217,814,930	\$ 9,043,152	\$	\$ 9,043,152
(b)	Statutory valuation allowance adjustments									
(c)										
(d)	Deferred tax assets nonadmitted	215,346,025		215,346,025	209,150,901		209,150,901	6,195,124		6,195,124
(e)	Subtotal net admitted deferred tax asset (1c - 1d)	\$ 11,512,057	\$	\$ 11,512,057	\$ 8,664,029	\$	\$ 8,664,029	\$ 2,848,028	\$	\$ 2,848,028
(f)	Deferred tax liabilities	7,323,980	4,188,077	11,512,057	8,298,099	365,930	8,664,029	(974,119).	3,822,147	2,848,028
(g)	Net admitted deferred tax asset/(net deferred tax liability) (1e - 1f)	\$ 4,188,077	\$ (4,188,077)	\$ -	\$ 365,930	\$ (365,930)	\$ -	\$ 3,822,147	\$ (3,822,147)	\$ -

The ultimate realization of deferred tax assets depends on the generation of future taxable income during the periods in which the temporary differences are deductible and prior to the expiration of capital loss, net operating loss and tax credit carry-forwards. Management considers the scheduled reversal of deferred tax liabilities (including the impact of available carry-back and carry-forward periods), projected taxable income, and tax planning strategies in making this assessment. Management believes it is more likely than not that all deferred tax assets will be realized based on projected taxable income and available tax planning strategies. There were no tax planning strategies used related to reinsurance.

(2) Admission calculation components SSAP No. 101

The amount of admitted adjusted gross deferred tax assets admitted under each component of SSAP 101:

		2020			2019			Change	
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
	Ordinary	Capital	Total (Col 1+2)	Ordinary	Capital	Total (Col 4+5)	Ordinary (Col 1-4)	Capital (Col 2-5)	Total (Col 7+8)
(a) Federal income taxes paid in prior years recoverable through loss carrybacks	\$	\$	\$	\$	\$	\$	\$	\$	\$
(b) Adjusted gross deferred tax assets expected to be realized (excluding the amount of deferred tax assets from 2(a) above) after application of the threshold limitation (lesser of 2(b)1 and 2(b)2 below)									
Adjusted gross deferred tax assets expected to be realized following the balance sheet date									
Adjusted gross deferred tax assets allowed per limitation threshold	XXX	XXX	32,846,060	XXX	XXX	38,600,135	XXX	XXX	(5,754,075)
(c) Adjusted gross deferred tax assets (excluding the amount of deferred tax assets from 2(a) and 2(b) above) offset by gross deferred tax liabilities	11,512,057		11,512,057	8,298,099	365,930	8,664,029	3,213,958 .	(365,930)	2,848,028 .
(d) Deferred tax assets admitted as the result of application of SSAP No. 101. Total (2(a) + 2(b) + 2(c))	\$ 11,512,057	\$	\$ 11,512,057	\$ 8,298,099	\$ 365,930	\$ 8,664,029	\$ 3,213,958	\$ (365,930)	\$ 2,848,028

(3) Ratio used as basis of admissibility

	2020	2019
(a) Ratio percentage used to determine recovery period and threshold limitation amount	1,064.579 %	1,003.807 %
(h) Amount of adjusted capital and surplus used to determine recovery period and threshold limitation in 2(h)2 above	\$ 218 973 732	\$ 257 334 233

## 9. Income Taxes (Continued)

- (4) Impact of tax-planning strategies
  - (a) Determination of adjusted gross deferred tax assets and net admitted deferred tax assets, by tax character as a percentage 2020

2019

Change

				(1)	(2)	(3)	(4)	(5)	(6)
				Ordinary	Capital	Ordinary	Capital	Ordinary (Col. 1-3)	Capital (Col. 2-4)
		1.	Adjusted gross DTAs amount from Note 9A1(c)	\$ 226.858.082	¢	\$ 217.81 <i>4</i> .930	¢	\$ 9.043.152	¢
		2.							
		3.	Net admitted adjusted gross DTAs amount from Note 9A1(e)						
		4.	Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of tax planning strategies	%	%	%		%	6%.
	(b)	Us	e of reinsurance-related tax-planning strat	egies					
		Do	pes the company's tax-planning strategies	include the use	of reinsurance	.?			No
B.	Regard	ing [	Deferred Tax Liabilities That Are Not Recog	gnized					
	There a	are n	o temporary differences for which deferred	d tax liabilities a	are not recogniz	zed.			
C.			oonents of Current Income Taxes Incurred		3				
							(1)	(2)	(3)
	Curren	t inc	ome taxes incurred consist of the following	major compone	nts:		2020	2019	Change (1-2)
	1. C		nt Income Tax						
	(a		ederal						
	(t	,	oreign						
	(0		ubtotal						
	(0	,	ederal income tax on net capital gains tilization of capital loss carry-forwards				•	•	· ·
	(€ (f		ther						***************************************
	(r	,	ederal and foreign income taxes incurred				4,874,232		\$ 31,524,396
	(2					<u>*</u>	· · ·	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
							(1) 2020	(2) 2019	(3) Change (1-2)
	2. D	eferr	ed Tax Assets						
	(a	a) C	rdinary						
		(	Discounting of unpaid losses			\$		\$	\$
		(2	2) Unearned premium reserve						
		(;	B) Policyholder reserves				. 104,692,166	101,585,758	3,106,408
		(4	1) Investments						
		(	5) Deferred acquisition costs						
		((	Policyholder dividends accrual						
		`	7) Fixed assets						
			Compensation and benefits accrual						
		,	9) Pension accrual						
			11) Net operating loss carry-forward						
			12) Tax credit carry-forward						
		,	13) Other (including items less than 5% of to						
		`	(99) Subtotal						
	(b	) S	tatutory valuation allowance adjustment						
	(0	) N	lonadmitted				. 215,346,025	209,150,901	6,195,124
	(0	d) A	dmitted ordinary deferred tax assets (2a99 -	2b - 2c)		····· \$	11,512,057 .	\$ 8,664,029	\$ 2,848,028
	(€	e) C	apital						
		(	l) Investments						
		(:	2) Net capital loss carry-forward						
			Real estate						
		(4	4) Other (including items < 5% of total capit	•					
	/2	١ .	(99) Subtotal						
	(f		tatutory valuation allowance adjustment Ionadmitted						
	(ç (h	.,	dmitted capital deferred tax assets (2e99 - 2						
	(i (i'		dmitted deferred tax assets (2d + 2h)						
	ψ.					<u>*</u>	, =,007	. 5,55 ,1027	

#### 9. Income Taxes (Continued)

					(1)	(2)	(3)
				_	2020	2019	Change (1-2)
3.	Defe	erred	Tax Liabilities				
	(a)	Ordi	inary				
		(1)	Investments	\$	270,029	. \$ 9,464	\$ 260,565
		(2)	Fixed assets				
		(3)	Deferred and uncollected premium		1,431,396	1,579,418	(148,022)
		(4)	Policyholder reserves		5,590,681	6,708,817	(1,118,136)
		(5)	Other (including items <5% of total ordinary tax liabilities)		31,874	400	31,474
			(99) Subtotal	\$	7,323,980	\$ 8,298,099	\$(974,119).
	(b)	Сар	ital				
		(1)	Investments	\$	4,188,077	. \$ 365,930	\$ 3,822,147
		(2)	Real estate				
		(3)	Other (including items <5% of total capital tax liabilities)				
			(99) Subtotal	\$	4,188,077	\$ 365,930	\$ 3,822,147
	(c)	Def	erred tax liabilities (3a99 + 3b99)	····· <u>\$</u>	11,512,057	\$ 8,664,029	\$ 2,848,028
4.	Net	defe	rred tax assets/liabilities (2i - 3c)	\$	_	\$ -	\$ -

The change in deferred income taxes reported in surplus before consideration of nonadmitted assets is comprised of the following components:

	2020 2019	Change
Adjusted gross deferred tax assets	\$ 226,858,082 \$ 217,814,930	\$ 9,043,152
Total deferred tax liabilities	(11,512,057) (8,664,029	) \$ (2,848,028)
Net deferred tax assets (liabilities)	\$ 215,346,025 \$ 209,150,901	\$ 6,195,124
Tax effect of unrealized gains (losses)		
Change in net deferred income tax		\$ 6,195,124

#### D. Among the More Significant Book to Tax Adjustments

The significant items causing a difference between the statutory federal income tax rate and the Company's effective income tax rate are as follows:

	2020	Effective Tax Rate
Provision computed at statutory rate	\$ (4,516,978).	21.000 %
IMR	 3,164,613	-14.713
Non-admitted assets	 31,475	-0.146
Total	\$ (1,320,890)	6.141 %
	 2020	Effective Tax Rate
Federal and foreign income taxes incurred	\$ 	
Federal and foreign income taxes incurred Realized capital gains (losses) tax	4,373,049	-20.331 %
	 4,373,049	-20.331 % -2.330

#### E. Operating Loss and Tax Credit Carryforwards

- (1) At December 31, 2020 the Company does not have any net operating loss carry-forwards, capital loss carry-forwards or foreign tax credits.
- (2) Income tax expense available for recoupment

As a result of recent tax reform (TCJA), the Company can no longer carry back future losses, therefore there are no available taxes for recoupment.

- (3) Deposits admitted under IRC Section 6603 Not Applicable
- F. Consolidated Federal Income Tax Return
  - (1) The Company will file a consolidated Federal income tax return with Commonwealth Annuity and Life Insurance Company ("CwA"), Accordia Life and Annuity Company ("Accordia"), Cape Verity III, Inc., Gotham Re, Inc., Forethought National Life Insurance Company, Forethought Life Insurance Company and First Allmerica Financial Life Insurance Company for the period ending December 31, 2020. The Company is a party to a written agreement, which sets forth the manner in which the total combined Federal income tax is allocated to each entity within the consolidated group. Pursuant to this agreement, Accordia is obligated to perform all of the Company's tax sharing obligations and is entitled to accept all of the Company's tax sharing benefits. Accordingly, any current taxes payable or receivable of the Company are reflected by Accordia.
  - (2) The IRS routinely audits the Company's federal income tax returns, and when appropriate, provisions are made in the financial statements in anticipation of the results of these audits. The Company believes that its income tax filing positions and deductions will be sustained on audit, and does not anticipate any adjustments that will result in a material, adverse effect on the Company's financial condition, results of operations, or cash flow. Therefore, no reasonable estimate can be made for tax loss contingencies and none has been recorded.
- G. Federal or Foreign Income Tax Loss Contingencies Not Applicable
- H. Repatriation Transition Tax (RTT) Not Applicable
- I. Alternative Minimum Tax (AMT) Credit Not Applicable

#### 10. Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties

- A. Nature of Relationships Cape Verity III, Inc. was formed on August 15, 2013 and commenced business as a special purpose financial captive life insurance company domiciled and licensed in the state of lowa. All outstanding shares of the Company's common stock are directly owned by Accordia, a stock life insurance company domiciled in the state of lowa. All outstanding shares of Accordia are owned by Commonwealth Annuity, an insurance company incorporated in the state of Massachusetts. Accordia carries the Company at its statutory net worth, as prescribed in the Securities Valuations Office Purposes and Procedures manual. Accordia is an indirect wholly owned subsidiary of Global Atlantic Financial Group Limited ("GAFG").
- B. Detail of Related Party Transactions None
- C. Transactions With Related Party Who Are Not Reported on Schedule Y None
- D. Amounts Due to or From Related Parties The Company had \$0 and \$0 receivables due from affiliates as of December 31, 2020 and December 31, 2019, respectively. The Company had \$0 and \$0 payable due to affiliates as of December 31, 2020 and December 31, 2019, respectively.
- E. Management, Service Contracts, Cost Sharing Arrangement The Company has entered into administration, shared services, management services, and investment management services agreements with related parties. These affiliates provide legal, compliance, technology, operations, financial reporting, human resources, and risk management services. The Company did not record expenses for these agreements at December 31, 2020.
- F. Guarantees or Contingencies Not Applicable
- G. Nature of Relationships that Could Affect Operations The Company's various affiliated relationships and agreement/transactions are discussed above in Note 10F. The operating results and financial position of the Company as reported in these financial statements would not be significantly different from those that would have been obtained if the Company were autonomous.
- H. Amount Deducted for Investment in Upstream Company Not Applicable
- I. Detail of Investments in Affiliates Greater Than 10% of Admitted Assets Not Applicable
- J. Write-Down for Impairments of Investments in Subsidiary Controlled or Affiliated Companies Not Applicable
- K. Foreign Subsidiary Value Using CARVM Not Applicable
- L. Downstream Holding Company Value Using Look-Through Method Not Applicable
- M. All SCA Investments Not Applicable
- N. Investment in Insurance SCAs Not Applicable
- O. SCA and SSAP No. 48 Entity Loss Tracking Not Applicable

#### 11. Debt

- A. Debt, Including Capital Notes Not Applicable
- B. FHLB (Federal Home Loan Bank) Agreements Not Applicable

# 12. Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans - Not Applicable

#### 13. Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations

- A. The Company has 25,000 shares authorized, issued and outstanding. All shares are common stock.
- B. The Company has no preferred stock authorized.
- C. The payment of dividends by the Company to its parent is regulated under lowa law. Under lowa law, the Company may pay dividends only from the earned surplus arising from its business and must receive the prior approval (or non-disapproval) of the lowa Insurance Commissioner to pay any dividend that would exceed certain statutory limitations.
- D. As of December 31, 2020 and December 31, 2019, no dividends were paid.
- E. Iowa law provides that a Limited Purpose Subsidiary Life Insurance Company ("LPS") may pay dividends that do not decrease the capital of the LPS below the minimum capital and surplus requirements designated by the commissioner of the Iowa Department, provided that payment of such dividend would not jeopardize the ability of the LPS to fulfill its obligations.
- F. The unassigned surplus is held for the benefit of the Company's shareholder.
- G. There were no unpaid advances to surplus.
- H. Stock Held for Special Purposes

No shares of stock are held by the Company, including stock of affiliated companies, for special purposes.

- I. There were no changes in balances of special surplus.
- J. Unassigned Funds (Surplus)

There portion of unassigned funds (surplus) represented or reduced by unrealized gains and (losses), net of capital gains tax, was \$0 at December 31, 2020 and December 31, 2019, respectively.

- K. Company-Issued Surplus Debentures or Similar Obligations Not Applicable
- L. Impact of Any Restatement Due to Prior Quasi-Reorganizations Not Applicable
- M. Effective Date(s) of Quasi-Reorganizations in the Prior 10 Years Not Applicable

#### 14. Liabilities, Contingencies and Assessments

A. Contingent Commitments - Not Applicable

#### 14. Liabilities, Contingencies and Assessments (Continued)

#### B. Assessments

Unfavorable economic conditions may contribute to an increase in the number of insurance companies that are under regulatory supervision. This may result in an increase in mandatory assessments by state guaranty funds, or voluntary payments by solvent insurance companies to cover losses to policyholders of insolvent or rehabilitated companies. Mandatory assessments, which are subject to statutory limits, can be partially recovered through a reduction in future premium taxes in some states. The Company is not able to reasonably estimate the potential impact of any such future assessments or voluntary payments.

- C. Gain Contingencies Not Applicable
- D. Claims Related Extra Contractual Obligation and Bad Faith Losses Stemming from Lawsuits Not Applicable
- E. Joint and Several Liabilities Not Applicable
- F. All Other Contingencies Not Applicable

#### 15. Leases

- A. Lessee Operating Lease Not Applicable
- B. Lessor Leases Not Applicable

# 16. Information About Financial Instruments With Off-Balance-Sheet Risk And Financial Instruments With Concentrations of Credit Risk - Not Applicable

#### 17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

- A. Transfers of Receivables Reported as Sales Not Applicable
- B. Transfers and Servicing of Financial Assets Not Applicable
- C. Wash Sales Not Applicable
- 18. Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans Not Applicable
- 19. Direct Premium Written/Produced by Managing General Agents/Third Party Administrators Not Applicable

#### 20. Fair Value Measurements

- A. Fair Value Measurement Not Applicable
- B. Other Fair Value Disclosures Not Applicable
- C. Fair Values for All Financial Instruments by Level 1, 2 and 3

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	Level 1	Level 2	Level 3	Not Practicable (Carrying Value)
Bonds	\$ 161,717,039	\$ 152,970,213	\$	\$ 161,717,039	\$	\$ \$
Short-term investments	18,840,796	18,840,796	18,840,796			 
Cash and equivalents	3,614,658	3,614,658	3,614,658			 
Total Assets	184.172.493	175.425.667	22,455,454	161.717.039		 

- D. Not Practicable to Estimate Fair Value Not Applicable
- E. Nature and Risk of Investments Reported at NAV Not Applicable

## 21. Other Items

A. Unusual or Infrequent Items

The Company had no reportable material extraordinary items.

- B. Troubled Debt Restructuring Not Applicable
- C. Other Disclosures

The Company is the holder of a contingent note security utilized to enable the Company to secure statutory reserve credit for the reinsurance ceded to the Company under its reinsurance agreement. Total outstanding principal of the contingent note as of December 31, 2020 was \$1,207,720,792.

The Company previously completed a conversion to a new life insurance administration system. In a limited number of cases, as a result of the conversion, the Company is using estimates for certain policyholder balances recorded in the financial statements. Any variances to the estimates will be recorded in future periods if estimates are revised or no longer utilized.

Effective April 1, 2019 Accordia recaptured business that was ceded to a subsidiary, Cape Verity II. Accordia retroceded this business to Cape Verity III resulting in a capital impact of \$50,000,000.

The Company's largest single life insurance policy face value as of December 31, 2020 is \$20,205,887.

D. Business Interruption Insurance Recoveries

The Company did not have any business interruption insurance recoveries as of December 31, 2020 and December 31, 2019.

E. State Transferable and Non-Transferable Tax Credits - Not Applicable

#### 21. Other Items (Continued)

- F. Subprime-Mortgage-Related Risk Exposure
  - (1) While the Company holds no direct investments in subprime mortgage loans, the Company may have limited exposure to subprime borrowers through direct investments in primarily investment grade subprime residential mortgage-backed securities. The Company's definition of subprime is predominantly based on borrower statistics from a residential pool of mortgages. Included in the statistics evaluated is the average credit score of the borrower, the loan-to-value ratio, the debt-to-income statistics, and the diversity of all these statistics across the borrower profile. As is true for all securities in the Company's portfolio, the entire mortgage-backed asset portfolio is reviewed for impairments at least quarterly. Additionally, reviews of specific mortgage-backed securities are made on a periodic basis by reviewing both the unrealized gain/loss as well as changes to the underlying statistics. Included in the analysis are current delinquency and default statistics, as well as the current and original levels of subordination on the security.
  - (2) Direct exposure through investments in subprime mortgage loans Not Applicable
  - (3) Direct exposure through other investments Not Applicable
  - (4) Underwriting exposure to subprime mortgage risk through Mortgage Guaranty or Financial Guaranty insurance coverage Not Applicable
- G. Retained Assets Not Applicable
- H. Insurance-Linked Securities (ILS) Contracts Not Applicable
- I. The Amount That Could Be Realized on Life Insurance Where the Reporting Entity is Owner and Beneficiary or Has Otherwise Obtained Rights to Control the Policy Not Applicable

#### 22. Events Subsequent

Type I - Recognized Subsequent Events - No Type I subsequent events to report

Type II - Non-recognized Subsequent Events - No Type II subsequent events to report

Subsequent events have been considered through February 24, 2021.

#### KKR acquisition of Global Atlantic

On July 7, 2020, Magnolia Parent LLC, or "Magnolia," an indirect subsidiary of KKR & Co. Inc., or "KKR," Magnolia Merger Sub Limited, a direct subsidiary of Magnolia, or "Merger Sub" and, together with Magnolia, the "KKR Parties," entered into an agreement and plan of merger, or the "Merger Agreement," with Global Atlantic Financial Group Limited, or "GAFG," the indirect parent of the Company, Global Atlantic Financial Life Limited, the Company's parent, or "GAFLL," (which is owned by GAFG and LAMC LP), LAMC LP, and Goldman Sachs & Co. LLC, solely in its capacity as an equity representative.

Pursuant to the Merger Agreement, at the closing, Merger Sub will merge with and into GAFG, or the "GA Merger," with GAFG continuing as the surviving entity and a direct wholly-owned subsidiary of Magnolia. Immediately following the GA Merger, GAFLL will merge with and into GAFG with GAFG continuing as the surviving entity and a direct wholly-owned subsidiary of Magnolia. The outstanding debt securities of the GAFG's subsidiaries will remain outstanding obligations of solely such entities and will not be assumed or guaranteed by KKR.

Pursuant to the Merger Agreement, following the closing of the merger, Magnolia will pay shareholders of GAFG and GAFLL an aggregate amount equal to 1.0x GAFG's book value, excluding accumulated other comprehensive income, as of the date of closing determined using the accounting principles set forth in the Merger Agreement, subject to an equity roll-over for certain existing shareholders who elect to participate in the roll-over. The aggregate merger consideration will be allocated among each of the GAFG's and GAFLL's outstanding ordinary shares, incentive shares and equity awards in accordance with their terms. Under the terms of the Merger Agreement and in accordance with the applicable plan documentation, unvested GAFG restricted share awards will convert into the right to receive a number of Magnolia restricted units having the same value as the GAFG restricted share award immediately prior to the closing.

GAFG has made customary representations, warranties and covenants in the Merger Agreement, including, among others, covenants to (i) conduct its business in the ordinary course during the period between the execution of the Merger Agreement and the closing and (ii) not to engage in certain types of actions during this period unless agreed to in writing by Magnolia.

Pursuant to the Merger Agreement, the closing of the merger is subject to the satisfaction or waiver of certain customary closing conditions, including, among others: (i) obtaining the approval of a majority of the outstanding shares of GAFG, (ii) obtaining requisite regulatory approvals, including the approvals of the Massachusetts Division of Insurance, the Iowa Insurance Division, the Indiana Department of Insurance, the Bermuda Monetary Authority, and other regulatory authorities, (iii) expiration or earlier termination of any applicable waiting period under the Hart-Scott-Rodino Antitrust Improvements Act of 1976, as amended, and (iv) the absence of any judgment, injunction, order or decree prohibiting or enjoining the completion of the Merger. In addition, the obligation of the parties to complete the merger is subject to certain other customary conditions, including (a) subject to the standards set forth in the Merger Agreement, the accuracy of the representations and warranties of the other party and (b) compliance of the other party with its covenants in all material respects.

The Merger Agreement also contains certain customary provisions giving each of the KKR Parties and GAFG rights to terminate the Merger Agreement under certain circumstances.

In connection with the Merger Agreement, certain shareholders of GAFG representing over 50% of the issued and outstanding shares of GAFG have agreed to vote in favor of the Merger at any meeting of the shareholders of GAFG called to seek the adoption of the Merger Agreement and against any competing transaction.

In connection with the Merger Agreement, KKR Group Partnership L.P., an indirect subsidiary of KKR, has committed to provide the requisite equity financing to Magnolia to consummate the

Mergers and has guaranteed Magnolia's obligations to pay, up to a cap, any potential damages awards to GAFG under the Merger Agreement, in each case, subject to certain terms and conditions.

The foregoing description of the Merger Agreement and the transactions contemplated thereby does not purport to be complete and is subject to and qualified in its entirety by reference to the Merger Agreement.

#### COVID-19

The COVID-19 outbreak is currently impacting the United States and many countries around the world. Due to the recent and rapidly evolving nature of these events, the Company is unable to estimate the full impact at this time. However, at this time, the Company does not believe the situation will materially impact the Company's liability or capital position.

#### 23. Reinsurance

A. Ceded Reinsurance Report

Section 1 - General Interrogatories

(1) Are any of the reinsurers, listed in Schedule S as non-affiliated, owned in excess of 10% or controlled, either directly or indirectly, by the company or by any representative, officer, trustee, or director of the company?

Yes () No (X)

(2) Have any policies issued by the company been reinsured with a company chartered in a country other than the United States (excluding U.S. Branches of such companies) that is owned in excess of 10% or controlled directly or indirectly by an insured, a beneficiary, a creditor or any other person not primarily engaged in the insurance business?

Yes () No (X)

Section 2 - Ceded Reinsurance Report - Part A

(1) Does the company have any reinsurance agreements in effect under which the reinsurer may unilaterally cancel any reinsurance for reasons other than for nonpayment of premium or other similar credits?

Yes () No (X)

(2) Does the reporting entity have any reinsurance agreements in effect such that the amount of losses paid or accrued through the statement date may result in a payment to the reinsurer of amounts that, in aggregate and allowing for offset of mutual credits from other reinsurance agreements with the same reinsurer, exceed the total direct premium collected under the reinsured policies?

Yes () No (X)

Section 3 - Ceded Reinsurance Report - Part B

- (1) What is the estimated amount of the aggregate reduction in surplus, (for agreements other than those under which the reinsurer may unilaterally cancel for reasons other than for nonpayment of premium or other similar credits that are reflected in Section 2 above) of termination of ALL reinsurance agreements, by either party, as of the date of this statement? Where necessary, the company may consider the current or anticipated experience of the business reinsured in making this estimate. \$
- (2) Have any new agreements been executed or existing agreements amended, since January 1 of the year of this statement, to include policies or contracts that were in force or which had existing reserves established by the company as of the effective date of the agreement?

Yes () No (X)

- B. Uncollectible Reinsurance Not Applicable
- C. Commutation of Reinsurance Reflected in Income and Expenses Not Applicable
- D. Certified Reinsurer Rating Downgraded or Status Subject to Revocation Not Applicable
- E. Reinsurance of Variable Annuity Contracts with an Affiliated Captive Reinsurer Not Applicable
- F. Reinsurance Agreement with an Affiliated Captive Reinsurer Not Applicable
- $\textbf{G.} \quad \textbf{Ceding Entities That Utilize Captive Reinsurers to Assume Reserves Subject to the XXX/AXXX Captive Framework Not Applicable Captive Reinsurers to Assume Reserves Subject to the XXX/AXXX Captive Framework Not Applicable Captive Reinsurers to Assume Reserves Subject to the XXX/AXXX Captive Framework Not Applicable Captive Reinsurers to Assume Reserves Subject to the XXX/AXXX Captive Framework Not Applicable Captive Reinsurers to Assume Reserves Subject to the XXX/AXXX Captive Framework Not Applicable Captive Reinsurers to Assume Reserves Subject to the XXX/AXXX Captive Framework Not Applicable Captive Reinsurers and Captive Reinsurers a$
- H. Reinsurance Credit
  - (1)
  - (2)
  - (3)
  - (4)
  - (5) (6)

#### 24. Retrospectively Rated Contracts & Contracts Subject to Redetermination

The Company does not have any retrospectively rated contracts or contract subject to redetermination.

- A. Method Used to Estimate Not Applicable
- B. Method Used to Record Not Applicable
- C. Amount and Percent of Net Retrospective Premiums Not Applicable
- D. Medical Loss Ratio Rebates Required Pursuant to the Public Health Service Act Not Applicable
- E. Risk-Sharing Provisions of the Affordable Care Act (ACA)
  - (1) Accident and health insurance premium subject to the Affordable Care Act risk-sharing provisions

Did the reporting entity write accident and health insurance premium which is subject to the Affordable Care Act risk sharing provisions? NO

- (2) Impact of Risk-Sharing Provisions of the Affordable Care Act on admitted assets, liabilities and revenue for the current year Not Applicable
- (3) Roll-forward of prior year ACA risk-sharing provisions for the following asset (gross of any nonadmission) and liability balances, along with the reasons for adjustments to prior year balance Not Applicable
- (4) Roll-forward of risk corridors asset and liability balances by program benefit year Not Applicable
- (5) ACA risk corridors receivable as of reporting date Not Applicable
- 25. Change in Incurred Losses and Loss Adjustment Expenses Not Applicable

- 26. Intercompany Pooling Arrangements Not Applicable
- 27. Structured Settlements Not Applicable
- 28. Health Care Receivables Not Applicable
- 29. Participating Policies None
- 30. Premium Deficiency Reserves Not Applicable
- 31. Reserves for Life Contracts and Annuity Contracts
  - 1. The Company waives deduction of deferred fractional premiums upon death of insured and returns any portion of the final premium beyond the date of death. The reserve for surrender values promised in excess of the legally computed reserves is shown in Exhibit 5, Section G, line 2.
  - 2. Mean reserves for substandard policies are determined by computing the regular mean reserve for the policy and holding in addition one half of the extra premium charge for the year.
  - 3. As of December 31, 2020, the Company had \$5,086,836,941 of insurance in force for which the gross premiums were less than that net premiums according to the standard valuation set by the State of Iowa. Reserves to cover the above shortfall in premium totaled \$195,860,686 at December 31, 2020, are calculated annually, and were included in reserves on Page 3, line 1(Exhibit 5, Section G).
  - 4. The tabular interest at December 31, 2020 (Page 7, Line 4), tabular less actual reserve released (Page 7, Line 5) and tabular cost (Page 7, Line 9) have been determined by formula as described in the NAIC instructions for Page 7.
  - 5. The tabular interest on funds not involving life contingencies (Page 7, Part B, Line 3) has been determined in a manner consistent with that used for this item in Part A.
  - 6. Details for Other Changes

There is no significant change in reserves showing on Exhibit 7, Line 4, or the "Other Increases (net)" line on Page 7, Line 7, as of December 31, 2020.

- 32. Analysis of Annuity Actuarial Reserves and Deposit Type Contract Liabilities by Withdrawal Characteristics Not Applicable
- 33. Analysis of Life Actuarial Reserves by Withdrawal Characteristics
  - A. General Account

			Account Value	Cash Value	Reserve
(1)	Subj	ect to discretionary withdrawal, surrender values or policy loans:			
	a.	Term Policies with Cash Value	. \$	\$	\$
	b.	Universal Life			
	C.	Universal Life with Secondary Guarantees	68,764,835	60,874,841	298,727,372
	d.	Indexed Universal Life			
	e.	Indexed Universal Life with Secondary Guarantees	1,831,692,302	1,689,593,730	3,739,383,690
	f.	Indexed Life			***************************************
	g.	Other Permanent Cash Value Life Insurance			
	h.	Variable Life			
	i.	Variable Universal Life			***************************************
	j.	Miscellaneous Reserves			***************************************
(2)	Not s	subject to discretionary withdrawal or no cash values			
	a.	Term Policies without Cash Value	xxx	XXX	109,324,937
	b.	Accidental Death Benefits	xxx	XXX	
	C.	Disability - Active Lives	xxx	XXX	
	d.	Disability - Disabled Lives	xxx	XXX	***************************************
	e.	Miscellaneous Reserves	xxx	XXX	195,860,687
(3)	Tota	l (gross: direct + assumed)	1,900,457,137	1,750,468,571	4,343,296,686
(4)	Rein	surance Ceded			
(5)	Tota	I (net) (3) - (4)	\$ 1,900,457,137	\$ 1,750,468,571	\$ 4,343,296,686

- B. Separate Account with Guarantees Not Applicable
- C. Separate Account Nonguaranteed Not Applicable

## 33. Analysis of Life Actuarial Reserves by Withdrawal Characteristics (Continued)

D. Reconciliation of Total Life Insurance Reserves

		Amount
Life 8	& Accident & Health Annual Statement:	
(1)	Exhibit 5, Life Insurance Section, Total (net)	\$ 4,147,435,999
(2)	Exhibit 5, Accidental Death Benefits Section, Total (net)	
(3)	Exhibit 5, Disability – Active Lives Section, Total (net)	
(4)	Exhibit 5, Disability – Disabled Lives Section, Total (net)	
(5)	Exhibit 5, Miscellaneous Reserves Section, Total (net)	195,860,687
(6)	Subtotal	4,343,296,686
Sepa	rate Accounts Annual Statement:	
(7)	Exhibit 3, Line 0199999, Column 2	
(8)	Exhibit 3, Line 0499999, Column 2	
(9)	Exhibit 3, Line 0599999, Column 2	
(10)	Subtotal (Lines (7) through (9))	
(11)	Combined Total ((6) and (10))	

## 34. Premiums and Annuity Considerations Deferred and Uncollected

A. Deferred and Uncollected Life Insurance Premiums and Annuity Considerations

ре	Gross	Net of Loading
ustrial	\$	\$
linary new business		***************************************
linary renewal	6,774,132	6,774,132
edit life		
oup life		
oup annuity		
als	\$ 6,774,132	\$ 6,774,132
	dinary new businessdinary renewaldit life	dinary new business

- 35. Separate Accounts Not Applicable
- 36. Loss/Claim Adjustment Expenses None

## **GENERAL INTERROGATORIES**

# PART 1 - COMMON INTERROGATORIES GENERAL

1.1	Is the reporting entity a member of an Insurance Holding Company Sy is an insurer?  If yes, complete Schedule Y, Parts 1, 1A and 2					Yes [	Х ]	No [	]			
1.2	If yes, did the reporting entity register and file with its domiciliary State such regulatory official of the state of domicile of the principal insurer is providing disclosure substantially similar to the standards adopted by its Model Insurance Holding Company System Regulatory Act and mosubject to standards and disclosure requirements substantially similar	in the Holding Co the National Ass odel regulations	ompany System, a regis sociation of Insurance Co pertaining thereto, or is t	stration statement ommissioners (NAIC) in the reporting entity	. Yes [ )	( ] No [	. ]	N/A [	]			
1.3	State Regulating?					lo	wa					
1.4	Is the reporting entity publicly traded or a member of a publicly traded	group?				Yes [	]	No [ X	]			
1.5	If the response to 1.4 is yes, provide the CIK (Central Index Key) code	issued by the S	EC for the entity/group.									
2.1	Has any change been made during the year of this statement in the charge reporting entity?					Yes [	]	No [ X	]			
2.2	If yes, date of change:											
3.1	State as of what date the latest financial examination of the reporting	entity was made	or is being made			12/31	/201	9				
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 examined balance sheet and not the date the report was completed or released.						12/31/2014					
3.3	3 State as of what date the latest financial examination report became available to other states or the public 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).				04/29/2016							
3.4	By what department or departments?  lowa insurance Department				-							
3.5	Have all financial statement adjustments within the latest financial exastatement filed with Departments?				Yes [	] No [	]	N/A [	Х ]			
3.6	Have all of the recommendations within the latest financial examination	on report been co	omplied with?		Yes [	] No [	]	N/A [	Х]			
4.1	combination thereof under common control (other than salaried employees of the reporting entity), receive credit or commissions for or a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:  4.11 sales of new business?  4.12 renewals?							No [ X No [ X				
							-	No [ X No [ X	-			
5.1	Has the reporting entity been a party to a merger or consolidation duri If yes, complete and file the merger history data file with the NAIC.	ng the period co	vered by this statement	?		Yes [	]	No [ X	]			
5.2	If yes, provide the name of the entity, NAIC Company Code, and state ceased to exist as a result of the merger or consolidation.	of domicile (use	e two letter state abbrevi	iation) for any entity that h	ıas							
	1 Name of Entity		2 NAIC Company Code	3 State of Domicile								
	Name of Entity		NAIC Company Code	State of Dornicle								
6.1	Has the reporting entity had any Certificates of Authority, licenses or revoked by any governmental entity during the reporting period?					Yes [	]	No [ X	]			
6.2	If yes, give full information:											
7.1	Does any foreign (non-United States) person or entity directly or indire	ectly control 10%	or more of the reporting	g entity?		Yes [	Х ]	No [	]			
7.2	If yes, 7.21 State the percentage of foreign control;					-	100.0		<u></u> %			
	7.22 State the nationality(s) of the foreign person(s) or entity(s) or if th attorney-in-fact; and identify the type of entity(s) (e.g., individual,											
	1 Nationality		2 Type of Er	ntity								
	Bermuda	Corporation										

8.1 8.2	Is the company a subsidiary of a bank holding company regulate If response to 8.1 is yes, please identify the name of the bank ho					Yes [ )	Х ]	No [	]
	The Goldman Sachs Group, Inc.								
8.3	Is the company affiliated with one or more banks, thrifts or securi	ities firms?				Yes [ )	Χ]	No [	]
8.4	If response to 8.3 is yes, please provide below the names and lo	cation (city and state of the main office) of any affiliate	s regulated	d by a fee	deral				
	regulatory services agency [i.e. the Federal Reserve Board (FRB	B), the Office of the Comptroller of the Currency (OCC)	, the Fede	ral Depo	sit				
	Insurance Corporation (FDIC) and the Securities Exchange Com	imission (SEC)] and identify the affiliate's primary fede	ral regulat	or.					
	1		2	1 4	-	6	_		
	•	Location (City, State)	3 FRB	4 OCC	5 FDIC	6 SEC			
	Affiliate Name The Goldman Sachs Group, Inc.		YES	NO	NO NO	YES	_		
	Goldman Sachs & Co.			YES	NO	YES			
	Goldman Sachs Execution & Clearing, L.P.			YES	NO	YES			
	Goldman Sachs Financial Markets, L.P.	New York, NY		NO	NO	YES			
	REDI Global Technologies LLC	New York, NY		NO	NO	YES			
	Epoch Securities, Inc.			NO	NO	YES			
	The Goldman Sachs Trust Company, N.A.			YES	YES	NO			
	Goldman Sachs Bank USA			NO	YES	NO			
	Goldman Sachs Asset Management, L.P.	Now York NV	1⊑∂	NO	NO	YES			
	Mercer Allied Company, L.P.			NO	NO	YES			
				NO	NO	YES			
	Forethought Investment Advisors, LLCForethought Distributors, LLC	Indianapolis, in	INU						
9.	What is the name and address of the independent certified public	c accountant or accounting firm retained to conduct the	e leunne e	udit2					
٥.	Pricewaterhouse Coopers, 699 Walnut Street, Des Moines, IA 50	<u> </u>	a ililual a	uuit:					
10.1	Has the insurer been granted any exemptions to the prohibited n		t public oc	oountant					
10.1	requirements as allowed in Section 7H of the Annual Financial R	Penorting Model Regulation (Model Audit Rule) or subs	t public ac	imilar eta	l nte				
	law or regulation?					Yes [	1	No [ )	( 1
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								
	allowed for in Section 18A of the Model Regulation, or substantia	ally similar state law or regulation?				Yes [	]	No [ )	( ]
10.4	If the response to 10.3 is yes, provide information related to this	•							
10.5	Has the reporting entity established an Audit Committee in comp	liance with the domiciliary state insurance laws?		١١	Yes [ X	] 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 (officer/employee of the		an actuar	ial consu	ılting				
	firm) of the individual providing the statement of actuarial opinion								
	Bryan Nelson, 215 10th Street, Suite 1100, Des Moines, IA 5030		-						
12.1	Does the reporting entity own any securities of a real estate hold					Yes [	]	No [ )	( ]
	12.11 Name of	f real estate holding company							
	12.12 Number	of parcels involved							
	12.13 Total boo	ok/adjusted carrying value			\$	\$			
12.2	If, yes provide explanation:								
13.	FOR UNITED STATES BRANCHES OF ALIEN REPORTING E	NTITIES ONLY:							
13.1	What changes have been made during the year in the United Sta	ates manager or the United States trustees of the repo	rting entity	?					
	ŭ ,	·	,						
13 2	Does this statement contain all business transacted for the repor	ting entity through its United States Branch on risks w	nerever lo	cated?		Yes [	1	No [	1
	Have there been any changes made to any of the trust indenture					Yes [	1	No [	1
						<del>.</del> .	J 1	NU [	r
13.4	If answer to (13.3) is yes, has the domiciliary or entry state appro Are the senior officers (principal executive officer, principal finance					] No [	]	N/A	L
14.1	similar functions) of the reporting entity subject to a code of ethic					Yes [ )	X 1	No I	1
	a. Honest and ethical conduct, including the ethical handling of a					100 [ /	v. 1	110 [	,
	relationships;								
	b. Full, fair, accurate, timely and understandable disclosure in the	e periodic reports required to be filed by the reporting e	entity;						
	c. Compliance with applicable governmental laws, rules and regu	ulations;							
	d. The prompt internal reporting of violations to an appropriate pe	erson or persons identified in the code; and							
	e. Accountability for adherence to the code.								
4.11	If the response to 14.1 is No, please explain:								
	Has the code of ethics for senior managers been amended?					Yes [	]	No [ )	( ]
4.21	If the response to 14.2 is yes, provide information related to ame								
						., -	_		
	Have any provisions of the code of ethics been waived for any of	·				Yes [	]	No [ )	( ]
4.37	If the response to 14.3 is yes, provide the nature of any waiver(s)	).							

	SVO Bank List?	entity the beneficiary of a Letter of Credit that is unrelated to re				Yes	[	] No [	[ X ]
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 triggered.								
	1 American Bankers Association	2		3			4	•	
	(ABA) Routing Number	Issuing or Confirming Bank Name		That Can Trigger the Letter of Credit			Amo		
			DIRECTOR						
16.	thereof?	or sale of all investments of the reporting entity passed upon e	*			Yes	[ X	] No [	]
17.		ng entity keep a complete permanent record of the proceeding				Yes	[ X	] No [	1
18.	Has the reporting	g entity an established procedure for disclosure to its board of officers, directors, trustees or responsible employees that is ir	directors or trustees	s of any material interest or affiliation	on the		-	] No [	_
		FINA	ANCIAL						
19.	Has this stateme	ent been prepared using a basis of accounting other than Statuciples)?	utory Accounting Pri	inciples (e.g., Generally Accepted		Yes	ſ	1 No 1	. X 1
20.1	Total amount loa	aned during the year (inclusive of Separate Accounts, exclusiv	e of policy loans):	20.11 To directors or other officers		\$			
				20.12 To stockholders not officers 20.13 Trustees, supreme or grand (Fraternal Only)					
20.2	Total amount of policy loans):	loans outstanding at the end of year (inclusive of Separate Ac	counts, exclusive of						
	policy loans).			20.22 To stockholders not officers					
				20.23 Trustees, supreme or grand (Fraternal Only)					
21.1	Were any assets	s reported in this statement subject to a contractual obligation reported in the statement?	to transfer to anothe	er party without the liability for such					
21.2		amount thereof at December 31 of the current year:		21.21 Rented from others					
	-			21.22 Borrowed from others					
				21.23 Leased from others					
22.1	Does this statem	nent include payments for assessments as described in the Ar	nual Statement Ins	21.24 Othertructions other than guaranty fund or					
22.2	guaranty association of the grant of the gra	ation assessments?		2.21 Amount paid as losses or risk adj					
	•			2.22 Amount paid as expenses					
				2.23 Other amounts paid					
23.1 23.2		ng entity report any amounts due from parent, subsidiaries or a ny amounts receivable from parent included in the Page 2 am							
	, ,	,							
		INVE	STMENT						
24.01		cks, bonds and other securities owned December 31 of currenession of the reporting entity on said date? (other than securities				Yes	[ X	] No	[ ]
24.02	, 0	nd complete information relating thereto							
24.03	whether collater	nding programs, provide a description of the program including al is carried on or off-balance sheet. (an alternative is to refere	nce Note 17 where	this information is also provided)					
24.04		g entity's securities lending program, report amount of collatera				\$			
24.05	For the reporting	g entity's securities lending program, report amount of collatera	al for other programs	s		.\$			
24.06		rities lending program require 102% (domestic securities) and ntract?			Yes [	] N	lo [	] N/	A [ X ]
24.07	Does the reporti	ng entity non-admit when the collateral received from the cour	nterparty falls below	100%?	Yes [	] N	lo [	] N/	A [ X ]
24.08		ng entity or the reporting entity 's securities lending agent utilizes lending?			Yes [	] N	io [	] N/	A [ X ]

24.09	For the reporting entity's securities lending program state the an	nount of the following as of December 31 of the current year:				
		assets reported on Schedule DL, Parts 1 and 2.				
		invested collateral assets reported on Schedule DL, Parts 1 and 2				
	24.093 Total payable for securities lending repo	orted on the liability page.	\$			
25.1	control of the reporting entity, or has the reporting entity sold or	entity owned at December 31 of the current year not exclusively under the transferred any assets subject to a put option contract that is currently in 03).	Yes [	] N	√o [ )	Х ]
25.2	If yes, state the amount thereof at December 31 of the current y	ear: 25.21 Subject to repurchase agreements	\$			
	<b>,</b> ,	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	\$			
		excluding FHLB Capital Stock	\$			
		25.27 FHLB Capital Stock	\$			
		25.28 On deposit with states	\$			
		25.29 On deposit with other regulatory bodies				
		25.30 Pledged as collateral - excluding collateral pledged t an FHLB	o \$			
		25.31 Pledged as collateral to FHLB - including assets backing funding agreements				
		25.32 Other	\$			
25.3	For category (25.26) provide the following:					
	1 Nature of Restriction	2 Description		3 nount		
	Nature of Nestriction	Description				_
		·				_
26.1	Does the reporting entity have any hedging transactions reporte	d on Schedule DB?	Yes [	] N	10 [ )	Х]
26.2	If yes, has a comprehensive description of the hedging program If no, attach a description with this statement.	been made available to the domiciliary state?	] No [	]	N/A	[ X ]
LINES 2	6.3 through 26.5: FOR LIFE/FRATERNAL REPORTING ENTITI	ES ONLY:				
26.3	Does the reporting entity utilize derivatives to hedge variable an	nuity guarantees subject to fluctuations as a result of interest rate sensitivity?	Yes [	] N	10 [ )	Х]
26.4	If the response to 26.3 is YES, does the reporting entity utilize:					_
		.41 Special accounting provision of SSAP No. 108		] N	_	J
		.43 Other accounting guidance	-	J N	_	J 1
26.5		unting provisions of SSAP No. 108, the reporting entity attests to the	100 [	,		,
	following:		Yes [	] N	No [	]
	The reporting entity has obtained explicit approval from					
	Hedging strategy subject to the special accounting prov     Actuarial certification has been obtained which indicate	is that the hedging strategy is incorporated within the establishment of VM-21				
		gy within the Actuarial Guideline Conditional Tail Expectation Amount.				
		indicates that the hedging strategy meets the definition of a Clearly Defined				
	its actual day-to-day risk mitigation efforts.	fined Hedging Strategy is the hedging strategy being used by the company in				
27.1	Were any preferred stocks or bonds owned as of December 31 issuer convertible into equity?	of the current year mandatorily convertible into equity, or, at the option of the	Yes [	1 1	lo [ ]	X 1
				-	_	_
27.2	If yes, state the amount thereof at December 31 of the current y	ear.	\$			
28.		estate, mortgage loans and investments held physically in the reporting entity's nd other securities, owned throughout the current year held pursuant to a				
	custodial agreement with a qualified bank or trust company in a	ccordance with Section 1, III - General Examination Considerations, F.				
	Outsourcing of Critical Functions, Custodial or Safekeeping Agr	eements of the NAIC Financial Condition Examiners Handbook?	Yes [ ]	( ) N	10 [	]
28.01	For agreements that comply with the requirements of the NAIC	Financial Condition Examiners Handbook, complete the following:				
	1 Name of Custodian(s)	2 Custodian's Address				
	US Bank N.A. 102	25 Connecticut Avenue, NW Suite 517, Washington, DC 20036				
		·				

	1 Name(s)	2 Location(	2 3 Location(s) Complete Expl		
•	changes, including name chan	ges, in the custodian(s) identified reto:	in 28.01 during the current ye	ear?	Yes [ ] No [
	1 ustodian	2 New Custodian	3 Date of Change	4 Reason	1
make investment deci		•	ged internally by employees o		
designated w 28.0598 For firms/indi	ith a "U") manage more than 1 viduals unaffiliated with the re	e for Question 28.05, do any firms 0% of the reporting entity's invest porting entity (i.e. designated with to more than 50% of the reporting	ed assets?a "U") listed in the table for G	Question 28.05, does the	Yes [ ] No [
	0 00 0	8.05 with an affiliation code of "A"	•		
Central Registration					Investme Manageme Agreeme
	Goldman Sachs Asset Managem	irm or Individual ent CLO, Corp.			(IMA) File
-				the Securities and	
Exchange Commissio If yes, complete the fo	n (SEC) in the Investment Cor	I funds reported in Schedule D, Pa mpany Act of 1940 [Section 5(b)(1			
Exchange Commissio If yes, complete the fo	n (SEC) in the Investment Cor	mpany Act of 1940 [Section 5(b)(1	)])?		3 Book/Adjusted
Exchange Commissio If yes, complete the fo	n (SEC) in the Investment Cor	npany Act of 1940 [Section 5(b)(1	)])?		3
Exchange Commissio If yes, complete the fo  1  CUSIP #  29.2999 - Total	n (SEC) in the Investment Cor	mpany Act of 1940 [Section 5(b)(1 2 Name of Mutua	)])?		3 Book/Adjusted

## **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
			Excess of Statement
			over Fair Value (-), or
	Statement (Admitted)		Fair Value over
	Value	Fair Value	Statement (+)
30.1 Bonds	171,811,009	180 , 557 , 834	8,746,825
30.2 Preferred stocks			
30.3 Totals	171,811,009	180,557,834	8,746,825

30.4	Describe the sources or methods utilized in determining the fair values:					
	Fair values are generally derived using external independent pricing vendors and validated by comparing to broker quotes, recent open market trades and/or internally developed pricing models.					
31.1	Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D?	Y	/es [	]	No [	Х ]
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?		ſes [	]	No [	]
31.3	If the answer to 31.2 is no, describe the reporting entity's process for determining a reliable pricing source for purposes of disclosure of fair value for Schedule D:					
32.1 32.2	Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed?	١	/es [	Х ]	No [	]
33.	By self-designating 5GI securities, the reporting entity is certifying the following elements of each self-designated 5GI security:  a. Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available.  b. Issuer or obligor is current on all contracted interest and principal payments.  c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal.					
	Has the reporting entity self-designated 5GI securities?	١	res [	]	No [	Χ]
34.	By self-designating PLGI securities, the reporting entity is certifying the following elements of each self-designated PLGI security:  a. The security was purchased prior to January 1, 2018.  b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.  c. The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as a NRSRO which is shown on a current private letter rating held by the insurer and available for examination by state insurance regulators.  d. The reporting entity is not permitted to share this credit rating of the PL security with the SVO.					
	Has the reporting entity self-designated PLGI securities?	Υ	res [	]	No [	Χ]
35.	By assigning FE to a Schedule BA non-registered private fund, the reporting entity is certifying the following elements of each self-designated FE fund:  a. The shares were purchased prior to January 1, 2019.  b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.  c. The security had a public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO prior to January 1, 2019.  d. The fund only or predominantly holds bonds in its portfolio.  e. The current reported NAIC Designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO.  f. The public credit rating(s) with annual surveillance assigned by an NAIC CRP has not lapsed.  Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria?	,	Yes [	1	No [	X ]
36.	By rolling/renewing short-term or cash equivalent investments with continued reporting on Schedule DA, Part 1 or Schedule E Part 2 (identified through a code (%) in those investment schedules), the reporting entity is certifying to the following:  a. The investment is a liquid asset that can be terminated by the reporting entity on the current maturity date.  b. If the investment is with a nonrelated party or nonaffiliate, then it reflects an arms-length transaction with renewal completed at the discretion of all involved parties.  c. If the investment is with a related party or affiliate, then the reporting entity has completed robust re-underwriting of the transaction for which documentation is available for regulator review.  d. Short-term and cash equivalent investments that have been renewed/rolled from the prior period that do not meet the criteria in 36.a - 36.c are reported as long-term investments.  Has the reporting entity rolled/renewed short-term or cash equivalent investments in accordance with these criteria?	1	No [		] N/A	[ X ]

### **GENERAL INTERROGATORIES**

#### OTHER

37.1	Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any?			
37.2	List the name of the organization and the amount paid if any such payment represented 25% or more of the to service organizations and statistical or rating bureaus during the period covered by this statement.	otal payments to trade a	ssociations,	
	1 Name	2 Amount Paid		
38.1	Amount of payments for legal expenses, if any?		\$	
38.2	List the name of the firm and the amount paid if any such payment represented 25% or more of the total payment during the period covered by this statement.	nents for legal expenses	i	
	1 Name	2 Amount Paid		
39.1	Amount of payments for expenditures in connection with matters before legislative bodies, officers or departm	ents of government, if a	ıny?\$	
39.2	List the name of the firm and the amount paid if any such payment represented 25% or more of the total payment connection with matters before legislative bodies, officers or departments of government during the period co			
	1 Name	2 Amount Paid		

### **GENERAL INTERROGATORIES**

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

If ye	s, indicate premium earned on U.S. business only			\$	
	at portion of Item (1.2) is not reported on the Medicare Supplement Insurance Exper Reason for excluding:			\$	
Indic	cate amount of earned premium attributable to Canadian and/or Other Alien not inc			\$	
Indic	cate total incurred claims on all Medicare Supplement insurance.			\$	
Indiv	vidual policies:	Most current th		œ.	
			nium earnedrred claims		
			of covered lives		
		All voors prior t	to most surrent three years		
			to most current three years nium earned	¢	
		·	rred claims		
			f covered lives		
Cra	un policios:	\$4t			
Grol	up policies:	Most current th		œ.	
		1./1 Total pren	nium earnedrred claims	¢	
			rred claimsf covered lives		
		1.70 Number o	n covered lives		
			to most current three years		
			nium earned		
			rred claims		
		1.76 Number o	f covered lives		
Hea	Ith Test:				
		1 Current Year	2 Prior Year		
2.1	Premium Numerator				
2.2	Premium Denominator				
2.3	Premium Ratio (2.1/2.2)	0.000	0.000		
2.4	Reserve Numerator				
2.5	Reserve Denominator				
2.6	Reserve Ratio (2.4/2.5)	0.000	0.000		
Doe	s this reporting entity have Separate Accounts?			Yes [	] No [ X ]
If ye	s, has a Separate Accounts Statement been filed with this Department?		Yes [	] No [	] N/A [
Wha	at portion of capital and surplus funds of the reporting entity covered by assets in the ibutable from the Separate Accounts to the general account for use by the general	e Separate Accounts state	ment, is not currently	\$	
	e the authority under which Separate Accounts are maintained:				
Was	s any of the reporting entity's Separate Accounts business reinsured as of December	er 31?		Yes [	] No [ X ]
Has	the reporting entity assumed by reinsurance any Separate Accounts business as o	f December 31?		. Yes [	] No [ X ]
Acc	e reporting entity has assumed Separate Accounts business, how much, if any, rein ounts reserve expense allowances is included as a negative amount in the liability f y"?	or "Transfers to Separate A	Accounts due or accrued		
For	reporting entities having sold annuities to another insurer where the insurer purchas mant (payee) as the result of the purchase of an annuity from the reporting entity on	sing the annuities has obta			
Amo	ount of loss reserves established by these annuities during the current year:the name and location of the insurance company purchasing the annuities and the	-			
		catomont value on the pur			
	1		2 Statement V	alue	
			on Purchase	Date	
	DOO Income of Control And I am I		of Annuitie		
1	P&C Insurance Company And Location		(i.e., Present \	raiue)	

### **GENERAL INTERROGATORIES**

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

5.1	Do you act as a custodian for health savings account	ts?					Yes [ ] No	[ X ]
5.2	If yes, please provide the amount of custodial funds	held as of the re	porting date				\$	
5.3	Do you act as an administrator for health savings ac	counts?					. Yes [ ] No	[ X ]
5.4	If yes, please provide the balance of funds administe	ered as of the re	porting date				\$	
6.1 6.2	Are any of the captive affiliates reported on Schedule If the answer to 6.1 is yes, please provide the following		orized reinsurers?			Yes [	] No [ ]	N/A [ X
	1	2	3	4		Supporting Reserv		]
	Company Name	NAIC Company Code	Domiciliary Jurisdiction	Reserve Credit	5 Letters of Credit	6 Trust Agreements	7 Other	
7.	Provide the following for individual ordinary life insur ceded):	7.1 Direct Pre	emium Written		ar (prior to reinsura		\$	
	Term (whether full un Whole Life (whether f Variable Life (with or Universal Life (with or Variable Universal Lif	derwriting,limited ull underwriting, without seconda without second	limited underwritin ry gurarantee) ary gurarantee)	ssue,"short form apg,jet issue,"short fo				
8.	Is the reporting entity licensed or chartered, registered	ed, qualified, elig	gible or writing bus	iness in at least two	o states?		Yes [ ] No	[ X ]
8.1	If no, does the reporting entity assume reinsurance to the reporting entity?		. Yes [ X ] No	[ ]				
ife, Ac	cident and Health Companies Only:							
9.1	Are personnel or facilities of this reporting entity use by this reporting entity (except for activities such as a studies)?	administration of	f jointly underwritte	n group contracts	and joint mortality	or morbidity		[ X ]
9.2	Net reimbursement of such expenses between report	ting entities:						
					Paid Received			
10.1	Does the reporting entity write any guaranteed interest	est contracts?					. Yes [ ] No	[ X ]
10.2	If yes, what amount pertaining to these lines is include	ded in:						
				10.21 10.22	Page 3, Line 1 Page 4, Line 1		\$ \$	
11.	For stock reporting entities only:							
11.1	Total amount paid in by stockholders as surplus fund	ds since organiz	ation of the reporti	ng entity:			\$	
12.	Total dividends paid stockholders since organization	of the reporting	entity:	12.11	Cash		\$	
					Stock			
13.1	Does the reporting entity reinsure any Workers' Com Reinsurance (including retrocessional reinsurance) a benefits of the occupational illness and accident exp written as workers' compensation insurance.	assumed by life	and health insurer	s of medical, wage	loss and death		Yes [ ] No	[ X ]
13.2	If yes, has the reporting entity completed the Worker	rs' Compensatio	n Carve-Out Supp	lement to the Annu	ual Statement?		. Yes [ ] No	[ ]
13.3	If 13.1 is yes, the amounts of earned premiums and	claims incurred		ire:	•	0		
			1 Reinsura		2 nsurance	3 Net		
	13.31 Earned premium		Assume		Ceded	Retained		
	13.32 Paid claims 13.33 Claim liability and reserve (beginning of year) 13.34 Claim liability and reserve (end of year) 13.35 Incurred claims							

### **GENERAL INTERROGATORIES**

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

13.42 \$25,000 - 99,999 13.43 \$100,000 - 249,999 13.44 \$250,000 - 999,999	form of government?	. Yes [			]
Point Premium  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?  raternal Benefit Societies Only:  14. Is the reporting entity organized and conducted on the lodge system, with ritualistic form of work and representative 15. How often are meetings of the subordinate branches required to be held?	and Reserve	. Yes [			1
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?	form of government?	. Yes [			1
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?	form of government?	. Yes [			]
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?	form of government?	. Yes [			]
13.45 \$1,000,000 or more  13.5 What portion of earned premium reported in 13.31, Column 1 was assumed from pools?	form of government?	. Yes [			1
<ul> <li>13.5 What portion of earned premium reported in 13.31, Column 1 was assumed from pools?</li></ul>	form of government?	. Yes [			]
<ul> <li>14. Is the reporting entity organized and conducted on the lodge system, with ritualistic form of work and representative</li> <li>15. How are the subordinate branches required to be held?</li> <li>16. How are the subordinate branches represented in the supreme or governing body?</li> </ul>	form of government?	. Yes [			]
<ul> <li>14. Is the reporting entity organized and conducted on the lodge system, with ritualistic form of work and representative</li> <li>15. How are the subordinate branches required to be held?</li> <li>16. How are the subordinate branches represented in the supreme or governing body?</li> </ul>	form of government?	. Yes [			]
<ul> <li>14. Is the reporting entity organized and conducted on the lodge system, with ritualistic form of work and representative</li> <li>15. How often are meetings of the subordinate branches required to be held?</li> <li>16. How are the subordinate branches represented in the supreme or governing body?</li> </ul>			] [	No [	]
<ul><li>15. How often are meetings of the subordinate branches required to be held?</li><li>16. How are the subordinate branches represented in the supreme or governing body?</li></ul>			1 [	No [	]
16. How are the subordinate branches represented in the supreme or governing body?					
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?		<u></u>			
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 to applicants?		-	-	No [	]
25. Are applicants admitted to membership without filing an application with and becoming a member of a local branch	•	-	] [		]
<ul><li>26.1 Are notices of the payments required sent to the members?</li><li>26.2 If yes, do the notices state the purpose for which the money is to be used?</li></ul>	-		-	N/A	, ]
27. What proportion of first and subsequent year's payments may be used for management expenses?		. 168 [	] [	NO [	1
27.11 First Year					%
27.12 Subsequent Years					%
28.1 Is any part of the mortuary, disability, emergency or reserve fund, or the accretions from or payments for the same,					]
28.2 If so, what amount and for what purpose?					
29.1 Does the reporting entity pay an old age disability benefit?			1 1	l ok	1
29.2 If yes, at what age does the benefit commence?			•		•
<ul><li>30.1 Has the constitution or have the laws of the reporting entity been amended during the year?</li><li>30.2 If yes, when?</li></ul>		Yes [	] [	No [	]
31. Have you filed with this Department all forms of benefit certificates issued, a copy of the constitution and all of the la	aws, rules and regulations		, .		,
in force at the present time?	nium-paying certificates on		] [	-	]
account of meeting attained age or membership requirements?  32.2 If so, was an additional reserve included in Exhibit 5?		Yes [ ] No [	] [ ]	NO [ N/A	] [ ]
32.3 If yes, explain	•				
33.1 Has the reporting entity reinsured, amalgamated with, or absorbed any company, order, society, or association during			] [	No [	]
33.2 If yes, was there any contract agreement, or understanding, written or oral, expressed or implied, by means of which	h any officer,		- '	-	•
director, trustee, or any other person, or firm, corporation, society or association, received or is to receive any fee, c emolument, or compensation of any nature whatsoever in connection with, on an account of such reinsurance, ama					
absorption, or transfer of membership or funds?	Yes [	] No [	]	N/A	]
34. Has any present or former officer, director, trustee, incorporator, or any other persons, or any firm, corporation, sociclaims of any nature whatsoever against this reporting entity, which is not included in the liabilities on Page 3 of this	ety or association, any	Yes [	1 1	1 ol	1
35.1 Does the reporting entity have outstanding assessments in the form of liens against policy benefits that have increases				No [	]
35.2 If yes, what is the date of the original lien and the total outstanding balance of liens that remain in surplus?	,		, '	- 1	•

	Outstanding
Date	Lien Amount

### **FIVE-YEAR HISTORICAL DATA**

Show amounts in whole dollars only, no cents; show percentages to one decimal place, i.e. 17.6.
\$000 omitted for amounts of life insurance

\$000 omitted for amounts of life insurance						
		1 2020	2 2019	3 2018	4 2017	5 2016
	Life Insurance in Force					
	(Exhibit of Life Insurance)					
1.	Ordinary - whole life and endowment (Line 34, Col.	45 000 040	15 400 177	0 500 604	0 570 000	0 744 700
2.	Ordinary - term (Line 21 Col. 4 Jess Line 34 Col.		15,492,177			
	4)			945,667		1, 108,532
3.	,					
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. 10)	15,985,283	16,437,844	4,482,331	4,680,921	4,850,255
7.1	Total in force for which VM-20 deterministic/stochastic reserves are calculated					XXX
	New Business Issued					
	(Exhibit of Life Insurance)					
8.	Ordinary - whole life and endowment (Line 34, Col.					
•	/					
9.	Ordinary - term (Line 2, Col. 4, less Line 34, Col. 2)  Credit life (Line 2, Col. 6)					
10. 11.	Group (Line 2, Col. 9)					
12.	Industrial (Line 2, Col. 2)					
13.	Total (Line 2, Col. 10)					
10.	Premium Income - Lines of Business					
	(Exhibit 1 - Part 1)					
14.	Industrial life (Line 20.4, Col. 2)					
	Ordinary-life insurance (Line 20.4, Col. 3)			28.939.828	34 . 103 . 399	36.291.966
	Ordinary-individual annuities (Line 20.4, Col. 4)					
16	Credit life (group and individual) (Line 20.4, Col. 5)					
	Group life insurance (Line 20.4, Col. 6)					
	Group annuities (Line 20.4, Col. 7)					
	A & H-group (Line 20.4, Col. 8)					
	A & H-credit (group and individual) (Line 20.4.					
	Col. 9)					
18.3	A & H-other (Line 20.4, Col. 10)					
19.	Aggregate of all other lines of business (Line					
20	20.4,Col. 11)	08 402 240	2 246 377 134	28 030 828	3/ 103 300	36,291,966
20.	Balance Sheet (Pages 2 & 3)	90,402,240	2,240,377,134	20,909,020	54, 103,355	
21	Total admitted assets excluding Separate Accounts					
۷1.	business (Page 2, Line 26, Col. 3)	4,743,723,749	4,454,373,074	938,738,169	881,980,810	816,397,794
22.	Total liabilities excluding Separate Accounts					
	business (Page 3, Line 26)					
23.	Aggregate life reserves (Page 3, Line 1)	4,343,296,686	4,112,925,668	833,505,182	783,646,547	728,918,163
23.1	Excess VM-20 deterministic/stochastic reserve over NPR related to Line 7.1					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 24.01)	731.469	344.695		77,482	
27.	Capital (Page 3, Lines 29 and 30)	2,500,000	2,500,000	,	2,500,000	
28.	Surplus (Page 3, Line 37)	296,473,731	254,835,352			56,598,940
	Cash Flow (Page 5)					
29.	Net Cash from Operations (Line 11)	88,245,338	(8,095,914)	4,007,509	2,643,332	2,511,795
	Risk-Based Capital Analysis					
30.	Total adjusted capital	299,705,200	257,680,047	69,369,742	66,445,475	59, 183,831
31.	Authorized control level risk - based capital	28 , 152 , 474	25,670,271	5,756,345	4,777,938	4,725,302
	Percentage Distribution of Cash, Cash					
	Equivalents and Invested Assets					
	(Page 2, Col. 3) (Line No. /Page 2, Line 12, Col. 3) x 100.0					
32.	Bonds (Line 1)	70 2	82 3	67.4	64.7	68.0
33.	Stocks (Lines 2.1 and 2.2)					
34.	Mortgage loans on real estate(Lines 3.1 and 3.2)					
35.	Real estate (Lines 4.1, 4.2 and 4.3)					
36.	Cash, cash equivalents and short-term investments					
	(Line 5)	11.6	5.5			
37.	Contract loans (Line 6)				14.4	14.2
38.	Derivatives (Page 2, Line 7)					
39.	Other invested assets (Line 8)					
40.	Receivables for securities (Line 9)					
41.	Securities lending reinvested collateral assets (Line					
40	10)					
	Aggregate write-ins for invested assets (Line 11)					
42. 43.	Cash, cash equivalents and invested assets					

### **FIVE-YEAR HISTORICAL DATA**

(Continued)

			tinued)		T	
		1 2020	2 2019	3 2018	4 2017	5 2016
	Investments in Parent, Subsidiaries and					
44.	Affiliates Affiliated bonds (Schedule D Summary, Line 12,					
45.	Col. 1) Affiliated preferred stocks (Schedule D Summary,					
46.						
47.						
	in Schedule DA Verification, Col. 5, Line 10)					
48. 49.	Affiliated mortgage loans on real estate					
50.	Total of above Lines 44 to 49					
51.	Total Investment in Parent included in Lines 44 to 49 above					
	Total Nonadmitted and Admitted Assets					
52.	Total nonadmitted assets (Page 2, Line 28, Col. 2)	215,497,806	209, 152, 806	34,545,379	33,251,651	55,982,997
53.	Total admitted assets (Page 2, Line 28, Col. 3)	4,743,723,749	4,454,373,074	938,738,169	881,980,810	816,397,794
	Investment Data					
54.	Net investment income (Exhibit of Net Investment Income)	7,264,603	5,324,068	882,701	578,436	684,502
55.	Realized capital gains (losses) (Page 4, Line 34, Column 1)	4,008,472	224,384	19,381	(42,596)	15,755
56.	Unrealized capital gains (losses) (Page 4, Line 38, Column 1)					
57.	,	11,273,075	5,548,452	902,082	535,840	700,257
	Benefits and Reserve Increases (Page 6)	, ,,,,,	, , , == ,	, ,	,	,
58.	Total contract/certificate benefits - life (Lines 10, 11, 12, 13, 14 and 15, Col. 1 minus Lines 10, 11,12, 13, 14 and 15, Cols. 6, 7 and 8)	93,290,672	64,109,052	20,376,834	21,277,877	23,299,282
59.	Total contract/certificate benefits - A & H (Lines 13 & 14, Col. 6)					
60.	Increase in life reserves - other than group and annuities (Line 19, Col. 2)	230 371 018	3 278 975 434	49 858 636	54 574 091	64 699 472
61.	Increase in A & H reserves (Line 19, Col. 6)					
62.	Dividends to policyholders and refunds to members (Line 30, Col. 1)					
	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 100.0	9.6	0.4	10.7	10.1	9.9
64.	Lapse percent (ordinary only) [(Exhibit of Life Insurance, Col. 4, Lines 14 & 15) / 1/2 (Exhibit of Life Insurance, Col. 4, Lines 1 & 21)] x 100.0	2.4	4.9	4.4	3.7	2.6
	A & H loss percent (Schedule H, Part 1, Lines 5 and 6, Col. 2)					
66.	A & H cost containment percent (Schedule H, Pt. 1, Line 4, Col. 2)					
67.	A & H expense percent excluding cost containment expenses (Schedule H, Pt. 1, Line 10, Col. 2)  A & H Claim Reserve Adequacy					
68.	Incurred losses on prior years' claims - group health (Schedule H, Part 3, Line 3.1 Col. 2)					
69.	Prior years' claim liability and reserve - group health					
70.	(Schedule H, Part 3, Line 3.2 Col. 2)					
71.	less Col. 2)  Prior years' claim liability and reserve-health other than group (Schedule H, Part 3, Line 3.2 Col. 1					
	less Čol. 2)  Net Gains From Operations After Dividends to Policyholders/Members' Refunds and Federal					
	Income Taxes by Lines of Business (Page 6.x, Line 33)					
72.	Industrial life (Page 6.1, Col. 2)					
73.	Ordinary - life (Page 6.1, Col. 1 less Cols. 2, 10 and 12)			(5,824,986)	(2,907,549)	(21,309,540)
74.	Ordinary - individual annuities (Page 6, Col. 4)					
75.	Ordinary-supplementary contracts					
76.	Credit life (Page 6.1, Col. 10 plus Page 6.2, Col. 7)					
77.	Group life (Page 6.2, Col. 1 Less Cols. 7 and 9)					
78.	Group annuities (Page 6, Col. 5)					
79.	A & H-group (Page 6.5, Col. 3)					
80.	A & H-credit (Page 6.5, Col. 10)					
81.	A & H-other (Page 6.5, Col. 1 less Cols. 3 and 10)			·····		
	Aggregate of all other lines of business (Page 6, Col. 8)					
83.	Fraternal (Page 6, Col. 7)	(62.525.::	(000 000 000	(= ====================================	(2 22	/2.4 2-2
84.	Total (Page 6, Col. 1)  If a party to a merger, have the two most recent years of t		(932,326,960)		(2,907,549)	(21,309,540)

## **EXHIBIT OF LIFE INSURANCE**

(\$000 Omitted for Amounts of Life Insurance)

		(\$000 Omitted for Amounts of Life Insurance)									
			strial		inary	Credit Life (Grou	ip and Individual)		Group		10
		1	2	3	4	5 Number of Individual Policies and Group	6	Nur 7	mber of 8	9	Total
		Number of Policies	Amount of Insurance	Number of Policies	Amount of Insurance	Certificates	Amount of Insurance	Policies	Certificates	Amount of Insurance	Amount of Insurance
	In force end of prior year			54,999	16,437,844						16,437,844
2.	Issued during year										
	Reinsurance assumed										
4.	Revived during year			67	14,615						14,615
5.	Increased during year (net)				34,414						34,414
6.	Subtotals, Lines 2 to 5			67	49,029						49,029
7.	Additions by dividends during year	XXX		XXX		XXX		XXX	XXX		
8.	Aggregate write-ins for increases										
	Totals (Lines 1 and 6 to 8)			55,066	16,486,873						16,486,873
	Deductions during year:										
10.	Death			296	75 , 136			XXX			75 , 136
11.	Maturity							XXX			
12.	Disability							XXX			
13.	Expiry										
14.	Surrender			482	159,381						159.381
15.	Lapse			1.330	233, 192						233 , 192
16.	Conversion			,	,			XXX	XXX	XXX	,
17.	Decreased (net)										33,881
18.	Reinsurance				,						,
19.	Aggregate write-ins for decreases										
	Totals (Lines 10 to 19)			2,108	501,590						501,590
	In force end of year (b) (Line 9 minus Line 20)			52,958	15,985,283						15,985,283
	Reinsurance ceded end of year	XXX		XXX	10,000,200	XXX		XXX	XXX		10,000,200
	Line 21 minus Line 22	XXX		XXX	15,985,283	XXX	(a)	XXX	XXX		15,985,283
	DETAILS OF WRITE-INS	7000		7000	10,000,200	7000	(u)	7000	7000		10,000,200
0801	DETAILS OF WATE-ING										
0802.						• • • • • • • • • • • • • • • • • • • •					
0803.											
0898.	Summary of remaining write-ins for Line 8 from overflow page.										
0899.	TOTALS (Lines 0801 thru 0803 plus 0898) (Line 8 above)										
1901.	,										
1902.											
1903.											
1998.	Summary of remaining write-ins for Line 19 from overflow page.										
1999.	TOTALS (Lines 1901 thru 1903 plus 1998) (Line 19 above)										
	cident and Health Companies Only:										
	ıp \$; Individual \$										
raterna	Benefit Societies Only:										
b) Paid	-up insurance included in the final totals of Line 21 (including	g additions to certificate	es) number of certificate	s	, Amount \$						
Addi	tional accidental death benefits included in life certificates we	ere in amount \$	Does	the society collect any	contributions from mem	bers for general expens	ses of the society under fu	Illy paid-up certificate	es? Yes [ ] No I	1	
	h		,	,,			•				

If not, how are such expenses met?

#### **EXHIBIT OF LIFE INSURANCE**

(\$000 Omitted for Amounts of Life Insurance) (Continued)
ADDITIONAL INFORMATION ON INSURANCE IN FORCE END OF YEAR

	ADDITIONAL INI ONIMATION ON INCORANCE IN I ORGE END OF TEAR								
			Indu	strial	Ordinary				
			1	2	3	4			
	_		Number of Policies	Amount of Insurance	Number of Policies	Amount of Insurance			
24.	Additions by dividends		X		XXX				
25.	Other paid-up insurance								
26.	Debit ordinary insurance			(	ļ				

#### ADDITIONAL INFORMATION ON ORDINARY INSURANCE

			uring Year in Line 2)		End of Year in Line 21)	
		1	2	3	4	
	Term Insurance Excluding Extended Term Insurance	Number of Policies	Amount of Insurance	Number of Policies	Amount of Insurance	
27.	Term policies - decreasing					
28.	Term policies - other			6,529	945,667	
29.	Other term insurance - decreasing	XXX		XXX		
30.	Other term insurance	XXX		XXX		
31.	Totals (Lines 27 to 30)			6,529	945,667	
	Reconciliation to Lines 2 and 21:					
32.	Term additions	XXX		XXX		
33.	Totals, extended term insurance		XXX			
34.	Totals, whole life and endowment	_		46,429	15,039,616	
35.	Totals (Lines 31 to 34)			52.958	15.985.283	

#### **CLASSIFICATION OF AMOUNT OF INSURANCE BY PARTICIPATING STATUS**

		Issued During Year (Included in Line 2)		In Force End of Year (Included in Line 21)				
		1	2	3	4			
		Non-Participating	Participating	Non-Participating	Participating			
36	Industrial							
37.	Ordinary			15,985,283				
38.	Credit Life (Group and Individual)							
39.	Group							
40.	Totals (Lines 36 to 39)			15,985,283				

ADDITIONAL INFORMATION ON CREDIT LIFE AND GROUP INSURANCE

	ADDITIONAL INFORMATION ON CREDIT LIFE AND GROUP INSURANCE									
		Credit Life		Group						
		1 Institut	2	3	4					
		licie Gra								
		C€ it s	isurance	Number of Certificates	Amount of Insurance					
41.	Amount of insurance included in Line 2 ceded to get a mies	xx		XXX						
42.	Number in force end of year if the number under under started grants is									
	on a pro-rata basis				XXX					
43.	Federal Employees' Group Life Insurance included in Line 21									
44.	Servicemen's Group Life Insurance included in Line 21									
45.	Group Permanent Insurance included in Line 21									

46. Amount of additional accidental death benefits in cell discovery death death benefits in cell discovery death death benefits in cell discovery death death death death death benefits in cell discovery death dea

BASI	F CA	:UL/		ORI	ARY	RM	CE
47. State basis of calculation of (47.1) decreasing ter		con	ed in Fa		Mor	ge l	tection, etc., policies and riders and of (47.2) term insurance on
wife and children under Family, Parent and Child	n, .,	icie	nd riders	ud	al ę.		
47.1			·	<b>4</b>			
47.2							
	_ \				•		

#### POLICIES WITH DISABILITY PROVISIONS

	1 OLIGILO WITH DIGABILITI I ROVIGIORO													
			Industrial		Ordinary		Credit		Group					
		1	2	3	3 4		5 6		8					
								Number of						
		Number of		Number of		Number of		Certifi-	Amount of Ins					
	Disability Provisions	Policies	Amount of Insurance	Policies	Amount of Insurance	Policies	Amount of Insurance	cates	rance					
48.	Waiver of Premium			3,370	644,390									
49.	Disability Income													
50.	Extended Benefits			XXX	XXX									
51.	Other													
52.	Total		(a)	3,370	(a) 644,390		(a)		(a)					

<sup>(</sup>a) See the Annual Audited Financial Reports section of the annual statement instructions

# Exhibit of Number of Policies, Contracts, ...Supplementary Contracts ${f N}$ ${f O}$ ${f N}$ ${f E}$

Exhibit of Number of Policies, Contracts, ... Annuities  ${f N}$   ${f O}$   ${f N}$   ${f E}$ 

Exhibit of Number of Policies, Contracts, ...Accident and Health Insurance  ${f N}$   ${f O}$   ${f N}$   ${f E}$ 

Exhibit of Number of Policies, Contracts, ... Deposit Funds  ${f N}$   ${f O}$   ${f N}$   ${f E}$ 

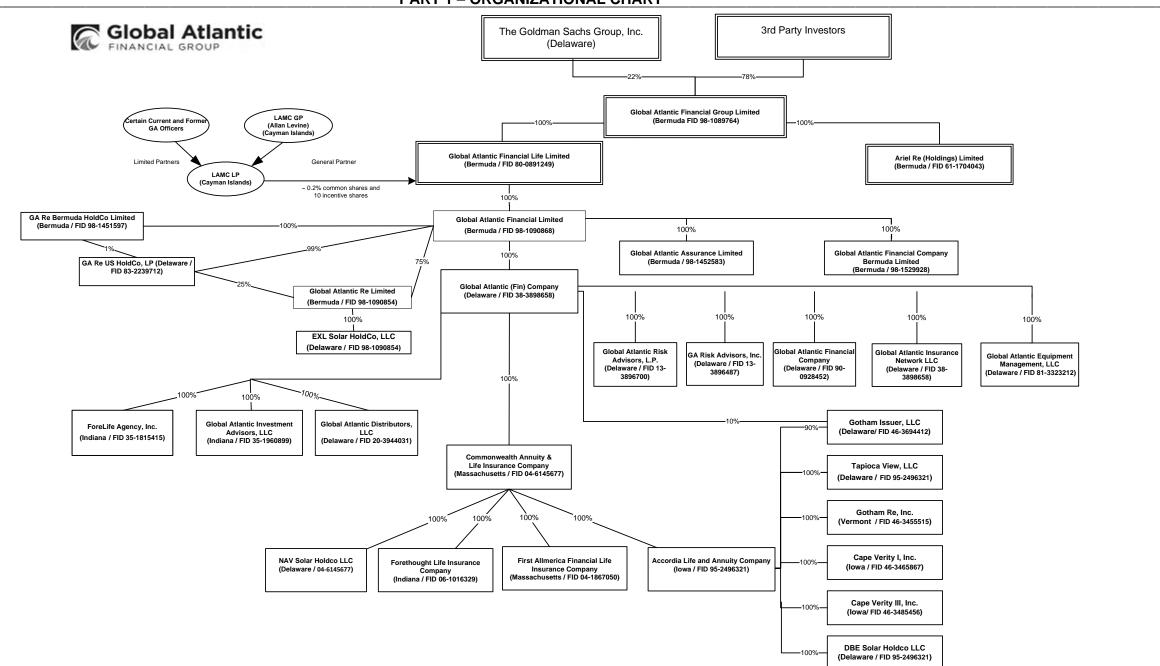
#### SCHEDULE T - PREMIUMS AND ANNUITY CONSIDERATIONS (b)

Allocated by States and Territories

				ales and Territo	Direct Busin	ness Only		
		1		ontracts	4	5	6	7
			2	3	Appleted 111 111			
					Accident and Health		Total	
		Active			Insurance Premiums, Including Policy,		Total Columns	
		Status	Life Insurance	Annuity	Membership	Other	2 through 5	Deposit-Type
	States, Etc.	(a)	Premiums	Considerations	and Other Fees	Considerations	(b)	Contracts
1.	AlabamaAl		ļ					
2.	Alaska Al-							
3.	Arizona Az	N						
4.	Arkansas AF							
5.	California CA	N						
6.	Colorado Co	)N						
7.	Connecticut	N.						
8.	Delaware DE							
9.	District of Columbia							
10.	FloridaFL							
11.	Georgia							
12.	Hawaii	N						
13.	• • •	NN						
		N.						
14.	Illinois	N						
15.	Indiana IN	N						
16.	lowaIA	L						
17.	Kansas KS							
18.	Kentucky K							
19.	Louisiana LA	N.						,
20.	Maine MI	N						,
21.	Maryland MI			ļ			ļl	
22.	Massachusetts	N	<b>.</b>				ļl	r
23.	Michigan Mi	N					ļ	
24.	Minnesota MI	۱N						
25.	Mississippi M:							
26.	Missouri Me							
27.	Montana M							
28.	Nebraska		T					
29.	Nevada		T					
30.	New Hampshire		<u> </u>					
31.								
	New Jersey							
32.	New Mexico							
33.	New York							
34.	North CarolinaNo							
35.	North DakotaNI							
36.	Ohio Ol	1N						
37.	Oklahoma Ol	N						
38.	Oregon OF	RN						
39.	Pennsylvania PA	N						
40.	Rhode Island RI	N.						
41.	South Carolina	: N						
42.	South Dakota							
43.	Tennessee							
44.	Texas							
45.	Utah							
								·····
	•							
	Virginia							
	Washington W							,
49.	West Virginia W							
50.	Wisconsin W							
51.	WyomingW							
52.	American Samoa	N						
53.	Guam Gl	JN						
54.	Puerto Rico PF	N						
	U.S. Virgin Islands	N						
	Northern Mariana Islands MI							L
57.	Canada							
58.	Aggregate Other Alien		·					
59.	Subtotal							
90.	Reporting entity contributions for employee bene		-					
50.	plans	XXX	L			L	[	<b>.</b>
91.	Dividends or refunds applied to purchase paid-up							
	additions and annuities.	XXX						r
92.	Dividends or refunds applied to shorten endowm	ent						
	or premium paying period	XXX						
93.	Premium or annuity considerations waived under							
2 -	disability or other contract provisions		-					
94.	Aggregate or other amounts not allocable by Sta							
95.	Totals (Direct Business)							
96.	Plus reinsurance assumed						99, 107, 103	
97	Totals (All Business)	XXX					99, 107, 103	
98.	Less reinsurance ceded	XXX						
99.	Totals (All Business) less Reinsurance Ceded	XXX	99, 107, 103		(c)		99, 107, 103	<u> </u>
	DETAILS OF WRITE-INS				Ţ.			
58001.		xxx				,		
58002.		XXX						
58003.		XXX		1	-			
	Summary of remaining write-ins for Line 58 from		1	1	T		<u> </u>	
JUJJ0.	overflow page	XXX						İ
58999	Totals (Lines 58001 through 58003 plus		-					
2000.	58998)(Line 58 above)	XXX						
9401.	30000 (Line 30 above)	XXX	1					
9402.		XXX	·	1				
		XXX	†	T	†			
			†	T	†			·
9403.	Summary of remaining write-ins for Line Q4 from					i.		
	Summary of remaining write-ins for Line 94 from overflow page	XXX						
9403.	Summary of remaining write-ins for Line 94 from overflow page Totals (Lines 9401 through 9403 plus 9498)(Line							

L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG.. R - Registered - Non-domiciled RRGs.. 

# SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP PART 1 – ORGANIZATIONAL CHART



# **OVERFLOW PAGE FOR WRITE-INS**



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

#### **ANNUAL STATEMENT**

FOR THE YEAR ENDED DECEMBER 31, 2020 OF THE CONDITION AND AFFAIRS OF THE

Cape Verity III, Inc.

NAIC Group Cod Organized under the Laws of	le <u>3891</u> 473 (Current) (Pri	or)	e 15473 Employer's I		6 IA
	IOWA			nuy	
Country of Domicile		United States	of America		
Licensed as business type:	Life,	Accident and Health X F	raternal Benefit Societies		
Incorporated/Organized	08/23/2013		Commenced Business	08/23/	2013
Statutory Home Office	215 10th Street Suit	te 1100 ,		Des Moines, IA, US 50309	
	(Street and Num	ber)	(City o	r Town, State, Country and Zi	p Code)
Main Administrative Office		215 10th Street			
Des Moin	es IA US 50309	(Street and	Number)	855-887-4487	
(City or Town, Sta	te, Country and Zip Co	de)	(/	Area Code) (Telephone Numb	er)
	15 10th Street Suite 11			Des Moines, IA, US 50309	
(Stre	eet and Number or P.O.	Box)	(City o	r Town, State, Country and Zi	p Code)
Primary Location of Books and Records		215 10th Stree			
Des Moin	es, IA, US 50309	(Street and	Number)	855-887-4487	
(City or Town, Sta	te, Country and Zip Co	de)	(/	Area Code) (Telephone Numb	er)
Internet Website Address		N/A	\		
Statutory Statement Contact	Ton a Rack	nelle Maxwell		515-393-3725	
tonua ma	(N xwell auaf .com	ame)		(Area Code) (Telephone N 774-369-3684	lumber)
	ail Address)			(FAX Number)	
Chief Executive Officer	Robert Michael A	vrena Jr.	Vice President, Assistant General Counsel, Secretary	Kath in Laur	en Freund #
John Nicholas Giamalis Tra Bryan Edward Nelson, Vice Presider Actua		OTHI Vi inia Ho e Johnsor Phili William Sherril	n, Assistant Secretary	Gary Phillip Silber, Managing	xwell, Vice President g Director, Associate General sistant Secreta
Robert Michael Arena	Jr.	DIRECTORS OF	R TRUSTEES		aul Wilken
State of lov County of Po		SS;			
The officers of this reporting entity being all of the herein described assets were statement, together with related exhibits, condition and affairs of the said reporting in accordance with the NAIC Annual Starules or regulations require differences respectively. Furthermore, the scope of exact copy (except for formatting different to the enclosed statement.	the absolute property of schedules and explana entity as of the reportin terment Instructions and in reporting not relate this attestation by the	of the said reporting entity, ations therein contained, an ng period stated above, and d Accounting Practices and ed to accounting practices described officers also incl	free and clear from any lien- nexed or referred to, is a full of its income and deduction. I Procedures manual except is and procedures, according udes the related corresponding	s or claims thereon, except a and true statement of all the a s therefrom for the period end to the extent that: (1) state lar g to the best of their inform ng electronic filing with the NA	is herein stated, and that this issets and liabilities and of the ed, and have been completed w may differ; or, (2) that state ation, knowledge and belief, AIC, when required, that is an
DocuSigned by:	1	DocuSigned by:		DocuSigned by:	
Dai of Phill		DBCB2C 2DB9A470	ind	David Jacoby	
David Paul Wilken President		Kathryn Laur Vice President, Assista Secre	int General Counsel,		Allen Jacoby inancial Officer
Subscribed and sworn to before me this day of	backy ?	2001	a. Is this an original filin b. If no, 1. State the amendr 2. Date filed	nent number	Yes[X]No[]

Lisa K Ridenour Notary Public Seal State of Indiana Hendricks County
My Commission Expires 07/13/2024

# **SUMMARY INVESTMENT SCHEDULE**

		Gross Investm	ent Holdings		Admitted Asse in the Annua		
		1	2 Percentage of	3	4 Securities Lending Reinvested	5 Total	6 Percentage of
	Investment Categories	Amount	Column 1 Line 13	Amount	Collateral Amount	(Col. 3 + 4) Amount	Column 5 Line 13
1.	Long-Term Bonds (Schedule D, Part 1):						
	1.01 U.S. governments		0.000				0.000
	1.02 All other governments	1,305,151	0.675	1,305,151		1,305,151	0.675
	1.03 U.S. states, territories and possessions, etc. guaranteed	2,421,339	1.252	2,421,339		2,421,339	1.253
	1.04 U.S. political subdivisions of states, territories, and possessions, guaranteed		1.465	2,833,233		2,833,233	1.466
	1.05 U.S. special revenue and special assessment obligations, etc. non- guaranteed	12,780,724	6.610	12,780,725		12,780,725	6.615
	1.06 Industrial and miscellaneous			133,629,765		133,629,765	
	1.07 Hybrid securities		0.000				0.000
	1.08 Parent, subsidiaries and affiliates						
	1.09 SVO identified funds						
	1.10 Unaffiliated Bank loans						
						152.970.213	
•	1.11 Total long-term bonds	152,970,213	/9.110	152,970,213		152,970,213	19.172
2.	Preferred stocks (Schedule D, Part 2, Section 1):		0.000				0.000
	2.01 Industrial and miscellaneous (Unaffiliated)		0.000				0.000
	2.02 Parent, subsidiaries and affiliates		0.000				0.00
	2.03 Total preferred stocks		0.000				0.000
3.	Common stocks (Schedule D, Part 2, Section 2):						
	3.01 Industrial and miscellaneous Publicly traded (Unaffiliated)						0.000
	3.02 Industrial and miscellaneous Other (Unaffiliated)						0.000
	3.03 Parent, subsidiaries and affiliates Publicly traded		0.000				0.000
	3.04 Parent, subsidiaries and affiliates Other		0.000				0.000
	3.05 Mutual funds		0.000				0.000
	3.06 Unit investment trusts		0.000				0.00
	3.07 Closed-end funds		0.000				0.00
	3.08 Total common stocks		0.000				0.000
4.	Mortgage loans (Schedule B):						
	4.01 Farm mortgages		0.000				0.000
	4.02 Residential mortgages		0.000				0.000
	4.03 Commercial mortgages						
	4.04 Mezzanine real estate loans		0.000				0.000
	4.05 Total valuation allowance		0.000				0.000
	4.06 Total mortgage loans		0.000				0.000
5.	Real estate (Schedule A):		0.000				
٥.	,		0.000				0.000
	5.01 Properties occupied by company		0.000				0.000
	5.02 Properties held for production of income		0.000				0.000
	5.03 Properties held for sale						
	5.04 Total real estate		0.000				0.000
6.	Cash, cash equivalents and short-term investments:		0.000				0.000
	6.01 Cash (Schedule E, Part 1)		0.000	0.044.050			0.000
	6.02 Cash equivalents (Schedule E, Part 2)		1.869	3,614,658		3,614,658	
	6.03 Short-term investments (Schedule DA)		9.744	18,840,796		18,840,796	9.751
	6.04 Total cash, cash equivalents and short-term investments		11.613	22,455,454		22,455,454	11.622
7.	Contract loans		9 . 199	17,787,233		17,787,233	9.206
8.	Derivatives (Schedule DB)		0.000				0.000
9.	Other invested assets (Schedule BA)		0.000				0.000
10.	Receivables for securities	151,783	0.078				0.000
11.	Securities Lending (Schedule DL, Part 1)		0.000		XXX	xxx	XXX
12.	Other invested assets (Page 2, Line 11)		0.000				0.000
13.	Total invested assets	193,364,683	100.000	193,212,900	· · · · · · · · · · · · · · · · · · ·	193,212,900	100.000

# Schedule A - Verification - Real Estate ${f N}$ ${f O}$ ${f N}$ ${f E}$

Schedule B - Verification - Mortgage Loans  ${f N} \ {f O} \ {f N} \ {f E}$ 

### **SCHEDULE BA - VERIFICATION BETWEEN YEARS**

Other Long-Term Invested Assets

1.	Book/adjusted carrying value, December 31 of prior year
2.	Cost of acquired:
	2.1 Actual cost at time of acquisition (Part 2, Column 8)
	2.2 Additional investment made after acquisition (Part 2, Column 9)
3.	Capitalized deferred interest and other:
	3.1 Totals, Part 1, Column 16
	3.2 Totals, Part 3, Column 12
4.	Accrual of discount
5.	Unrealized valuation increase (decrease):
	5.1 Totals, Part 1, Column 13
	5.1 Totals, Part 1, Column 13
6.	Total gain (loss) on disposals, Part 3, Column 19
7.	Deduct amounts received on disposals, Part 3, Cordmn 16
8.	Deduct amortization of premium and depreciation
9.	Total foreign exchange change in book/adjusted carrying value:
	9.1 Totals, Part 1, Column 17
	9.2 Totals, Part 3, Column 14
10.	Deduct current year's other than temporary impairment recognized:
	10.1 Totals, Part 1, Column 15
	10.2 Totals, Part 3, Column 11
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)
12.	Deduct total nonadmitted amounts
13.	Statement value at end of current period (Line 11 minus Line 12)

# **SCHEDULE D - VERIFICATION BETWEEN YEARS**

Bonds and Stocks

1.	Book/adjusted carrying value, December 31 of prior year	132,876,163
2.	Cost of bonds and stocks acquired, Part 3, Column 7	185,950,732
3.	Accrual of discount	482,702
4.	Unrealized valuation increase (decrease):	
	4.1. Part 1, Column 12	
	4.2. Part 2, Section 1, Column 15	
	4.3. Part 2, Section 2, Column 13	
	4.4. Part 4, Column 11	
5.	Total gain (loss) on disposals, Part 4, Column 19	20,587,010
6.	Deduction consideration for bonds and stocks disposed of, Part 4, Column 7	187,392,783
7.	Deduct amortization of premium	
8.	Total foreign exchange change in book/adjusted carrying value:	
	8.1. Part 1, Column 15	
	8.2. Part 2, Section 1, Column 19	
	8.3. Part 2, Section 2, Column 16	
	8.4. Part 4, Column 15	
9.	Deduct current year's other than temporary impairment recognized:	
	9.1. Part 1, Column 14	
	9.2. Part 2, Section 1, Column 17	
	9.3. Part 2, Section 2, Column 14	
	9.4. Part 4, Column 13	
10.	Total investment income recognized as a result of prepayment penalties and/or acceleration fees, Note 5Q, Line 2	1,198,533
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10)	152,970,213
12.	Deduct total nonadmitted amounts	
13.	Statement value at end of current period (Line 11 minus Line 12)	152,970,213

### **SCHEDULE D - SUMMARY BY COUNTRY**

Long-Term Bonds and Stocks OWNED December 31 of Current Year

			1 Book/Adjusted	2	3	4
	escripti		Carrying Value	Fair Value	Actual Cost	Par Value of Bonds
BONDS	1.	United States				
Governments	2.	Canada				
(Including all obligations guaranteed	3.	Other Countries	1,305,151	1,388,860	1,305,538	1,100,000
by governments)	4.	Totals	1,305,151	1,388,860	1,305,538	1,100,000
U.S. States, Territories and Possessions						
(Direct and guaranteed)	5.	Totals	2,421,339	2,532,292	2,434,562	1,400,000
U.S. Political Subdivisions of States, Territories and Possessions (Direct and guaranteed)	6.	Totals	2,833,234	3,000,059	2,843,822	1,720,000
U.S. Special Revenue and Special Assessment Obligations and all Non- Guaranteed Obligations of Agencies and Authorities of Governments and	_	Titl	12,780,724	13 , 340 , 952	12,823,606	9,645,000
their Political Subdivisions	7.	Totals				
Industrial and Miscellaneous, SVO	8.	United States		129,045,408	122,308,500	105,618,200
Identified Funds, Unaffiliated Bank Loans and Hybrid Securities	9.	Canada	9,252,434	10,069,335	9,242,368	1,886,427
(unaffiliated)	10.	Other Countries	133.629.765	141,454,875	133,857,715	8,307,000 115,811,627
December 20 Institution and Affiliation	11.	Totals	155,629,765	141,404,670	133,037,713	110,011,021
Parent, Subsidiaries and Affiliates	12.	Totals	152.970.213	161.717.038	153.265.243	100 676 607
DDEEEDDED 0700//0	13.	Total Bonds	- ,- , -	101,717,030	103,200,243	129,676,627
PREFERRED STOCKS Industrial and Miscellaneous	14. 15.	United States				
(unaffiliated)	15. 16.	Canada Other Countries				
(anamatea)	17.	Totals				
Parent. Subsidiaries and Affiliates	18.	Totals				
Parent, Subsidiaries and Anniates	19.	Total Preferred Stocks				
COMMON STOCKS	20.	United States				
Industrial and Miscellaneous	21.	Canada				
(unaffiliated)	21.	Other Countries				
,	23.	Totals				
Parent, Subsidiaries and Affiliates	24.	Totals				
a drait, Jubaidianes and Anniales	25.	Total Common Stocks				
	26.	Total Stocks				
	27.	Total Bonds and Stocks	152,970,213	161,717,038	153,265,243	
	۷1.	ו טומו טטוועס מווע טוטטגס	102,010,210	101,717,000	100,200,240	

#### **SCHEDULE D - PART 1A - SECTION 1**

	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 11.7	Total from Col. 7 Prior Year	% From Col. 8 Prior Year	Total Publicly Traded	Total Privately Placed (a)
1. U.S. Governments												
1.1 NAIC 1	21,989,676					XXX	21,989,676	12.6	3,820,801	2.8	21,989,676	
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	21,989,676					XXX	21,989,676	12.6	3,820,801	2.8	21,989,676	
2. All Other Governments												
2.1 NAIC 1						XXX			1, 118, 549	0.8		
2.2 NAIC 2					1,305,151	XXX	1,305,151	0.7	, , , , , , , , , , , , , , , , , , ,			1,305,15
2.3 NAIC 3						XXX						, , , , , , , , , , , , , , , , , , ,
2.4 NAIC 4						XXX						
2.5 NAIC 5						XXX						
2.6 NAIC 6						XXX						
2.7 Totals					1,305,151	XXX	1,305,151	0.7	1,118,549	0.8		1,305,15
U.S. States. Territories and Possessions etc					.,000,101	7001	1,000,101	• • • • • • • • • • • • • • • • • • • •	.,,	0.0		1,000,10
Guaranteed												
3.1 NAIC 1				2,421,339		XXX	2,421,339	1.4	2,159,442	1.6	2,421,339	
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				2,421,339		XXX	2,421,339	1.4	2,159,442	1.6	2.421.339	
4. U.S. Political Subdivisions of States, Territories and				2,121,000		7000	2,121,000		2,100,112	1.0	2,121,000	
Possessions , Guaranteed												
4.1 NAIC 1				445.090	2,388,144	XXX	2,833,234	1.6	2,496,830	1.8	2,833,234	
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				445.090	2.388.144	XXX	2.833.234	1.6	2.496.830	1.8	2.833.234	
U.S. Special Revenue & Special Assessment				110,000	2,000,111	7000	2,000,201	1.0	2,100,000	1.0	2,000,201	
Obligations, etc., Non-Guaranteed												
5.1 NAIC 1			65,833	1.302.701	7.618.125	XXX	8.986.659	5.1	10.446.439	7.6	8.986.659	
5.2 NAIC 2	25,038	378.979	575,773	2,814,275	, 0 10 , 120	XXX	3,794,065	2.2		1.9	3,794,065	
5.3 NAIC 3						XXX						
5.4 NAIC 4	•					XXX				•		
5.5 NAIC 5	•					XXX						
5.6 NAIC 6						XXX				•		
5.7 Totals	25.038	378.979	641.606	4,116,976	7,618,125	XXX	12.780.724	7.3	12.996.881	9.5	12.780.724	

10.7 Totals

#### ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Cape Verity III, Inc.

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

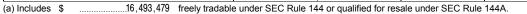
Quality and Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Types of Issues and NAIC Designations												
NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 No Maturity Date	7 Total Current Year	8 Col. 7 as a % of Line 11.7	9 Total from Col. 7 Prior Year	10 % From Col. 8 Prior Year	11 Total Publicly Traded	12 Total Privately Placed (a)
6. Industrial & Miscellaneous (Unaffiliated)	1 Total of Ecos	Through 5 Tears	Through to Tears	Through 20 Tears	OVCI 20 TCGIS	Date	Total Gallent Teal	LIIIC 11.7	Thorrea	T HOL T COL	Traucu	i idoca (d)
6.1 NAIC 1	874,229	7,053,801	11,681,710	16,890,360	14,499,396	xxx	50,999,496	29.1	41,118,791	30.1	39,930,395	11,069,101
6.2 NAIC 2		772.785	11,975,225		48,319,155	XXX	82,630,269	47.2		53.4		4,119,227
6.3 NAIC 3						XXX						, , ,
6.4 NAIC 4						XXX						
6.5 NAIC 5						XXX						
6.6 NAIC 6						XXX						
6.7 Totals	874,229	7,826,586	23,656,935	38,453,464	62,818,551	XXX	133,629,765	76.4	114,104,462	83.5	118,441,437	15,188,328
7. Hybrid Securities	5,==0	.,020,000	20,000,000	30, 100, 101	32,0.0,00.	7001	.00,020,100		,,	33.0	110,111,101	10,100,020
7.1 NAIC 1						XXX						
7.2 NAIC 2						XXX						
7.3 NAIC 3						XXX						
7.4 NAIC 4						XXX						
7.5 NAIC 5						XXX						
7.6 NAIC 6						XXX						
7.7 Totals						XXX						
8. Parent, Subsidiaries and Affiliates						7001						
8.1 NAIC 1						xxx						
8.2 NAIC 2						XXX						
8.3 NAIC 3						XXX						
8.4 NAIC 4						XXX						
8.5 NAIC 5						XXX						
8.6 NAIC 6						XXX						
8.7 Totals						XXX						
9. SVO Identified Funds						7000						
9.1 NAIC 1	xxx	XXX	XXX	XXX	XXX							
9.2 NAIC 2	XXX	XXX	XXX	XXX	XXX							
9.3 NAIC 3	XXX	XXX	XXX	XXX	XXX							
9.4 NAIC 4	XXX	XXX	XXX	XXX	XXX							
9.5 NAIC 5	XXX	XXX	XXX	XXX	XXX							
9.6 NAIC 6	XXX	XXX	XXX	XXX	XXX							
9.7 Totals	XXX	XXX	XXX	XXX	XXX							
10. Unaffiliated Bank Loans	7000	/VV\	////	7000	7000							
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						
10.014/110 0				<b>I</b>		////	+		1		<del> </del>	1

XXX

#### 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

1	2	3	4	5	6	es by Major Types T 7	8	9	10	11	12
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 11.7	Total from Col. 7 Prior Year	% From Col. 8 Prior Year	Total Publicly Traded	Total Privately Placed (a)
	.,										, , ,
(d)22,863,905	7,053,801	11,747,543	21,059,490	24,505,665		87,230,404	49.9	XXX	XXX		11,069,101
(d)25,038	1,151,764		24,377,379	49,624,306		87,729,485	50.1	XXX	XXX	82,305,107	5,424,378
(d)								XXX	XXX		
.(d)								XXX	XXX		
(d)						(c)		XXX	XXX		
.(d)						(c)		XXX			
22.888.943	8,205,565	24,298,541	45,436,869	74,129,971		(b)174.959.889	100.0	XXX		158,466,410	16,493,479
	4.7	13.9	26.0	42.4		100.0	XXX			90.6	
4,023,299	925,623	1,820,209	12,556,705	41,835,016		XXX	XXX	61,160,852	44.7	54,471,904	6,688,948
, -,	750,063	2,506,640	12,416,937	59,862,473		XXX	XXX		55.3	71,996,041	3,540,072
	· · · · · · · · · · · · · · · · · · ·					XXX	XXX				
						XXX	XXX				
						XXX	XXX	(c)			
						XXX	XXX	(c)			
4,023,299	1,675,686	4,326,849	24,973,642	101,697,489		XXX	XXX	(b)136,696,965	100.0	126,467,945	10,229,020
2.9	1.2	3.2	18.3	74.4			XXX	100.0	XXX	92.5	
22,655,739	1,156,566	10,350,530	18,741,784	23,256,684		76, 161, 303	43.5	54,471,904	39.8		XXX
25,038	1,151,764	12,550,999	24,377,379	44, 199, 927		82,305,107	47.0	71,996,041	52.7	82,305,107	XXX
								, , , ,			XXX
											XXX
											XXX
											XXX
22,680,777	2,308,330	22,901,529	43, 119, 163	67,456,611		158,466,410	90.6	126,467,945	92.5	158,466,410	XXX
14.3	1.5	14.5	27.2	42.6		100.0	XXX	XXX	XXX	100.0	XXX
13.0	1.3	13.1	24.6	38.6		90.6	XXX	XXX	XXX	90.6	XXX
208,166	5,897,235	1,397,013	2,317,706	1,248,981		11,069,101	6.3	6,688,948	4.9	XXX	11,069,101
		(1)		5,424,379		5,424,378	3.1	3,540,072	2.6	XXX	5,424,378
										XXX	
										XXX	
										XXX	
-										XXX	
208,166	5,897,235	1,397,012	2,317,706	6,673,360	<u> </u>	16,493,479	9.4	10,229,020	7.5	XXX	16,493,479
1.3	35.8	8.5	14.1	40.5		100.0	XXX	XXX	XXX	XXX	100.0
0.1	3.4	0.8	1.3	3.8		9.4	XXX	XXX	XXX	XXX	9.4
	1 1 Year or Less  (d)	1 2 Over 1 Year Through 5 Years  (d)	1	1	1	1   2   Over 1 Year   Through 5 Years   Through 10 Years   Through 10 Years   Through 10 Years   Through 20 Years   Through 20 Years   Through 20 Years   Over 20 Years   Ov	1	1 2 7 Over 1 Year 1 Year or Less	1   2   2   2   3   4   5   5   5   6   5   6   7   1   2   2   5   6   6   7   2   2   2   2   2   2   2   2   2	1 1	1



<sup>(</sup>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 statement.

(c) Includes \$ current year, \$ prior year of bonds with 5GI designations and \$ current year, \$ prior year of bonds with 6\* designations. "5GI" means the NAIC designation was assigned by the

<sup>(</sup>SVO) in reliance on the insurer's certification that the issuer is current in all principal and interest payments. "6\*" means the NAIC designation was assigned by the SVO due to inadequate certification of principal and interest payments.

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

	Matur	ity Distribution of	All Bonds Owned	d December 31, a	nt Book/Adjusted (	Carrying Values	by Major Type and	Subtype of Issue	es			
	1	2	3	4	5	6	7	8	9	10	11	12
		Over 1 Year	Over 5 Years	Over 10 Years		No Maturity		Col. 7 as a % of	Total from Col. 7	% From Col. 8	Total Publicly	Total Privately
Distribution by Type	1 Year or Less	Through 5 Years	Through 10 Years	Through 20 Years	Over 20 Years	Date	<b>Total Current Year</b>	Line 11.08	Prior Year	Prior Year	Traded	Placed
1. U.S. Governments												
1.01 Issuer Obligations	21,989,676					XXX	21,989,676	12.6	3,820,801	2.8	21,989,676	
1.02 Residential Mortgage-Backed Securities						XXX					, , , , , , , , , , , , , , , , , , ,	
1.03 Commercial Mortgage-Backed Securities						XXX						
1.04 Other Loan-Backed and Structured Securities						XXX						
1.05 Totals	21,989,676					XXX	21,989,676	12.6	3,820,801	2.8	21,989,676	
2. All Other Governments	21,000,010					7001	21,000,010		0,020,001		21,000,010	
2.01 Issuer Obligations					1,305,151	XXX	1,305,151	0.7	1,118,549	0.8		1,305,151
2.02 Residential Mortgage-Backed Securities					1,303,131	XXX	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		1, 110,349			1,303, 131
2.03 Commercial Mortgage-Backed Securities						XXX						
2.04 Other Loan-Backed and Structured Securities												
2.04 Other Loan-Backed and Structured Securities					1 005 151	XXX	1 005 151	0.7	4 440 540	0.0		1 005 151
					1,305,151	XXX	1,305,151	0.7	1,118,549	0.8		1,305,151
3. U.S. States, Territories and Possessions, Guaranteed												
3.01 Issuer Obligations				2,421,339		XXX	2,421,339	1.4	2, 159, 442	1.6	2,421,339	
3.02 Residential Mortgage-Backed Securities						XXX						
3.03 Commercial Mortgage-Backed Securities						XXX						
3.04 Other Loan-Backed and Structured Securities						XXX						
3.05 Totals				2,421,339		XXX	2,421,339	1.4	2,159,442	1.6	2,421,339	
4. U.S. Political Subdivisions of States, Territories and												
Possessions, Guaranteed												
4.01 Issuer Obligations				445,090	2,388,144	XXX	2,833,234	1.6	2,496,830	1.8	2,833,234	
4.02 Residential Mortgage-Backed Securities						XXX						
4.03 Commercial Mortgage-Backed Securities						XXX						
4.04 Other Loan-Backed and Structured Securities						XXX						
4.05 Totals				445,090	2,388,144	XXX	2,833,234	1.6	2,496,830	1.8	2,833,234	
5. U.S. Special Revenue & Special Assessment Obligations					_,,,,,,,,				_,,		=,=++,=++	
etc., Non-Guaranteed												
5.01 Issuer Obligations	25,038	378.979	641,606	4,116,976	7,618,125	XXX	12,780,724	7.3	12,996,881	9.5	12,780,724	
5.02 Residential Mortgage-Backed Securities				, , ,		XXX						
5.03 Commercial Mortgage-Backed Securities						XXX						
5.04 Other Loan-Backed and Structured Securities						XXX						
5.05 Totals	25,038	378,979	641,606	4,116,976	7,618,125	XXX	12,780,724	7.3	12,996,881	9.5	12,780,724	
6. Industrial and Miscellaneous	20,000	010,010	011,000	1,110,010	1,010,120	7000	12,700,721	7.0	12,000,001	0.0	12,700,721	
6.01 Issuer Obligations	275,500	2,084,912	23,524,555	37,389,522	62,109,850	V/V/	125,384,339	71.7	113,563,403	83.1	116,072,695	9,311,644
6.02 Residential Mortgage-Backed Securities			Z3,324,333			XXX			113,303,403	os. I		9,311,044
6.03 Commercial Mortgage-Backed Securities	85,973		125 , 185 7 . 195	81,914	708,701	XXX	1, 197,718 2,428,998	0.7 1.4	541,059	0.4	1, 197, 718	2,428,998
	F40 750		1 , 195			XXX						
6.04 Other Loan-Backed and Structured Securities	512,756	3,123,926	22 252 225	982,028	22 212 551	XXX	4,618,710	2.6			1,171,024	3,447,686
6.05 Totals	874,229	7,826,586	23,656,935	38,453,464	62,818,551	XXX	133,629,765	76.4	114,104,462	83.5	118,441,437	15,188,328
7. Hybrid Securities												
7.01 Issuer Obligations						XXX						
7.02 Residential Mortgage-Backed Securities						XXX						
7.03 Commercial Mortgage-Backed Securities						XXX						
7.04 Other Loan-Backed and Structured Securities						XXX						
7.05 Totals						XXX						
8. Parent, Subsidiaries and Affiliates												
8.01 Issuer Obligations						XXX	1					
8.02 Residential Mortgage-Backed Securities						XXX						
8.03 Commercial Mortgage-Backed Securities			• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	***************************************	XXX						
8.04 Other Loan-Backed and Structured Securities			•	•		XXX	•					
8.05 Affiliated Bank Loans - Issued						XXX	·					
8.06 Affiliated Bank Loans - Acquired						XXX						
							+					
8.07 Totals						XXX						

SCHEDULE D - PART 1A - SECTION 2 (Continued)

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

		_	All Bonds Owne	d December 31, a			by Major Type and	Subtype of Issue			1	
	1	2	3	4	5	6	7	8	9	10	11	12
		Over 1 Year	Over 5 Years	Over 10 Years		No Maturity		Col. 7 as a % of	Total from Col. 7	% From Col. 8	Total Publicly	Total Privately
Distribution by Type	1 Year or Less	Through 5 Years	Through 10 Years	Through 20 Years	Over 20 Years	Date	Total Current Year	Line 11.08	Prior Year	Prior Year	Traded	Placed
9. SVO Identified Funds												
9.01 Exchange Traded Funds Identified by the SVO	XXX	XXX	XXX	XXX	XXX							
9.02 Bond Mutual Funds Identified by the SVO	XXX	XXX	XXX	XXX	XXX							
9.03 Totals	XXX	XXX	XXX	XXX	XXX							
10. Unaffiliated Bank Loans												
10.01 Unaffiliated Bank Loans - Issued						XXX			• • • • • • • • • • • • • • • • • • • •			
10.02 Unaffiliated Bank Loans - Acquired						XXX						
10.03 Totals						XXX						
11. Total Bonds Current Year												
11.01 Issuer Obligations	22,290,214	2,463,891	24, 166, 161	44,372,927		XXX	166,714,463	95.3	XXX	XXX	156,097,668	10,616,795
11.02 Residential Mortgage-Backed Securities	85,973	195,945	125, 185	81,914		XXX	1, 197, 718	0.7	XXX	XXX	1, 197, 718	
11.03 Commercial Mortgage-Backed Securities	, ,	2.421.803	7.195	,	,	XXX	2,428,998	1.4	XXX	XXX	, ,	2.428.998
11.04 Other Loan-Backed and Structured Securities	512,756	3,123,926	, , , , , , , , , , , , , , , , , , ,	982.028		XXX	4,618,710	2.6	XXX	XXX	1,171,024	3.447.686
11.05 SVO Identified Funds	XXX	XXX	XXX	XXX	XXX		, ,		XXX	XXX	·	, ,
11.06 Affiliated Bank Loans						XXX			XXX	XXX		
11.07 Unaffiliated Bank Loans						XXX			XXX	XXX		
11.08 Totals	22.888.943	8,205,565	24.298.541	45.436.869	74, 129, 971		174.959.889	100.0	XXX	XXX	158 . 466 . 410	16.493.479
11.09 Line 11.08 as a % of Col. 7	13.1	4.7	13.9	26.0	42.4		100.0	XXX	XXX	XXX	90.6	9.4
12. Total Bonds Prior Year											-	-
12.01 Issuer Obligations	4.023.299	1,675,686	4,326,849	24,973,642	101, 156, 430	XXX	XXX	XXX	136, 155, 906	99.6	125,926,886	10,229,020
12.02 Residential Mortgage-Backed Securities	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					XXX	XXX	XXX				
12.03 Commercial Mortgage-Backed Securities					541,059	XXX	XXX	XXX	.541,059	0.4	.541,059	
12.04 Other Loan-Backed and Structured Securities						XXX	XXX	XXX			,	
12.05 SVO Identified Funds	XXX	XXX	XXX	XXX	XXX		XXX	XXX				
12.06 Affiliated Bank Loans						XXX	XXX	XXX				
12.07 Unaffiliated Bank Loans						XXX	XXX	XXX				
12.08 Totals	4,023,299	1,675,686	4,326,849	24,973,642	101,697,489		XXX	XXX	136,696,965	100.0	126,467,945	10,229,020
12.09 Line 12.08 as a % of Col. 9	2.9	1.2	3.2	18.3	74.4		XXX	XXX	100.0	XXX	92.5	7.5
13. Total Publicly Traded Bonds	2.0		V		, , , ,		7001	7001	100.0	7001	02.0	
13.01 Issuer Obligations	22.082.048	1,454,117	22,776,344	43,037,249		XXX	156,097,667	89.2	125,926,886		156,097,667	XXX
13.02 Residential Mortgage-Backed Securities	85,973	195,945	125, 185	81.914	708,701	XXX	1, 197, 718	0.7	120,020,000		1, 197, 718	XXX
13.03 Commercial Mortgage-Backed Securities			120, 100			XXX	, 101 ,1 10			0.4	, 107,710	XXX
13.04 Other Loan-Backed and Structured Securities	.512,756	658,269				XXX	1, 171, 025	0.7			1,171,025	XXX
13.05 SVO Identified Funds	XXX	XXX	XXX	XXX	XXX		,, •=•				,, •=•	XXX
13.06 Affiliated Bank Loans						XXX						XXX
13.07 Unaffiliated Bank Loans						XXX						XXX
13.08 Totals	22,680,777	2,308,331	22,901,529	43, 119, 163	67,456,610		158,466,410	90.6	126,467,945	.92.5	158,466,410	XXX
13.09 Line 13.08 as a % of Col. 7	14.3	1.5	14.5	27.2	42.6		100.0	XXX	XXX	XXX	100.0	XXX
13.10 Line 13.08 as a % of Line 11.08, Col. 7,												
Section 11	13.0	1.3	13.1	24.6	38.6		90.6	XXX	XXX	XXX	90.6	XXX
14. Total Privately Placed Bonds									· · ·			
14.01 Issuer Obligations	208, 166	1,009,774	1,389,817	1,335,678	6,673,361	XXX	10,616,796	6.1	10,229,020	7.5	XXX	10,616,796
14.02 Residential Mortgage-Backed Securities						XXX					XXX	
14.03 Commercial Mortgage-Backed Securities		2,421,803	7 , 195			XXX	2,428,998	1.4			XXX	2,428,998
14.04 Other Loan-Backed and Structured Securities		2,465,657		982,028		XXX	3,447,685	2.0			XXX	3,447,685
14.05 SVO Identified Funds	XXX	XXX	XXX	XXX	XXX						XXX	
14.06 Affiliated Bank Loans						XXX					XXX	
14.07 Unaffiliated Bank Loans						XXX					XXX	
14.08 Totals	208, 166	5,897,234	1,397,012	2,317,706	6,673,361		16,493,479	9.4	10,229,020	7.5	XXX	16,493,479
14.09 Line 14.08 as a % of Col. 7	1.3	35.8	8.5	14.1	40.5		100.0	XXX	XXX	XXX	XXX	100.0
14.10 Line 14.08 as a % of Line 11.08, Col. 7,												
Section 11	0.1	3.4	0.8	1.3	3.8		9.4	XXX	XXX	XXX	XXX	9.4

## **SCHEDULE DA - VERIFICATION BETWEEN YEARS**

Short-Term Investments

Short-reminiv	1 Total	2 Bonds	3 Mortgage Loans	4 Other Short-term Investment Assets (a)	5 Investments in Parent, Subsidiaries and Affiliates
Book/adjusted carrying value, December 31 of prior year	821,895	821,895			
Cost of short-term investments acquired	76,682,021	76,682,021			
Accrual of discount	123,171	123,171			
4. Unrealized valuation increase (decrease)					
5. Total gain (loss) on disposals	268	268			
Deduct consideration received on disposals	58,786,559	58,786,559			
7. Deduct amortization of premium					
Total foreign exchange change in book/adjusted carrying value					
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)	18,840,796	18,840,796			
11. Deduct total nonadmitted amounts					
12. Statement value at end of current period (Line 10 minus Line 11)	18,840,796	18,840,796			

<sup>(</sup>a) Indicate the category of such assets, for example, joint ventures, transportation equipment:

# Schedule DB - Part A - Verification - Options, Caps, Floors, Collars, Swaps and Forwards NONE

Schedule DB - Part B - Verification - Futures Contracts **NONE** 

Schedule DB - Part C - Section 1 - Replication (Synthetic Asset) Transactions (RSATs) Open NONE

Schedule DB-Part C-Section 2-Reconciliation of Replication (Synthetic Asset) Transactions Open **NONE** 

Schedule DB - Verification - Book/Adjusted Carrying Value, Fair Value and Potential Exposure of Derivatives

NONE

#### **SCHEDULE E - PART 2 - VERIFICATION BETWEEN YEARS**

(Cash Equivalents) 2 Money Market Total Other (a) Bonds Mutual funds 1. Book/adjusted carrying value, December 31 of prior year ..8,088,047 .2,998,905 .5,089,142 .81,575,558 ..13, 135, 113 .68,440,445 2. Cost of cash equivalents acquired . ...14,859 .14,859 3. Accrual of discount .... Unrealized valuation increase (decrease) 3 3 5. Total gain (loss) on disposals .12,999,999 .86,063,809 .73,063,810 6. Deduct consideration received on disposals 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-.3,614,658 .3,148,881 .465,777 7+8-9) 11. Deduct total nonadmitted amounts . 465,777 3,614,658 3,148,881 Statement value at end of current period (Line 10 minus Line 11)

 $<sup>\</sup>hbox{(a) Indicate the category of such investments, for example, joint ventures, transportation equipment:}\\$ 

# Schedule A - Part 1 - Real Estate Owned NONE

Schedule A - Part 2 - Real Estate Acquired and Additions Made **NONE** 

Schedule A - Part 3 - Real Estate Disposed **NONE** 

Schedule B - Part 1 - Mortgage Loans Owned **NONE** 

Schedule B - Part 2 - Mortgage Loans Acquired and Additions Made **NONE** 

Schedule B - Part 3 - Mortgage Loans Disposed, Transferred or Repaid

NONE

Schedule BA - Part 1 - Other Long-Term Invested Assets Owned **NONE** 

Schedule BA - Part 2 - Other Long-Term Invested Assets Acquired and Additions Made NONE

Schedule BA - Part 3 - Other Long-Term Invested Assets Disposed, Transferred or Repaid NONE

# **SCHEDULE D - PART 1**

Showing All Long-Term BONDS Owned December 31 of Current Year

								Showing All Lor	ig-Teitii bOND	s Owned Dece	ilibel 3 i oi	Current re	ai								
1	2		Coc	des	6	7		Fair Value	10	11	Change	e in Book/Adi	usted Carrying	g Value			I	nterest		Da	ates
		3	4	5			8	9			12	13	14	15	16	17	18	19	20	21	22
		-	1	_	NAIC																
					Desig-																
					5																
					nation,									T. ( . )							
					NAIC									Total							
			_		Desig-								_	Foreign							
			F		nation								Current	Exchange							
			0		Modifie	r							Year's	Change							
			r		and		Rate					Current	Other-	in							
		С	е		SVO		Used to			Book/	Unrealized	Year's	Than-	Book/				Admitted			Stated
		0	l i		Admini-	_	Obtain			Adjusted	Valuation	(Amor-	Temporary	Adjusted		Effective		Amount	Amount		Contractual
CUSIP		ď	g	Bond	-	Actual	Fair	Fair	Par	Carrying	Increase/	tization)	Impairment	Carrying	Rate	Rate	When	Due and	Received		Maturity
Identification	Description	e	n n	Char	Symbo		Value	Value	Value	Value	(Decrease)	Accretion	Recognized	Value	of	of	Paid	Accrued	During Year	Acquired	Date
	· · · · · · · · · · · · · · · · · · ·	C	1 11	Onai	Gyiribu	0031		value	value	value	(Decrease)	Accietion	rtecognized	value				Accided	During real		
	al - U.S. Government Bonds	-	In	1	1 0 A FF	1 005 500	XXX	1 000 000	1 100 000	1 005 151		(000)		ł	XXX	XXX	XXX	00.004	10 000	XXX	XXX
	ELECTRICITE DE FRANCE SA SENIOR CORP BND	<del> </del>	.I V	.]	2.A FE	1,305,538			1,100,000	1,305,151		(329)			4.875	3.649	W	23,684	16,088	12/17/2020	01/22/2044
	ototal - Bonds - All Other Governments -	issue	r Obli	gations			XXX	1,388,860	1,100,000	1,305,151		(329)			XXX	XXX	XXX	23,684	16,088	XXX	XXX
	al - All Other Government Bonds					1,305,538		1,388,860	1,100,000	1,305,151		(329)			XXX	XXX	XXX	23,684	16,088	XXX	XXX
	CALIFORNIA STATE OF MUNI BND GO	<u></u>	.	. [1	1.C FE .		2180.8780	2,532,292	1,400,000	2,421,339		(8,476)			7.600	2.770	MN	17,733	31,920	12/17/2020	11/01/2040
	ototal - Bonds - U.S. States, Territories a	and Po	ssess	sions - Is	ssuer												l				
Ob	ligations					2,434,562		2,532,292	1,400,000	2,421,339		(8,476)			XXX	XXX	XXX	17,733	31,920	XXX	XXX
1799999. Tot	al - U.S. States, Territories and Possess	sions E	Bonds			2,434,562	2 XXX	2,532,292	1,400,000	2,421,339		(8,476)			XXX	XXX	XXX	17,733	31,920	XXX	XXX
	LOS ANGELES CALIF CMNTY COLLEG MUNI BND			. 1	1.B FE .		7 165. 2800		630,000	990,366		(2,787)			6.600	2.839		17,325	12,474	12/17/2020	08/01/2042
54438C-PA-4	LOS ANGELES CALIF CMNTY COLLEG LOS ANGEL			. 1	1.B FE .		179.7060	1,958,795	1,090,000	1,842,868		(4,443)			6.750	2.892	FA	30,656	22,073	12/17/2020	08/01/2049
1899999. Sul	ototal - Bonds - U.S. Political Subdivisior	าร - Iss	suer C	Obligatio	ns	2,843,822	2 XXX	3,000,059	1,720,000	2,833,234		(7,230)			XXX	XXX	XXX	47,981	34,547	XXX	XXX
2499999. Tot	al - U.S. Political Subdivisions Bonds					2,843,822	2 XXX	3,000,059	1,720,000	2,833,234		(7,230)			XXX	XXX	XXX	47,981	34,547	XXX	XXX
02765U-CR-3	AMERICAN MUN POWER-OHIO INC AMERICAN MUN			1	1.F FE .	374,776	146.7600	410,928	280,000	374,232		(227)			6.053	3.647	FA	6,403	5,085	12/17/2020	02/15/2043
	BAY AREA TOLL AUTHORITY MUNITAX BND REV			. 1	1.D FE .	1,207,688		1,281,448	700,000	1,203,670		(2,859)			7.043	3.026		12,325	14,790	12/17/2020	04/01/2050
	BAY AREA TOLL AUTHORITY MUNITAX BND REV			. 1	1.E FE .		2 184 . 5740	1,125,901	610,000	1,057,736		(2,033)			6.907	3.036		10,533	12,640	12/17/2020	10/01/2050
	DALLAS FORT WORTH TEX INTL ARP MUNITAX				1.E FE .		106.9530		725,000	758,696		(42)			3. 144	2.855		3,799	6,838	12/17/2020	11/01/2045
574300-HZ-5	MARYLAND ST TRANSN AUTH MARYLAND ST TRAN			.   1	1.C FE .		147.0500	1,029,350	700,000	980,307		(3, 161)			5.888	2.804		20,608	12,365	12/17/2020	07/01/2043
646136-XR-7	NEW JERSEY ST TRANSN TR FD AUT MUNI BND				2.A FE .		3 138 . 0720	1,249,552	905,000	1,212,816		(2,604)			6.561	4.056		2,639	17,813	12/17/2020	12/15/2040
64972F-K8-8 73358W-3L-6	NEW YORK CITY MUN WATER FINANC MUNI BNDPORT AUTH NY & NJ MUNITAX BND				1.B FE . 1.D FE .	804,450		880,275 1,602,645	560,000 1,500,000	800,932 1,569,543		(880)			5.952	3.094		1,481 20,544	9,999 14,175	12/17/2020	06/15/2042
73358W-XQ-2	PORT AUTH NY & NJ MUNITAX BND			1	1.D FE .	1,569,560		1,920,330	1,385,000	1,369,343		(19)			4.810	3.097			14, 175	12/17/2020	08/01/2069
913366-DF-4	UNIVERSITY CALIF REGTS MED CTR MUNI BND			1	1.D FE .	417, 186		453,314	280.000	414.764		(542)			6.583	3.154		2.355	5,530	12/17/2020	05/15/2049
93976A-AH-5	WASHINGTON ST CONV CENTER PUBL MUNITAX B			1	2.A FE	2,600,420		2,611,800	2,000,000	2,581,249		(15,941)			6.790	3.597	JJ	67,900	40,740	12/17/2020	07/01/2040
2599999. Sul	ototal - Bonds - U.S. Special Revenues -	Issue	er Obli	gations	•	12,823,606		13,340,952	9,645,000	12,780,724		(29,610)			XXX	XXX	XXX	162,651	159,961	XXX	XXX
	al - U.S. Special Revenues Bonds			generalia			XXX	13,340,952	9,645,000	12,780,724		(29,610)			XXX	XXX	XXX	162,651	159,961	XXX	XXX
00206R-ME-9	AT&T INC SENIOR CORP BND 144A			2	2.B FE	979,309			1,033,000	979,473		164			3.650	3.894		10,788	100,001	12/17/2020	09/15/2059
00817Y-AZ-1	AETNA INC SENIOR CORP BND		]	1	2.B FE	1,072,76		1,192,670	1,000,000	1,074,025		716			3.875	3.400		14,639	11,625	12/17/2020	08/15/2047
012725-AD-9	ALBEMARLE CORP SENIOR CORP BND			1	2.C FE .			1,556,607	1,300,000	1,479,657		(306)			5.450	4.479		5,904	21,255	12/17/2020	12/01/2044
02209S-AV-5	ALTRIA GROUP INC SENIOR CORP BND			. 1	2.B FE .		105. 6290	1,267,548	1,200,000	1, 176, 977		1,081			3.875	3.973	MS	13,563	13,950	12/17/2020	09/16/2046
023135-AQ-9	AMAZON.COM INC SENIOR CORP BND		.	. 1	1.E FE .	1,364,476		1,467,010	1,000,000	1,361,945		(1,684)			4.950	2.807	JD	3,575	14,850	12/17/2020	12/05/2044
025816-BD-0	AMERICAN EXPRESS COMPANY SENIOR CORP BND		-		2.A FE .	773,24			750,000	772,785		(433)			2.650	1.040		1,601	5,963	12/17/2020	12/02/2022
031162-BE-9	AMGEN INC SENIOR CORP BND			. []	2.A FE .		135.2840	1,352,840	1,000,000	1,243,649		(666)			4.950	3.287		12,375	14,850	12/17/2020	10/01/2041
031162-BZ-2 03522A-AJ-9	AMGEN INC SENIOR CORP BND				2.A FE .	1,456,95		1,604,338	1,250,000	1,456,980		(69)			4.400	3.358		9,167	16,500	12/17/2020	05/01/2045
03522A-AJ-9 035240-AG-5	ANHEUSER-BUSCH COMPANIES LLC CUMP BND				2.B FE .		4130.0230 7131.3730	2,340,414	1,800,000 750,000	2, 157, 128 906, 918		(454)			4.900	3.645		36,750	26,460	12/17/2020	02/01/2046
037833-BX-7	APPLE INC SENIOR CORP BND		1	1	1.B FE .	1,321,766			1,000,000	1.320.296		(293)			4.950	2.809			11, 138	12/17/2020	01/15/2042
038222-AN-5	APPLIED MATERIALS INC SENIOR CORP BND		1	2	1.G FE .	1,551,51		1,556,640	1,500,000	1,550,775		(736)			1.750	1.356		2.188	3,981	12/17/2020	06/01/2030
	BAE SYSTEMS HOLDINGS INC SENIOR CORP BND		1	1	2.B FE	310,088		329, 173	250,000	309,888		(146)			4.750	3.266		2,771	3,563	12/17/2020	10/07/2044
	BANK OF AMERICA CORP SENIOR CORP BND MTN			1	1.G FE .			694,890	525,000	650,061		(469)			4.443	3.093	JJ	10,432	6,998	12/17/2020	01/20/2048
	BANK OF AMERICA CORP SENIOR CORP BND MT			. 1	1.G FE .	1,502,18	124.9930	1,624,909	1,300,000	1,502,264		(35)			3.946	3.072		22,514	15,389	12/17/2020	01/23/2049
	BARRICK NORTH AMERICA FINANCE CORP BND			. 1	2.A FE .		4149.5940	538,538	360,000	451,451		(3,065)			7.500	5.275		7,950	27,000	05/01/2019	09/15/2038
075887-AV-1	BECTON DICKINSON AND COMPANY CORP BND			. 1	2.C FE .		1 131 . 4310	1,256,480	956,000	1,201,212		(1,487)			6.000	4.000		7,329	17,208	12/17/2020	05/15/2039
110122-DJ-4	BRISTOL-MYERS SQUIBB CO SENIOR CORP BND		-	. 2	1.F FE .		1 144 . 6380	723, 190	500,000	659,930		(271)			5.000	3.072		9,444	3,750	12/17/2020	08/15/2045
124857-AN-3 125896-BL-3	CBS CORP SENIOR CORP BND			. 1	2.B FE .	1,111,077		1, 196, 980	1,000,000	1,111,377		127			4.600	3.856		21,211	13,800	12/17/2020	01/15/2045
125896-BL-3 12626P-AN-3	CMS ENERGY CORPORATION SENIOR CORP BND				2.B FE .	2,373,808		2,572,700 1,030,370	2,000,000 775,000	2,372,699		(847) (156)			5. 125	3.453		23,761	28,200	12/1//2020	03/31/2043 05/18/2045
172967-HS-3	CITIGROUP INC - LT GTD SUB CORP BND		1	1'	2.A FE .	2,007,68		2, 186, 911	1,550,000	2,005,230		(1,662)			5.300	3.437		12.551	24.645	12/17/2020	05/18/2045
185508-AE-8	CLECO POWER LLC CORP BND	1	1	1	2.B FE		9138 . 3550	2,100,911	2,099,000	2.770.903		(6, 127)			6.500	3.437		11.370	40.931	12/17/2020	12/01/2035
20030N-AM-3	COMCAST CORPORATION CORP BND	1	1	1	1.G FE .		2153.9440	3,694,656	2,400,000	3,609,410		(11,413)			6.450	2.612		45,580	23,220	12/17/2020	03/15/2037
207597-DV-4	CONNECTICUT LIGHT AND POWER CO CONNECTIC		.1	1	1.E FE		2 148 . 2150		1,000,000	1,409,090		(4,315)			6.350	2.998		5.292	19.050		06/01/2036

## **SCHEDULE D - PART 1**

Showing All Long-Term BONDS Owned December 31 of Current Year

								Showing All Lor	ng-Term BOND:	S Owned Dece	mber 31 of	Current Ye	ar								
1	2		Coc	les	6	7		Fair Value	10	11	Change	in Book/Adi	usted Carryin	g Value			lı .	nterest		Da	ates
	<u>-</u>	3	4	5	1 ~	'	8	9	1	• • • • • • • • • • • • • • • • • • • •	12	13	14	15	16	17	18	19	20	21	22
		٦	1 7	3	NIAIO		0	9			12	13	14	13	10	''	10	19	20	21	22
					NAIC																
					Desig-																
					nation,																
					NAIC									Total							
					Desig-									Foreign							
			F		nation								Current	Exchange							
			0		Modifier								Year's	Change							
			U		I		D							. •							
			r		and		Rate					Current	Other-	_ in							
		С	е		SVO		Used to	)		Book/	Unrealized	Year's	Than-	Book/				Admitted			Stated
		0	i		Admini-		Obtain			Adjusted	Valuation	(Amor-	Temporary	Adjusted		Effective		Amount	Amount		Contractual
CUSIP		d	g	Bond	strative	Actual	Fair	Fair	Par	Carrying	Increase/	tization)	Impairment	Carrying	Rate	Rate	When	Due and	Received		Maturity
Identification	Description	е	n	Char	Symbol	Cost	Value	Value	Value	Value	(Decrease)	Accretion	Recognized	Value	of	of	Paid	Accrued	During Year	Acquired	Date
254687-DV-5	WALT DISNEY CO SENIOR CORP BND	T -	<b>-</b>	0	1.G FM	1,424,050			1,000,000	1,417,303	(200.0000)	(6,242)	. tooogzou	7 4.40	6.550		MS	19,286	19,650	12/17/2020	03/15/2033
26442C-AB-0	DUKE ENERGY CAROLINAS LLC SECURED CORP B	1		1	1.F FE		149.9590	749,795	500,000	712,931		(1,853)			6.000	2.813	.I.I	13,833	9,000	12/17/2020	01/15/2038
277432-AP-5	EASTMAN CHEMICAL COMPANY SENIOR CORP BND			1	2.C FE		126.5920	316,480	250,000	292,792		(22)			4.650	3.537	AO	2,454	3,488	12/17/2020	10/15/2044
278865-AM-2	ECOLAB INC SENIOR CORP BND			1	2.A FE		144.0020		204.000	277,916		(448)			5.500	3.113		717	3,366	12/17/2020	12/08/2041
28336L-BH-1	EL PASO LLC EL PASO CORPORATION				2.B FE	1,770,290			1,400,000	1,766,021		(2,811)			7.420	5.023		39,244	31,164	12/17/2020	02/15/2037
28370T-AF-6	EL PASO PIPELINE PARTNERS OPER SENIOR CO			1	2.B FE		114.4610	1,030,149	900,000	971,640		134			4.700	4. 122		7,050	12,690	12/17/2020	11/01/2042
29365T-AK-0	ENTERGY TX SECURED CORP BND	1		2	2.A FE	2,495,248		2,505,825	2,500,000	2,495,315		67			1.750	1.770		10,938		12/17/2020	03/15/2031
313747-AV-9	FEDERAL REALTY INVESTMENT TRUS SENIOR CO	1		1	1.G FE		117.8350	76,593	65,000	73,044		(26)			4.500	3.699		244	878	12/17/2020	12/01/2044
31428X-BE-5	FEDEX CORP SENIOR CORP BND			. 1	2.B FE	1,203,539	130 . 1420	1,301,420	1,000,000	1,203,424		( 154)		ļ	4.750	3.472	MN	6,069	14,250	12/17/2020	11/15/2045
316773-CH-1	FIFTH THIRD BANCORP CORP BND				2.B FE	1,594,708	169.3060	1,693,060	1,000,000	1,587,261		(4,850)			8.250	3.601	MS	27,500	24,750	12/17/2020	03/01/2038
33616C-AB-6	FIRST REPUBLIC BANK SUB CORP BND			2	2.A FE	1, 126, 854		1,234,116	975,000	1 , 127 , 100		79			4.375	3.414		17,773	12,797	12/17/2020	08/01/2046
33616C-AC-4	FIRST REPUBLIC BANK SUB CORP BND			2	2.A FE		131.9950	461,983	350,000	417,055		(60)			4.625	3.464		6,205	4,856	12/17/2020	02/13/2047
337738-AR-9	FISERV INC SENIORCORPBND			. 1	2.B FE		119. 2300	655,765	550,000	619,628		(110)			4.200	2.304		5,775	6,930	12/17/2020	10/01/2028
36962G-4B-7	GENERAL ELECTRIC CO CORP BND MTN	- ‡			2.B FE		147 . 2080	298,832	203,000	276,349		(396)			6.875	4.006		6,629	4, 187	12/17/2020	01/10/2039
375558-BA-0	GILEAD SCIENCES INC SENIOR CORP BND	-+		1	2.A FE	1, 180, 321		1,274,470	1,000,000	1, 180, 158		(183)			4.500	3.362		18,750	13,500	12/17/2020	02/01/2045
440452-AF-7	HORMEL FOODS CORP SENIOR CORP BND	-+		. 2	1.F FE	3,861,699		3,878,400	3,750,000	3,859,960		(1,739)			1.800	1.458		3,750	10,125	12/17/2020	06/11/2030
460146-CQ-4 46625H-HF-0	INTERNATIONAL PAPER CO SENIOR CORP BND	-+			2.B FE	1, 178, 100	154.8490	1,308,310	1,000,000 500.000	1, 178, 610 736. 395		(1.987)			4 . 400	3.323	MN	16,622 4.089	13,200 9.600	12/17/2020	08/15/2047
46625H-LL-2	JPMORGAN CHASE & CO CORP BND				1.G FE	2.761.813		2,975,112	2,100,000	2,758,624		(1,987)			4.950	3.084		8,663	31, 185	12/17/2020	06/01/2045
478045-AA-5	JOHN SEVIER COMBINED CYCLE GEN COPR BND			1	1.0 FE	3, 149, 156		3,308,637	2,613,561	3,140,509		(6,529)			4.930	2.738		55,750	47, 173	12/17/2020	01/15/2042
487836-BQ-0	KELLOGG COMPANY SENIOR CORP BND			1	2.B FE	1, 188, 953		1,285,650	1,000,000	1,189,238		90			4.500	3.343		11,250	13,500	12/17/2020	04/01/2046
49327V-2B-9	KEYBANK NATIONAL ASSOCIATION SUB CORP BN			2	2.A FE	4, 137, 505		4,268,506	3,680,000	4,131,300		(6.205)			3.900	2.246		31,096	21,528	12/17/2020	04/13/2029
49446R-AM-1	KIMCO REALTY CORPORATION SENIOR CORP BND	1	1	1	2.A FE		113. 1250		500,000			141			4.250	3.896		5,313	6,375	12/17/2020	04/01/2045
50540R-AS-1	LABORATORY CORP OF AMER HLDGS LABORATORY			1	2.B FE	1,077,457		1, 181, 340	900,000	1,077,500		(59)			4.700	3.435		17,625	12,690	12/17/2020	02/01/2045
575634-AT-7	MASSACHUSETTS ELECTRIC COMPANY SENIOR CO			. 1	1.G FE	1,248,650	121.0690	1,331,759	1,100,000	1,248,981		130			4.004	3. 191	FA	16,639	13,213	12/17/2020	08/15/2046
58013M-FA-7	MCDONALDS CORPORATION SENIOR CORP BND			. 1	2.A FE		135.8640	1,120,878	825,000	1,039,057		(604)			4.875	3.296		2,458	12,066	12/17/2020	12/09/2045
59022C-AJ-2	BANK OF AMERICA CORP CORP BND			. 1	2.A FE		145.6530	509,786	350,000	479,888		(996)			6.110	3. 123	JJ	9,029	6,416	12/17/2020	01/29/2037
594457-BT-9	DTE GAS CO CORP BND	-+		. 1	1.F FE		135.8380		280,000			(419)			5.700		MS	4,699	4,788	12/17/2020	03/15/2033
61747Y-DY-8	MORGAN STANLEY SENIOR CORP BND			.   1	2.A FE	1,226,648			1,000,000	1,226,206		(371)			4.300	2.949		18,394	12,900	12/17/2020	01/27/2045
63946B-AG-5	NBCUNIVERSAL MEDIA LLC SENIOR CORP BND			. 1	1.G FE	1,429,589			1,000,000	1,425,832		(2,482)			5.950	3.078		14,875	17,850	12/17/2020	04/01/2041
655844-AF-5	NORFOLK SOUTHERN CORPORATION SENIOR CORP		1		2.A FE		148.6670		490,000	700,373		(2, 181)			7.050	3.551		5,758	10,364	12/17/2020	05/01/2037
665772-CA-5 666807-BN-1	NORTHERN STATES POWER COMPANY CORP BND			¦	1.F FE 2.B FE	2,522,990	136.8530	2,668,634	1,950,000 550,000	2,516,725 587,894		(4,242)			5.250	2.772		47,206 8,242	30,713	12/17/2020	07/15/2035
70450Y-AH-6	NORTHROP GRUMMAN CORP SENIOR CORP BND		1	2	2.B FE 2.A FE	1,597,226		1,606,230	1,500,000	1,595,993		(1,232)			2.300	1.548		2,875	5,363 5,549	12/17/2020	01/15/2028
718172-AC-3	PHILIP MORRIS INTERNATIONAL IN CORP BND			T	1.F FE	1,433,792		1,525,750	1,000,000	1, 428, 956		(1,232)			6.375	3.124	MN	7,969	19,125	12/17/2020	05/16/2038
73102Q-AA-4	POLAR TANKERS INC SENIOR CORP BND 144A		1	1	1.G FE	1,464,745		1,323,730	1,200,000	1,426,930		(5, 176)			5.951		MN		21,424	12/17/2020	05/10/2037
74340X-BR-1	PROLOGIS LP SENIOR CORP BND	1		2	1.G FE	2,451,250		2,475,575	2,500,000	2,451,715		465			1.250	1.462		11.372		12/17/2020	10/15/2030
760759-AK-6	REPUBLIC SERVICES INC CORP BND	T		1	2.B FE	2,100,000			1,500,000	2,091,847		(3,651)			6.200	3.362		31,000	27,900	12/17/2020	03/01/2040
761713-BB-1	REYNOLDS AMERICAN INC SENIOR CORP BND			1	2.B FE		127 . 8750	1,023,000	800,000	954,992		(241)			5.850	4.503		17,680	14,040	12/17/2020	08/15/2045
776743-AL-0	ROPER TECHNOLOGIES INC SENIOR CORP BND			2	2.B FE	3,734,426	99.6150	3,735,563	3,750,000	3,734,298		(128)			1.750	1.795	FA	21,875		12/17/2020	02/15/2031
842400-EV-1	SOUTHERN CALIFORNIA EDISON CO. SOUTHERN			. 1	2.A FE	1,290,664		1,378,610	1,000,000	1,287,481		(2, 152)			5.750	3.189		14,375	17,250	12/17/2020	04/01/2035
842400-FH-1	SOUTHERN CALIFORNIA EDISON CO. CORP BND			. 1	2.A FE		135.8580	3, 124, 734	2,300,000	3,055,242		(6, 122)			5.950	3.398	FA	57,021	20,528	12/17/2020	02/01/2038
84756N-AE-9	SPECTRA ENERGY PARTNERS LP SENIOR CORP B			. [1	2.A FE		129.2940	2,779,821	2,150,000	2,663,895		(3, 142)			5.950	4.270	MS	34, 113	38,378	12/17/2020	09/25/2043
855244-AT-6	STARBUCKS CORPORATION SENIOR CORP BND			. []	2.A FE		116.3700	4,003,128	3,440,000	3,908,876		(8, 131)			3.550	1.786	FA	46,134	18,318	12/17/2020	08/15/2029
863667-AJ-0	STRYKER CORPORATION SENIOR CORP BND			. [1	2.A FE		134.3820	268,764	200,000	212,622		(286)			4.625	4.212	MS	2,724	9,250	05/01/2019	03/15/2046
871829-AY-3 871829-BD-8	SYSCO CORPORATION SENIOR CORP BND	+		· [ ]	2.C FE	2,080,773		2,217,285	1,750,000	2,079,267		(1,037)			4.850	3.661	AU	21,219	25,463	12/17/2020	10/01/2045
91324P-DF-6	SYSCO CORPORATION SENIOR CORP BND	+	1		2.C FE	1,366,918		1,458,012	1,200,000	1,366,641		(234)			4.500	3.632		13,500	16,200	12/17/2020	04/01/2046
91324P-DF-6 91324P-DK-5	UNITEDHEALTH GROUP INC SENIORCORPBND	†	1	\\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	1.G FE 1.G FE	1,432,040	124. 1610		1,250,000	1,432,494		(257)			3.750	1.942		9,896 856	14,063 5,775	12/17/2020	10/15/2047
92343V-CK-8	VERIZON COMMUNICATIONS INC SENIOR CORP B			1	2.A FE		135.1440		400.000	510.718		(326)			4.862	3.241		7,023	5,834	12/17/2020	08/21/2046
927804-FW-9	VIRGINIA ELECTRIC AND POWER CO SENIOR CO		1	Ti	2.A FE	1,848,590		1,981,150	1,564,000	1,848,533		(154)			4.000	2.948		7,994	18,768	12/17/2020	11/15/2046
94973V-BB-2	ANTHEM INC SENIOR CORP BND	.I	1	1	2.B FE	1,805,859			1,550,000	1.808.770		927			4.650	3.484		33,235	21,623	12/17/2020	01/15/2043
94974B-GQ-7	WELLS FARGO & COMPANY SUB CORP BND				2.B FE	2,237,531			1,800,000	2.235.886		(1, 160)			4.900	3.424		10.780	26,460	12/17/2020	11/17/2045

## **SCHEDULE D - PART 1**

Showing All Long-Term BONDS Owned December 31 of Current Year

	_				1 -			Showing All Lon							1					_	
1	2	<u> </u>	Coc		6	7		Fair Value	10	11			justed Carryin		4.0			nterest			ites
		3	4	5		1	8	9			12	13	14	15	16	17	18	19	20	21	22
					NAIC																
					Desig-	•															
					nation	1								T. ( . )							
					NAIC									Total							
			_		Desig-	•							0	Foreign							
			F		nation	_							Current	Exchange							
			0		Modifie	r	D-4-					0	Year's	Change							
			ı		and SVO		Rate			Dools!	Lincolizad	Current	Other-	in Dook/				A donitto d			Ctatad
		С	e		Admini		Used to Obtain			Book/	Unrealized	Year's	Than-	Book/		⊏ffo.otivo		Admitted Amount	A marint		Stated
CUSIP		0	'	Bond	strative		Fair	Fair	Par	Adjusted Carrying	Valuation Increase/	(Amor- tization)	Temporary Impairment	Adjusted Carrying	Data	Effective Rate	When	Due and	Amount Received		Contractual Maturity
Identification	Description	e	g	Char	Symbo		Value	Value	Value	Value	(Decrease)	Accretion		Value	Rate of	of	Paid	Accrued	During Year	Acquired	Date
957576-AA-9	WESTERN & SOUTHERN FINC INC WESTERN & SO		"	1	1.F FE		4134.4950	282,440	210,000	259, 194	(Decrease)	(175)		value	5.750	3.379		5,568	3,623	12/17/2020	07/15/2033
98419M-AK-6	XYLEM INC INDIANA SENIOR CORP BND	1	1	1	2.B FE		6122.3220	2,538,182	2,075,000	2,359,257		(236)			4.375	3.537		15,130	27,234	12/17/2020	11/01/2046
136055-AA-8	CANADIAN IMPERIAL BANK BD 144A		. A	. 1	1.C FE		7 124. 0510	2,340,132	1,886,427	2,227,362		(12,258)			7.262	3.609	AO	30,823	83,304	12/17/2020	04/10/2032
05523R-AC-1	BAE SYSTEMS PLC SENIOR CORP BND 144A		. D	. 1	2.B FE		0143.7050	431, 115	300,000	347,885		(1,354)			5.800	4.599		3,867	17,400	05/01/2019	10/11/2041
05971K-AC-3	BANCO SANTANDER SA CORP BND		. D		1.F FE			1,350,444	1,200,000	1,267,902		(2,730)			3.306	2.555		441	35,705	12/17/2020	06/27/2029
21685W-CJ-4 35177P-AX-5	COOPERATIEVE RABOBANK UA CORP BND MTN ORANGE SA SENIOR CORP BND	+	. D	1	1.D FE		1147.4480 5141.8460	442,344	300,000	360,056		(1,915)			5.250 5.375	3.827		1,619	15,750	05/01/2019 12/17/2020	05/24/2041
36164Q-NA-2	GE CAPITAL INTERNATIONAL FUNDI SENIOR CO	1	D	li	2.A FE		1119.3550	861.743		796.997		553			4.418	3.737		4.076	9,569	12/17/2020	11/15/2035
404280-AF-6	HSBC HOLDINGS PLC CORP BND		D		1.G FE		6145.9720	437,916	300,000	387,846		(5,863)			7.625	4.337		2,796	22,875	05/01/2019	05/17/2032
404280-AQ-2	HSBC HOLDINGS PLC SUB CORP BND		. D		1.G FE		0139.2530	661,452	475,000	609,746		(483)			5.250	3.442		7,412	7,481	12/17/2020	03/14/2044
50247V-AC-3	LYB INTERNATIONAL FINANCE BV SENIOR CORP		. D		2.C FE	292,03		314,545	250,000	292,013		(33)			4.875	3.744		3,589	3,656	12/17/2020	03/15/2044
685218-AB-5 853254-AN-0	ORANGE SA SENIOR CORP BND		. D	. 1	2.A FE		7145.8960 2134.1340	218,844 1,643,139	150,000 1,225,000	174,955		(640)			5.500 5.700	4.338		3,323	8,250 20,948	05/01/2019	02/06/2044
	ototal - Bonds - Industrial and Miscellane	oue /I	Inoffil	iatod) I		,1,350,20	2104. 1040	1,040,100	1,223,000	1,340,733		(1,023)			3.700	9.302	WO	10,420	20,340	12/ 1// 2020	03/20/2044
	ligations	ous (t	Ullallii	ialeu) - i	SSUCI	125,636,98	6 XXX	132,877,090	105,044,988	125,384,343		(142,337)			XXX	XXX	XXX	1,272,322	1,441,741	xxx	xxx
	GSAA 06-10 SENIORABS06-10		T	I <sub>4</sub>	1.D FM	1,277,42			3, 194, 639	1, 197, 717		(142,337)			5.985	5.913		1,272,322	34,433	05/01/2020	06/25/2036
	ototal - Bonds - Industrial and Miscellaneo	nus (1	Inaffil	iated) -	. j I . D I III		040.0100	1,201,323		, 1, 107 , 7 17		(13,711)			0.000		more	10,002		03/01/2020	00/23/2000
	sidential Mortgage-Backed Securities	ous (t	Onam	iatou)		1,277,42	8 XXX	1,287,929	3.194.639	1.197.717		(79.711)			XXX	XXX	XXX	15.932	34.433	XXX	XXX
	BB-UBS TRUST BBUBS_12-SHOW SUB CMBS_012		1	4	1.A FM	1,277,42		1,332,795	1,425,000	1, 302, 252		14,955			4.026	6.722		4,781	33,944	05/01/2020	11/07/2036
	BWAY 13-1515 CMBS 13-1515 D 144A	1		4	1.D FM		9104.6870		1,200,000	1,126,746		10,177			3.633	5.326		3,633	25,432	05/01/2020	03/10/2033
3499999. Sul	ototal - Bonds - Industrial and Miscellane	ous (l	Unaffil	iated) -	•		İ														
Co	mmercial Mortgage-Backed Securities	,		,		2.403.86	5 XXX	2.589.036	2,625,000	2.428.998		25.132			XXX	XXX	XXX	8.414	59.376	XXX	XXX
00432C-BJ-9	ACCSS_04-A4 ABS04-A4			4	1.A FE		793.0620	1,161,411	1,248,000	1,171,025		33,218			1.644	6.265		1,743	15,310	05/01/2020	07/01/2039
429827-AS-7	HEF_04-1 ABS 04-1 B2 144A			4	1.C FE	969,59		986,245	1, 128,000	982,028		12,435			1.310	3.388		41	11,653	05/01/2020	01/01/2044
46602A-AL-6	IVY HILL MIDDLE MARKET CREDIT ABS7A	· <del> </del> · · · · ·	. D	4	1.0 FE			1,412,148	1,431,000	1,325,625		33,633			2.168	6.531		6,292	19,285	05/01/2020	10/20/2029
	MADISON PARK FUNDING LTD MDPK_ ABS 2015		. D. off:	[4	1.0 FE		2100.0890	1,141,016	1,140,000	1,140,029		(11)			3.790	3.806	JAJU	8,401	21,603	05/01/2020	07/21/2030
	btotal - Bonds - Industrial and Miscellaned an-Backed and Structured Securities	บนร์ (โ	onamil	ialed) - (	Julet	4 500 40	6 XXX	4 700 000	4 047 000	4 040 707		70.075	1		xxx	xxx	XXX	40 433	07.054	XXX	XXX
		otod\	Dand			4,539,43		4,700,820	4,947,000	4,618,707		79,275						16,477	67,851		
	al - Industrial and Miscellaneous (Unaffilia	ated)	Roug	S		133,85/,/1	5 XXX	141,454,875	115,811,627	133,629,765		(117,641)	1		XXX	XXX	XXX	1,313,145	1,603,401	XXX	XXX
	al - Hybrid Securities					+	XXX					<del>                                     </del>			XXX	XXX	XXX	1		XXX	XXX
	al - Parent, Subsidiaries and Affiliates Bo	onds					XXX						1		XXX	XXX	XXX	ļ		XXX	XXX
	ototal - SVO Identified Funds						XXX						1		XXX	XXX	XXX			XXX	XXX
	ototal - Unaffiliated Bank Loans						XXX						1		XXX	XXX	XXX			XXX	XXX
	al - Issuer Obligations					145,044,51		153, 139, 253	118,909,988	144,724,791		(187,982)	_		XXX	XXX	XXX	1,524,371	1,684,257	XXX	XXX
	. Total - Residential Mortgage-Backed Securities					1,277,42		1,287,929	3,194,639	1, 197, 717		(79,711)			XXX	XXX	XXX	15,932	34,433	XXX	XXX
	Total - Commercial Mortgage-Backed Securities					2,403,86		2,589,036	2,625,000	2,428,998		25, 132			XXX	XXX	XXX	8,414	59,376	XXX	XXX
	al - Other Loan-Backed and Structured S	<u>Securi</u>	ities			4,539,43	6 XXX	4,700,820	4,947,000	4,618,707		79,275			XXX	XXX	XXX	16,477	67,851	XXX	XXX
8099999. Tot	al - SVO Identified Funds						XXX								XXX	XXX	XXX			XXX	XXX
8199999. Tot	al - Affiliated Bank Loans						XXX		_						XXX	XXX	XXX			XXX	XXX
8299999. Tot	al - Unaffiliated Bank Loans						XXX								XXX	XXX	XXX			XXX	XXX
8399999 - To	tal Bonds					153,265.24	3 XXX	161,717,038	129,676,627	152,970,213		(163,286)			XXX	XXX	XXX	1,565,194	1,845,917	XXX	XXX

# 

1A\$2,473,277	1B\$4,954,462	1C\$12,217,199	1D\$	1E\$4,587,467	1F\$12,169,575	1G\$21,
2A\$42,587,934	2B\$38,429,971	2C\$6,711,582				
3A\$	3B\$	3C\$				
4A\$	4B\$	4C\$				
5A\$	5B\$	5C\$				
6\$						

# Schedule D - Part 2 - Section 1 - Preferred Stocks Owned NONE

Schedule D - Part 2 - Section 2 - Common Stocks Owned  $\ensuremath{\textbf{N}}$   $\ensuremath{\textbf{O}}$   $\ensuremath{\textbf{N}}$   $\ensuremath{\textbf{E}}$ 

# **SCHEDULE D - PART 3**

		Snov	wing Ali Lo	ng-Term Bonds and Stocks ACQUIRED During Current Yea	ſ			
1	2	3	4	5	6	7	8	9
								Paid for Accrued
CUSIP	<b>D</b>		Date		Number of Shares		5 1/1	Interest and
Identification	Description	Foreign	Acquired	Name of Vendor	of Stock	Actual Cost	Par Value	Dividends
	ELECTRICITE DE FRANCE SA SENIOR CORP BND	D	12/17/2020	Accordia		969,915	770,000	
	tal - Bonds - All Other Governments CALIFORNIA STATE OF MUNI BND GO		40 (47 (0000	Ta e		969,915	770,000	15,224
			12/17/2020	Accordia		1,781,983	980,000	9,724
	tal - Bonds - U.S. States, Territories and Possessions  Los ANGELES CALIF CINITY COLLEG MUNI BND	1	12/17/2020	Accordia		1,781,983 727,751	980,000 441,000	9,724 11,076
	LOS ANGELES CALIF CHINTY COLLEG HONT BND		12/17/2020	Accordia		1,363,664		19,600
	otal - Bonds - U.S. Political Subdivisions of States, Territories and Possessions			TOVOI GIU		2,091,415	1,204,000	30,676
	AMERICAN MUN POWER-CHIO INC AMERICAN MUN		12/17/2020	Accordia		287,505		4,053
072024-NV-0	BAY AREA TOLL AUTHORITY MUNITAX BND REV		12/17/2020	Accordia		890,737	490,000	7,381
	BAY AREA TOLL AUTHORITY MUNITAX BND REV		12/17/2020	Accordia		784,809	427,000	6,308
	DALLAS FORT WORTH TEX INTL ARP MUNITAX		12/17/2020	Accordia		541,239	507,500	2,083
	MARYLAND ST TRANSN AUTH MARYLAND ST TRAN		12/17/2020	Accordia Accordia				13,384
	NEW YORK CITY MUN WATER FINANC MUNI BND		12/17/2020	Accordia		613,394	392,000	
73358W-3L-6	PORT AUTH NY & NJ MUNITAX BND		12/17/2020	Accordia		1,119,563	1,050,000	13, 134
	PORT AUTH NY & NJ MUNITAX BND REV		12/17/2020	Accordia		1,342,360	969,500	8, 161
	UNIVERSITY CALIF REGTS MED CTR MUNI BND WASHINGTON ST CONV CENTER PUBL MUNITAX B		12/17/2020	Accordia				1, 183 44,097
			12/11/2020	Accordia		9.311.017		
	otal - Bonds - U.S. Special Revenues  AT&T INC SENIOR CORP BND 144A		12/17/2020	Accordia		735,147	6,751,500 723,100	100,324 6,598
	AT&T INC SENTOR CORP BND 144A		09/18/2020	Tax Free Exchange		244, 162		
	ACCSS 04-A4 ABS 04-A4		05/01/2020	Accordia		1,137,807	1,248,000	
	AETNA INC SENIOR CORP BND		12/17/2020	Accordia		819,889	700,000	9,268
	ALBEMARLE CORP SENIOR CORP BND		12/17/2020	Accordia		1,082,800	910,000	2,342
	ALTRIA GROUP INC SENIOR CORP BND		12/17/2020	Accordia		875,977	840,000	8,318
	AMAZON.COM INC SENIOR CORP BND  AMERICAN EXPRESS COMPANY SENIOR CORP BND		12/17/2020	Accordia Accordia		1,011,178 548,200		1,251 618
	AMBEN INC SENIOR CORP BND		12/17/2020	Accordia		930.734	700,000	7,411
	AMGEN INC SENIOR CORP BND		12/17/2020	Accordia		1,089,069	875,000	5,026
	ANHEUSER-BUSCH COMPANIES LLC CORP BND		12/17/2020	Accordia		1,611,187	1,260,000	23,496
	ANHEUSER-BUSCH INBEV WORLDWIDE SENIOR CO		12/17/2020	Accordia		677,969	525,000	11,045
	APPLE INC SENIOR CORP BND		12/17/2020	Accordia		990,101	700,000 450,000	10,398 1,925
	APPLIED MATERIALS INC SENIOR CORP BND		12/17/2020	RBC DOMINION SECURITIES INC. Accordia			1,050,000	
	BAE SYSTEMS HOLDINGS INC SENIOR CORP BND		12/17/2020	Accordia		231,219		1,639
	BB-UBS TRUST BBUBS_12-SHOW SUB CMBS_012-		05/01/2020	Accordia		1,287,296	1,425,000	478
	BWAY_13-1515 CMBS_13-1515 D 144A		05/01/2020	Accordia		1,116,569	1,200,000	3,633
	BANK OF AMERICA CORP SENIOR CORP BND MTN		12/17/2020	Accordia		475,960	367,500	6,713
	BANK OF AMERICA CORP SENIOR CORP BND MT		12/17/2020	Accordia Accordia		1,120,274 878,178	910,000 669,200	14,463
	BRISTOL-MYERS SQUIBB CO SENIOR CORP BND		12/17/2020	Accordia		498,680	350,000	5,979
110122-DJ-4	BRISTOL-MYERS SQUIBB CO SENIOR CORP BND		07/17/2020	Tax Free Exchange		161,521	150,000	3,167
124857-AN-3	CBS CORP SENIOR CORP BND		12/17/2020	Accordia		822,591	700,000	13,685
	CMS ENERGY CORPORATION SENIOR CORP BND		12/17/2020	Accordia		1,756,552	1,400,000	14,257
	CPH AMERICA INC SENIOR CORP BND 144A  CITIGROUP INC - LT GTD SUB CORP BND		12/17/2020	Accordia Accordia		700,780	542,500 1,085,000	2,317 6,709
	CLECO POWER LLC CORP BND		12/17/2020	Accordia		2,029,603	1,469,300	4,510
	CONCAST CORPORATION CORP BND		12/17/2020	Accordia		3,620,822	2,400,000	
207597-DV-4	CONNECTICUT LIGHT AND POWER CO CONNECTIC		12/17/2020	Accordia		1,029,735	700,000	2,099
	WALT DISNEY CO SENIOR CORP BND		12/17/2020	Accordia		1,034,383	700,000	11,845
	DUKE ENERGY CAROLINAS LLC SECURED CORP B		12/17/2020	Accordia				8,925 1,424
	EASTMAN CHEMICAL COMPANY SENTOR CORP BND		12/17/2020	Accordia Accordia		218,887	1/5,000	1,424
	EL PASO LLC EL PASO CORPORATION		12/17/2020	Accordia		1,281,007	980,000	
28370T-AF-6	EL PASO PIPELINE PARTNERS OPER SENIOR CO		12/17/2020	Accordia		710,552	630,000	3,866
	ENTERGY TX SECURED CORP BND		09/28/2020	BA SECURITIES		747,225	750,000	
	ENTERGY TX SECURED CORP BND		12/17/2020	Accordia		1,748,023	1,750,000	6,550
	FEDEX CORP SENIOR CORP BND.		12/17/2020	Accordia Accordia		52,796 	45,500	
	FIFTH THIRD BANCORP CORP BND		12/17/2020	Accordia		1, 174, 852	700,000	3,048
	FIRST REPUBLIC BANK SUB CORP BND		12/17/2020	Accordia		846,259		11,363
33616C-AC-4	FIRST REPUBLIC BANK SUB CORP BND		12/17/2020	Accordia		312, 157	245,000	3,934
	FISERV INC SENIORCORPBND		12/17/2020	Accordia		456,972	385,000	3,459
362375-AC-1	GSAA_06-10 SENIORABS06-10		05/01/2020	Accordia		1,277,428	3, 194, 639	531

# **SCHEDULE D - PART 3**

Showing All Long-Term Bonds and Stocks ACQUIRED During Current Year

Page   Page	1	2	3	owing All Loi	ng-Term Bonds and Stocks ACQUIRED During Current Year	6	7	8	9
Cube   Part	1	2	3	4	5	0	1	0	-
Interfacion   Company	CLISIP			Date		Number of Shares			
Separate   Separate		Description	Foreign		Name of Vendor		Actual Cost	Par Value	
Secretary   Secr						O. Otoon			4,288
March   Marc					Accordia				11,988
March   Marc									
March   Marc									
Separate   Separate   Separate   1970   Separa									
March									
Control   Cont									3,436
Section   Sect									31,335
Second   S					Accordia				6,738
Second   S									20,292
\$1,000   \$									
Stock-1-1-1									
Second   S									
Septiment   Time   Septiment									.5,780
Second   S	594457-BT-9								2,886
Seath of the Control of the Contro									11,789
### STATES   SPECIAL PRICE CORPE OF THE CORP									8,908
### Septiment   Se									
Non-Part   Mark   Facility (Ching in Spring or Both   Mark   Ma									
No.   1941   1									
1407-250   7407-250									
1982   1982									3,967
Fability   Fability		POLAR TANKERS INC SENIOR CORP BND 144A		12/17/2020			1,043,624		5,277
Part   Sept   Company   Sept   Sept   Company   Sept   S									1,094
Part   Sept									
1,11,176   1,15,000									
Page   Company									11, 193
SACHO-P-1   SURFINE (LI FORNI E DISTO O) SUFFREN   1971 00   197									13 654
\$2,000   \$									8,609
SCAPALIT-6   STARBUS COMPRATION SHUR OFF BID   12/17/200   12/17				12/17/2020	Accordia			2,300,000	46,719
\$\frac{8}{2}\frac{8}{2}\frac{1}\frac{1}{2}\frac{1}{2}\frac{1}{2}\frac{1}{2}\frac{1}{2}\frac{1}{2}\frac{1}{2}\frac{1}{2}\frac{1}{2}\frac{1}{2}\frac{1}{2}\frac{1}{2}\frac{1}{2}\frac{1}{2}\frac{1}{2}\frac{1}{2}\frac{1}{2}\frac{1}\frac{1}{2}\frac{1}{2}\frac{1}{2}\frac{1}{2}\frac{1}{2}\frac									20,646
\$\frac{876}{128} = \$\text{\$\tex									
100   100									
1928 -8-5   WITERALTH FORD IN CSPIROCOPPRIO   1,777/200   4,000   1,712/200   4,000   4,000   4,									
\$2939-0-8   \$12177200   \$0.6cordia   \$379.78   \$28,000   \$4.9cordia   \$379.78   \$28,000   \$4.9cordia   \$379.78   \$28,000   \$4.9cordia   \$38.137   \$1.98,000   \$4.9cordia   \$1.386.137   \$1.98,000   \$4.9cordia   \$1.386.137   \$1.98,000   \$2.7cordia   \$1.9cordia   \$1.									
MPRINE NO SQUIP OR BID   MATERIA NO SQUIP OR BID   1,12/17/200   Accordia   1,001,397   1,005,000   5,214,494,496-69-79   1,12/17/200   Accordia   1,105,000   5,217,9576-49-9   1,12/17/200   1,12/17/200   Accordia   1,12/17/200   Accordia   1,12/17/200   1,12/17/200   Accordia   1,12/17/200   1,12/17/200   Accordia   1,12/17/200   1,12/17/200   1,12/17/200   Accordia   1,12/17/200   1,12/17/200   Accordia   1,12/17/200   1,12/17/200   Accordia									4,424
\$40748-0-7   \$11.5 FARO \$ COMPANY \$18 COMP BIO \$ 1.200 0									4,014
## ## ## ## ## ## ## ## ## ## ## ## ##									21,442
Section   Sect									
18055-AL-8   CAMUNAN IMPERIAL BANK 80 144A   A   12/17/2002   Accordia   918, 147   7.39, 00   1.0, 147   7.30									
1,271,7202			Δ						
12-17-12-20   12-17-20   12-17-			n						
Section   Sect			D						6,244
46024-AL-6	36164Q-NA-2		D				597,267		2,047
VB INTERNATIONAL FINANCE BY SENIOR CORP   D.   12/17/2020   Accordia   2.77,537   1.75,000   2.204   2.504   2.505	404280-AQ-2	HSBC HOLDINGS PLC SUB CORP BND	D	12/17/2020	Accordia		452,526		4,558
Section			D						1,349
STANDARD CHARTERED PLC SUB CORP BND 144A   D.   12/17/202   Accord is   11/133   3899999. Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)   16/19/69/73   91/070, 168   799/080   8399997. Total - Bonds - Part 3   12/17/202   13/19/19/99999. Total - Bonds - Part 5   12/19/99/999999999999999999999999999999			D						
3899999. Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)       106,996,473       91,070,168       799,080         8399997. Total - Bonds - Part 3       121,150,803       100,775,668       955,028         8399998. Total - Bonds - Part 5       64,799,929       70,427,104       358,110         8399999. Total - Bonds       185,950,732       171,202,772       1,313,138         8999997. Total - Preferred Stocks - Part 3       XXX       8999999. Total - Preferred Stocks - Part 5       XXX         8999999. Total - Preferred Stocks - Part 5       XXX       XXX       8999999. Total - Preferred Stocks			D						
8399997. Total - Bonds - Part 3       101,150,803       100,775,668       955,026         8399998. Total - Bonds - Part 5       64,799,929       70,427,104       358,110         8399999. Total - Bonds       185,950,732       171,202,772       1,313,138         8999997. Total - Preferred Stocks - Part 3       XXX         8999998. Total - Preferred Stocks - Part 5       XXX         8999999. Total - Preferred Stocks       XXX			υ	12/11/2020	Novol ula .				
8399998. Total - Bonds - Part 5       64,799,929       70,427,104       359,110         8399999. Total - Bonds       185,950,732       171,202,772       1,313,138         8999997. Total - Preferred Stocks - Part 3       XXX         8999998. Total - Preferred Stocks - Part 5       XXX         8999999. Total - Preferred Stocks       XXX         8999999. Total - Preferred Stocks       XXX									·
839999. Total - Bonds       185,950,732       171,202,772       1,313,138         8999997. Total - Preferred Stocks - Part 3       XXX         8999998. Total - Preferred Stocks - Part 5       XXX         8999999. Total - Preferred Stocks       XXX         8999999. Total - Preferred Stocks       XXX							, . , .	7 - 7	,
8999997. Total - Preferred Stocks - Part 3       XXX         8999998. Total - Preferred Stocks - Part 5       XXX         8999999. Total - Preferred Stocks       XXX									,
8999998. Total - Preferred Stocks - Part 5         XXX           8999999. Total - Preferred Stocks         XXX							185,950,732		1,313,138
899999. Total - Preferred Stocks XXX									
9799997. Total - Common Stocks - Part 3 XXX	8999999. Total	- Preferred Stocks						XXX	
	9799997. Total	- Common Stocks - Part 3						XXX	

# **SCHEDULE D - PART 3**

Showing All Long-Term Bonds and Stocks ACQUIRED During Current Year

		Onc	, willig , till Eoi	ig-renn bonds and otocks Aodon Leb buning ouncil real				
1	2	3	4	5	6	7	8	9
CUSIP			Date		Number of Shares			Paid for Accrued Interest and
Identification	Description	Foreign	Acquired	Name of Vendor	of Stock	Actual Cost	Par Value	Dividends
9799998. Total	- Common Stocks - Part 5						XXX	
9799999. Total	- Common Stocks						XXX	
9899999. Total	- Preferred and Common Stocks						XXX	
9999999 - Total	ls					185,950,732	XXX	1,313,138

# **SCHEDULE D - PART 4**

					Showing All L	ong-Term B	onds and Sto	cks SOLD, F	REDEEMED	or Otherwis	se DISPOS	ED OF Duri	ing Current `	Year						
1	2	3	4	5	6	7	8	9	10				Carrying Value		16	17	18	19	20	21
										11	12	13	14	15						
														Total						
												Current	Total	Foreign					Bond	
												Year's	Change in	Exchange	Book/				Interest/	
									Prior Year		Current	Other-	Book/	Change in	Adjusted	Foreign			Stock	Stated
									Book/	Unrealized	Year's	Than-	Adjusted	Book/	Carrying	Exchange			Dividends	Con-
CUSIP					Number of				Adjusted	Valuation	(Amor-	Temporary	Carrying	Adjusted	Value at	Gain	Realized	Total Gain	Received	tractual
Identi-		For-		Name	Shares of	Con-			Carrying	Increase/	tization)/	Impairment	Value	Carrying	Disposal		Gain (Loss)	(Loss) on	During	Maturity
fication	Description	eign		of Purchaser	Stock	sideration	Par Value	Actual Cost	Value	Decrease	Accretion	Recognized	(11+12-13)	Value	Date	Disposal	on Disposal	Disposal	Year	Date
268317-AK-0	ELECTRICITE DE FRANCE SA SENIOR CORP BND	. D	10/28/2020	Accordia		949,425	770,000		782,984		(246)		(246)		782,739		166,687	166,687		01/22/2044
	Subtotal - Bonds - All Other Governm	ents	1	T	ı	949,425	770,000	783, 121	782,984		(246)		(246)		782,739		166,687	166,687	47,652	XXX
	CALIFORNIA STATE OF MUNI BND GO		10/28/2020			1,766,293	980,000	1,522,685	1,511,609		(14, 106)		(14, 106)		1,497,504		268,790	268,790		11/01/2040
	Subtotal - Bonds - U.S. States, Territo	ories a				1,766,293	980,000	1,522,685	1,511,609		(14, 106)		(14, 106)		1,497,504		268,790	268,790	74,066	XXX
54438C-NZ-1 54438C-PA-4	LOS ANGELES CALIF CMNTY COLLEG MUNI BND LOS ANGELES CALIF CMNTY COLLEG LOS ANGEL		10/28/2020	Accordia		739,764 1,376,902	441,000 763,000	622,873 1,132,742	619,271 1,128,510		(4,629)		(4,629)		614,642		125, 123	125, 123	36,221 .64,092	08/01/2042
	Subtotal - Bonds - U.S. Political Subd	livisio	_		nesessions	2,116,666	1,204,000	1,755,615	1.747.781		(12.231)		(12,231)		1,735,550		381.117	381.117	100.313	XXX
02765U-CR-3	AMERICAN MUN POWER-OHIO INC AMERICAN MUN		10/28/2020	Accordia		285,829	196,000	203,634	202,894	t	(12,231)	L	(12,231)	L	202,655	t	83,173	83,173		
072024-NV-0	BAY AREA TOLL AUTHORITY MUNITAX BND REV		10/28/2020	Accordia		887,890	490,000	739,552	736,849		(4,862)		(4,862)		731,987		155,903	155,903	37, 195	04/01/2050
072024-PY-2	BAY AREA TOLL AUTHORITY MUNITAX BND REV		10/28/2020	Accordia		779,830	427,000	643,890	641,574		(3,355)		(3,355)		638,219		141,611	141,611	31,787	10/01/2050
235036-4X-5	DALLAS FORT WORTH TEX INTL ARP MUNITAX		10/28/2020	Accordia		512,616	507,500	507,500	507,500	<b> </b>	/E ===>	·	/E EEZ\	·	507,500		5, 116	5,116		11/01/2045
574300-HZ-5 646136-WV-9	MARYLAND ST TRANSN AUTH MARYLAND ST TRAN NEW JERSEY ST TRANSN TR FD AUT MUNI BND		01/28/2020	. Accordia		718,022 1,417,000	490,000	617,885 1,422,654	615,831 1,417,000		(5,557)		(5,557)		610,275		107,747	107,747		07/01/2043
646136-XR-7	NEW JERSEY ST TRANSN TR FD AUT MUNI BND		10/28/2020	Various			633,500	789.987			(3,611)		(3,611)		780,209		23.918	23.918		12/15/2040
64972F-K8-8	NEW YORK CITY MUN WATER FINANC MUNI BND		10/28/2020	Accordia		610,803	392,000	445,798	439,642		(1,175)		(1, 175)		438,467		172,335	172,335		
73358W-3L-6	PORT AUTH NY & NJ MUNITAX BND		10/28/2020	Accordia		1,039,763	1,050,000	1,050,000	1,050,000						1,050,000		(10,238)	(10,238)	41,512	08/01/2069
73358W-XQ-2 913366-DF-4	PORT AUTH NY & NJ MUNITAX BND REV		10/28/2020	Accordia		1,264,693 310,909	969,500	1, 134, 974 229, 457	1, 133, 349		(1,991)		(1,991)		1,131,358		133,336	133,336	48,446	10/15/2065
93976A-AH-5	UNIVERSITY CALIF REGTS MED CTR MUNI BND WASHINGTON ST CONV CENTER PUBL MUNITAX B		10/28/2020	Accordia Various		1,763,608	196,000	1,753,539	225,073		(29,056)		(29,056)		224,385				126, 174	05/15/2049
	Subtotal - Bonds - U.S. Special Rever	nues	.4072072020	. 1411045		10.395.090	8.168.500	9.538.870	9.497.560		(50.533)		(50.533)		9.447.027		948.061	948.061	432.548	XXX
00206R-CU-4	AT&T INC SENIOR CORP BND	liucs	09/18/2020	Tax Free Exchange		890,325	800,000		890,325		(30,300)		(50,500)		890,325		340,001	340,001	,	02/15/2047
00817Y-AZ-1	AETNA INC SENIOR CORP BND		10/28/2020	Accordia		786,702	700,000	590,044	591,314		1,581		1,581		592,895		193,807	193,807	32,701	08/15/2047
012725-AD-9	ALBEMARLE CORP SENIOR CORP BND		10/28/2020	Accordia		1,049,503	910,000	926,890	926,714		(285)		(285)		926,428		123,075	123,075		
02209S-AV-5 023135-AQ-9	ALTRIA GROUP INC SENIOR CORP BND		10/28/2020	Accordia			840,000	698,116 824,362	699,810 822,386		2, 129		2, 129		701,939		166,419	166,419		09/16/2046
025816-BD-0	AMERICAN EXPRESS COMPANY SENIOR CORP BND		10/28/2020	Accordia		550,751			525,044		(2,555)		(2,505)				25,719	25,719		12/05/2044
031162-BE-9	AMGEN INC SENIOR CORP BND		10/28/2020	Accordia		913,668	700,000		731,688		(718)		(718)		730,970		182,698	182,698		10/01/2041
031162-BZ-2	AMGEN INC SENIOR CORP BND		10/28/2020	Accordia		1,087,118	875,000	858,393	858,621		293		293		858,914		228,203	228,203	38,286	05/01/2045
03522A-AJ-9	ANHEUSER-BUSCH COMPANIES LLC CORP BND		10/28/2020	Accordia		1,555,672	1,260,000	1,254,512	1,254,645		66		66		1,254,711		300,961	300,961	83,300	02/01/2046
035240-AG-5 037833-BX-7	ANHEUSER-BUSCH INBEV WORLDWIDE SENIOR CO APPLE INC SENIOR CORP BND		10/28/2020	Accordia		647 , 189 . 969 . 052	525,000	535,028 773,885	534,898 772.843		(215)		(215)		534,683		112,505	112,505		
039483-BC-5	ARCHER DANIELS MIDLAND CO CORP BND		09/23/2020	Call 157.0730		3.298.533	2,100,000	2.615.907	2,606,061		(11,207)		(11,207)		2.594.854		(494,854)	(494,854)		
05523U-AL-4	BAE SYSTEMS HOLDINGS INC SENIOR CORP BND		10/28/2020	Accordia		224,705	175,000	184,028	183,902		(168)		(168)		183,734		40,971	40,971		10/07/2044
06051G-GG-8	BANK OF AMERICA CORP SENIOR CORP BND MTN		10/28/2020	Accordia		478, 121	367,500	408,943	407,329		(714)		(714)		406,616		71,506	71,506		01/20/2048
06051G-HA-0 06849R-AC-6	BANK OF AMERICA CORP SENIOR CORP BND MT		10/28/202010/28/2020	Accordia		1,106,251 1,248,374	910,000 840,000				284		284		891,677		214,573	214,573		01/23/2049
075887-AV-1	BARRICK NORTH AMERICA FINANCE CORP BND BECTON DICKINSON AND COMPANY CORP BND		10/28/2020	Accordia		1,248,374		758,993	757,217		(2,304)		(2,304)				116,801	116,801		09/15/2038 05/15/2039
110122-BU-1	BRISTOL-MYERS SQUIBB CO SENIOR CORP BND		07/17/2020	Tax Free Exchange		538,404	500,000	538,926	538,851		(446)		(446)		538,404				23,056	08/15/2045
124857-AN-3	CBS CORP SENIOR CORP BND		10/28/2020	Accordia		782,698	700,000	673, 134	673,539		461		461		674,000		108,698	108,698	41,502	01/15/2045
125896-BL-3	CMS ENERGY CORPORATION SENIOR CORP BND		10/28/2020	Accordia		1,724,856	1,400,000	1,440,264	1,439,653		(849)		(849)		1,438,804		286,052	286,052	71, 101	03/31/2043
12626P-AN-3 126650-CN-8	CRH AMERICA INC SENIOR CORP BND 144A		10/28/2020	Accordia		675,233 1,350,590	542,500	542,733	542,733 989,452		120		120		542,733		132,500	132,500		05/18/2045 07/20/2045
172967-HS-3	CITIGROUP INC - LT GTD SUB CORP BND		10/28/2020	Accordia		1,455,679	1,000,000	1,211,023	1,209,177		(2,374)		(2,374)		1,206,802		248,877	248,877		05/06/2044
185508-AE-8	CLECO POWER LLC CORP BND		10/28/2020	Accordia		1,938,947	1,469,300	1,751,508	1,743,998		(9,752)		(9,752)		1,734,246		204,701	204,701		12/01/2035
207597-DV-4	CONNECTICUT LIGHT AND POWER CO CONNECTIC		10/28/2020	Accordia		1,009,071	700,000	900,753	895,230		(7,096)		(7,096)		888, 134		120,937	120,937		06/01/2036
209111-FV-0	CONSOLIDATED EDISON CO OF NEW SENIOR COR		08/04/2020	Accordia		1,305,360	1,000,000	999,650	999,661		4		4		999,665		305,695	305,695		
254687-DV-5 26442C-AB-0	WALT DISNEY CO SENIOR CORP BND		10/28/202010/28/2020	. Accordia Various		1,021,279 1,294,997	700,000 .850,000	909,224	908,045		(10,365)		(10,365) (6,062)				123,598	123,598	51,454	03/15/2033
277432-AP-5	EASTMAN CHEMICAL COMPANY SENIOR CORP BND	1	10/28/2020	Accordia		216,711	175,000	1,061,672	1,076,234		45		45		1,070,172		44,168	44, 168		
278865-AM-2	ECOLAB INC SENIOR CORP BND		10/28/2020	Accordia		203,747	142,800	173,081	172,531		(711)		(711)		171,820		31,927	31,927	7,003	12/08/2041
28336L-BH-1	EL PASO LLC EL PASO CORPORATION		10/28/2020	Accordia		1,243,120	980,000	1, 141, 661	1, 138, 259		(4,573)		(4,573)		1, 133, 686		109,434	109,434		02/15/2037
28370T-AF-6 30161N-AV-3	EL PASO PIPELINE PARTNERS OPER SENIOR CO		10/28/2020	Accordia		675,007 . 549.929	630,000 425,000	608,561	608,892		424 (155)		424		609,316		65,692	65,692		11/01/2042
30161N-AV-3 313747-AV-9	EXELON CORPORATION SENIOR CORP BND		10/28/2020	Accordia		549,92952,077	425,000	437,215	437,053		(155)		(155)		436,897		113,032	113,032		04/15/2046 12/01/2044
31428X-BE-5	FEDEX CORP SENIOR CORP BND	1	10/28/2020	Accordia			700,000		693,967		100		100		694,067		190,523	190,523		11/15/2045
316773-CH-1	FIFTH THIRD BANCORP CORP BND	1	10/28/2020	Accordia		1, 134, 854	700,000	979,664	973,604		(7,890)		(7,890)		965,714		169,140	169,140		03/01/2038

# **SCHEDULE D - PART 4**

					Showing All L	ong-Term E	Sonds and Sto	ocks SOLD, F	REDEEMED	or Otherwis	se DISPOS	SED OF Dur	ing Current	Year						
1	2	3	4	5	6	7	8	9	10	(	Change In Bo	ook/Adjusted (	Carrying Value	9	16	17	18	19	20	21
										11	12	13	14	15						
														Total						
												Current	Total	Foreign					Bond	
												Year's	Change in	Exchange	Book/				Interest/	
									Prior Year		Current	Other-	Book/	Change in	Adjusted	Foreign			Stock	Stated
									Book/	Linrodized		Than-			Carrying	Exchange			Dividends	Con-
CLICID					Nihanaf					Unrealized	Year's	-	Adjusted	Book/	, ,	U	Daaliaad	T-4-1 O-:		
CUSIP			D'	N1	Number of	0.1			Adjusted	Valuation	(Amor-	Temporary	Carrying	Adjusted	Value at	Gain	Realized	Total Gain	Received	tractual
ldenti-		For-		Name	Shares of	Con-			Carrying	Increase/	tization)/	Impairment	Value	Carrying	Disposal		Gain (Loss)	(Loss) on	During	Maturity
fication	Description	eign		of Purchaser	Stock	sideration	Par Value	Actual Cost	Value	Decrease	Accretion	Recognized	(11+12-13)	Value	Date	Disposal	on Disposal	Disposal	Year	Date
33616C-AB-6	FIRST REPUBLIC BANK SUB CORP BND		10/28/2020	Accordia		818,836	682,500	654,722	655 , 111		445		445		655,556		163,280	163,280	37 , 150	
33616C-AC-4	FIRST REPUBLIC BANK SUB CORP BND		10/28/2020	Accordia		306,282	245,000	244,885	244,902		2		2		244,903		61,378	61,378	13,723	
337738-AR-9	FISERV INC SENIORCORPBND		10/28/2020	Accordia		454,700	385,000	379,233	379,788		413		413		380,200		74,500	74,500	17,428	
36962G-4B-7	GENERAL ELECTRIC CO CORP BND MTN		10/28/2020	Accordia		188,946	142, 100	165,727	165,286		(591	)	(591)		164,694		24,252	24,252	12,727	
375558-BA-0	GILEAD SCIENCES INC SENIOR CORP BND		10/28/2020	Accordia		872,053	700,000	699,790	699,836		3		3		699,839		172,214	172,214	39,200	02/01/2045
400040 AV 7	HALLIBURTON COMPANY CORP BND		.01/15/2020	CITICORP SECURITIES MARKETS		1 010 107	700 000	932,561	928,052		(200	,	(200)		927,744			88,383	47 070	00 /45 /0000
406216-AY-7	HALLIBURIUN CUMPANY CURP BND			J.P. MORGAN SECURITIES		1,016,127	700,000	932,561	928,052		(308	)	(308)		927,744		88,383	88,383	17,6/3	09/15/2039
413875-AT-2	HARRIS CORPORATION SENIOR CORP BND		01/07/2020	INC		4,518,806	3,651,000	4,028,039	4,022,570		(186	,	(186)		4,022,385		496,422	496,422	36,904	04/27/2045
460146-CQ-4	INTERNATIONAL PAPER CO SENIOR CORP BND	1	10/28/2020	Accordia			700,000	4,028,039	4,022,570	<u> </u>	790				4,022,385	<b> </b>	215,915	215,915		108/15/2047
461070-AN-4	INTERSTATE POWER AND LIGHT CO SENIOR COR		10/20/2020	Accordia		414,789	350,000		321,569		349		349		321.918		92,871	92,871	11,511	
46625H-HF-0	JPMORGAN CHASE & CO CORP BND		10/28/2020	Accordia		538,787	350,000	456,243	453,744		(3,201		(3,201)		450,543		88,243	88,243		05/15/2038
46625H-LL-2	JPMORGAN CHASE & CO SUB CORP BND	.]	10/28/2020	Accordia		2,005,991	1,470,000	1,635,610	1,633,293		(3,033		(3,033)		1,630,260		375,731	375,731		306/01/2045
		1	T	Redemption			,,	,,	,,,,			,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,,					
478045-AA-5	JOHN SEVIER COMBINED CYCLE GEN COPR BND		07/15/2020	100.0000		53,531	53,531	59,635	59,524		(3,034	)	(3,034)		56,490		(2,959)	(2,959)	1,864	01/15/2042
478045-AA-5	JOHN SEVIER COMBINED CYCLE GEN COPR BND		10/28/2020	Accordia		2,013,389	1,593,829	1,775,590	1,772,280		(6,882	)	(6,882)		1,765,398		247,991	247,991	95,031	I01/15/2042
485134-BS-8	KANSAS CITY POWER & LIGHT COMP SECURED C		08/04/2020	Accordia		1,559,844	1,200,000	1,226,436	1, 226, 157		(294		(294)		1,225,863		333,981	333,981	41,800	
487836-BQ-0	KELLOGG COMPANY SENIOR CORP BND		10/28/2020	Accordia		881,930	700,000	665,378	665,833		550		550		666,383		215,547	215,547	33,950	
49446R-AM-1	. KIMCO REALTY CORPORATION SENIOR CORP BND		10/28/2020	Accordia		371,952	350,000	331, 167	331,436		330				331,766		40,186	40 , 186	16,032	
50540R-AS-1	LABORATORY CORP OF AMER HLDGS LABORATORY		10/28/2020	Accordia		810, 186	630,000	615,384	615,623		250		250		615,873		194,314	194,314	36,848	
575634-AT-7	. MASSACHUSETTS ELECTRIC COMPANY SENIOR CO		10/28/2020	Accordia		922, 144	770,000	737,429	737,898		550		550		738,448		183,696	183,696	37 , 168	
58013M-FA-7	MCDONALDS CORPORATION SENIOR CORP BND		10/28/2020	Accordia		761,116	577,500	620,968	620,387		(778		(778)		619,608		141,508	141,508	25,072	
59022C-AJ-2 594457-BT-9	BANK OF AMERICA CORP CORP BND		10/28/2020	Accordia		349,414	245,000	292,792	291,615		(1,538		(1,538)		290,077		59,337	59,337	18,712	
61747Y-DY-8	DTE GAS CO CORP BND 5.700% 03/15/33 MORGAN STANLEY SENIOR CORP BND		10/28/2020 10/28/2020	Accordia Accordia		914,578	196,000	209,345 713,839	206,390 713,673		(262		(467)		713,411		63,875 201,167	63,875 201,167	12,537	
63946B-AG-5	. NBCUNIVERSAL MEDIA LLC SENIOR CORP BND		10/28/2020	Accordia		1,050,189	700,000		857,955		(3,842		(3,842)		854, 113		196,076	196,076	44,889	
65473Q-BF-9	NISOURCE INC SENIOR CORP BND		08/04/2020	Accordia		1,312,210	1,000,000	1,018,820	1.018.591		(224		(224)		1.018.367		293.843	293.843	31,597	
65473Q-BG-7	NISOURCE INC SENIORCORPBND		08/04/2020	Accordia		497.768	400.000	379.724	379.979		222		222		380.201		117,567	117.567	13.386	
655844-AF-5	NORFOLK SOUTHERN CORPORATION SENIOR CORP		10/28/2020	Accordia		517, 158	343,000	457,922	455,057		(3,663		(3,663)		451,394		65,764	65,764	24,047	
665772-CA-5	NORTHERN STATES POWER COMPANY CORP BND		10/28/2020	Accordia		1,870,050	1,365,000	1,529,674	1,524,951		(6, 169		(6, 169)		1,518,783		351,267	351,267		07/15/2035
666807-BH-4	NORTHROP GRUMMAN CORP SENIORCORPBND		08/04/2020	Accordia		545,840	400,000	431,904	431,397		(476	)	(476)		430,921		114,919	114,919	12,878	06/01/2043
666807-BN-1	NORTHROP GRUMMAN CORP SENIOR CORP BND		10/28/2020	Accordia		432,417	385,000	359,051	361,727		2,060		2,060		363,787		68,629	68,629	16, 127	
68268N-AM-5	ONEOK PARTNERS LP SENIOR CORP BND		01/07/2020	Various		5,258,250	4,275,000	4,845,969	4,838,023		(279		(279)		4,837,743		420,507	420,507		309/15/2043
701094-AJ-3	PARKER HANNIFIN CORPORATION SENIOR CORP		08/04/2020	Accordia		390,380	350,000	349,695	349,765	ļ	18		18		349,782		40,597	40,597	10,553	
718172-AC-3	. PHILIP MORRIS INTERNATIONAL IN CORP BND	-	10/28/2020	Accordia		1,043,518	700,000	871,080			(4,977		(4,977)		862,235		181,283	181,283	42,518	
73102Q-AA-4	POLAR TANKERS INC SENIOR CORP BND 144A		10/28/2020	Accordia		1,066,976	840,000	982,615	975,988		(8,399		(8,399)		967,589		99,388	99,388	48,461	
760759-AK-6 761713-BB-1	REPUBLIC SERVICES INC CORP BND		10/28/2020	Accordia		1,541,295	1,050,000	1,282,796 575.098	1,272,292 574.977		(5,690		(5,690)		1,266,602		274,693	274,693	75,588	
761/13-BB-1 832696-AP-3	REYNOLDS AMERICAN INC SENIOR CORP BND	-	10/28/2020 .	Accordia			560,000				(228		(228)				115,670	115,670	39,494	
842400-EV-1	SOUTHERN CALIFORNIA EDISON CO. SOUTHERN		10/28/2020	Accordia		933,065					(3, 123		(3, 123)		778,856		154,209		43,381	
842587-CX-3	SOUTHERN COMPANY THE SENIOR CORP BND		08/04/2020	Accordia		1,255,550	1,000,000	999,550		·····		/	(0, 123)		999,613		255,937	255,937	48, 156	
84756N-AE-9	SPECTRA ENERGY PARTNERS LP SENIOR CORP B	1	10/28/2020	Accordia		1,233,330	1,505,000	1.771.490	1.767.449		(5,288	)	(5,288)		1.762.161		136.713	136.713		09/25/2043
855244-AT-6	STARBUCKS CORPORATION SENIOR CORP BND		10/28/2020	Various		1,273,909	1,100,000	1,097,514	1,097,569		170		170		1,097,739		176,170	176,170	39,953	
871829-AY-3	SYSCO CORPORATION SENIOR CORP BND		10/28/2020	Accordia		1,455,374	1,225,000	1,305,887	1,304,792		(1,458		(1,458)		1,303,334		152,039	152,039	64,033	
871829-BD-8	SYSCO CORPORATION SENIOR CORP BND		10/28/2020	Accordia		939,481	840,000		849,292		(164	)	(164)		849, 127		90,354	90,354	40,740	
902494-BD-4	TYSON FOODS INC SENIOR CORP BND		08/04/2020	Accordia		1,288,820	1,000,000	961,040	961,527		412		412		961,939		326,881	326,881	30,713	
913017-BT-5	. UNITED TECHNOLOGIES CORPORATN SENIOR COR		08/04/2020	Accordia		1,725,984	1,300,000	1,354,028	1,353,128		(863		(863)		1,352,265		373,719	373,719	39,650	
91324P-DF-6	. UNITEDHEALTH GROUP INC SENIORCORPBND		10/28/2020	Accordia		1,052,958	875,000	828,809	829,409		749				830 , 158		222,799	222,799	34,089	
91324P-DK-5	. UNITEDHEALTH GROUP INC SENIORCORPBND		10/28/2020	Accordia		413,606	350,000	348,912	349,021		85		85		349, 106		64,499	64,499	11,753	
92343V-CK-8	VERIZON COMMUNICATIONS INC SENIOR CORP B		10/28/2020	Accordia		376,880	280,000	306,608	306,274	ļ	(449	/	(449)		305,825		71,055	71,055	16, 185	
927804-FW-9 94973V-BB-2	VIRGINIA ELECTRIC AND POWER CO SENIOR CO		10/28/2020	Accordia		1,365,708	1,094,800	1,079,057	1,079,283	·	269		269		1,079,552	····	286, 157	286 , 157	41,846	
94973V-BB-2 94974B-GQ-7	ANTHEM INC SENIOR CORP BND		10/28/2020	Accordia		1,375,313	1,085,000	989,524	992,738		1,708		1,708		994,445		380,868	380,868		101/15/2043 311/17/2045
94974B-GQ-7 957576-AA-9	WESTERN & SOUTHERN FINC INC WESTERN & SO		10/28/2020	Accordia Accordia			147.000	150.460	149,749		(1,486		(1,486)		149.633		46,664	276,228		311/1//2045 107/15/2033
98389B-AN-0	XCEL ENERGY INC XCEL ENERGY INC	1	01/07/2020	KEY BANK		2,694,681	2,322,000	2,421,753	2,420,038	l	(110		(116)		2,419,977		40,004	274,704	35,294	
98419M-AK-6	XYLEM INC INDIANA SENIOR CORP BND	1	10/28/2020	Accordia		1,729,230	1,452,500	1,449,595	1,449,632		48	,	(62)		1,449,680		279,551	279,551		)11/01/2046
30		1	T	Redemption		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1,402,000	, 410,000	, 440,502						, 440, 000		2,0,001	270,001		
136055-AA-8	CANADIAN IMPERIAL BANK BD 144A	Α	10/10/2020	100.0000		175.782	175,782	212.800	202.498	1	(13.900	)	(13,900)		188.598	1	(12.816)	(12.816)	9 574	04/10/2032

## **SCHEDULE D - PART 4**

Showing All Long-Term Bonds and Stocks SOLD, REDEEMED or Otherwise DISPOSED OF During Current Year

	_			1	Showing All L	ong remi b	Johas and Ott	JUNG OULD, I												T
1	2	3	4	5	6	7	8	9	10		Change In Bo	ok/Adjusted	Carrying Value		16	17	18	19	20	21
										11	12	13	14	15						
														Total						
												Current	Total	Foreign					Bond	
												Year's	Change in	Exchange	Book/				Interest/	
									Prior Year		Current	Other-	Book/	Change in	Adjusted	Foreign			Stock	Stated
									Book/	Unrealized	Year's	Than-	Adjusted	Book/	Carrying	Exchange			Dividends	Con-
CUSIP					Number of				Adjusted	Valuation	(Amor-	Temporary	Carrying	Adjusted	Value at	Gain	Realized	Total Gain	Received	tractual
Identi-		For-	Disposal	Name	Shares of	Con-			Carrying	Increase/	tization)/	Impairment	Value	Carrying	Disposal		Gain (Loss)	(Loss) on	During	Maturity
fication		-		of Purchaser	Stock	sideration	Dor Value	A atual Coat	Value										Year	,
		eign			STOCK		Par Value	Actual Cost		Decrease	Accretion	Recognized		Value	Date	Disposai	on Disposal			Date
136055-AA-8 05523R-AC-1	CANADIAN IMPERIAL BANK BD 144A	A	10/28/2020 .	Accordia		869,470	733,727		845,242		(4,202)		(4,202)		841,040		28,430	28,430 176,160		10/11/2032
21685W-CJ-4	BAE SYSTEMS PLC SENIOR CORP BND 144A	D	10/28/2020 .	Accordia		988,449 1,023,757	700,000	816,900 847,469	814,891 844,599		(2,602)		(2,602)		812,289 840.914		1/6, 160	176, 160 .		10/11/2041 .
	ORANGE SA SENIOR CORP BND	D	10/28/2020	Accordia		1,773,949	1,269,800	1,452,765	1.449.642		(4, 121)		(4, 121)		1,445,521		328.428	328.428		01/13/2042
	GE CAPITAL INTERNATIONAL FUNDI SENIOR CO	D	10/28/2020	Accordia		551,346			464,746		1.405		1,405		466, 151		85.195	85, 195		11/15/2035 .
	HSBC HOLDINGS PLC CORP BND	D	10/28/2020	Accordia		989,121			918,655		(11, 275)		(11,275)		907.380		81.741	81.741		05/17/2032 .
	HSBC HOLDINGS PLC SUB CORP BND	D	10/28/2020	Accordia		428,769	332,500		367,973		(685)		(685)		367,288		61,481	61,481		03/14/2044 .
50247V-AC-3	LYB INTERNATIONAL FINANCE BV SENIOR CORP	D	10/28/2020	Accordia		209,491	175,000	173,828	173,854		21		21		173,875		35,616	35,616	9,574	03/15/2044
	ORANGE SA SENIOR CORP BND	D		Accordia		504,364	350,000	410,659	409,722		(1,233)		(1,233)		408,489		95,875	95,875	23,688	
853254-AN-0	STANDARD CHARTERED PLC SUB CORP BND 144A	D	10/28/2020 .	Accordia		1,084,360	857,500	937,582	936,525		(1,419)		(1,419)		935, 105		149,255	149,255	53,358	03/26/2044 .
3899999.	Subtotal - Bonds - Industrial and Misc	ellane	eous (Unaff	iliated)		103,999,654	81,001,269	87,540,317	87,352,290		(169,418)		(169,418)		87,182,864		15,618,257	15,618,257	5, 135, 898	XXX
8399997.	Гotal - Bonds - Part 4					119,227,128	92, 123, 769	101,140,608	100,892,224		(246,534)		(246,534)		100,645,684		17,382,912	17,382,912	5,790,477	XXX
8399998.	Γotal - Bonds - Part 5					68,165,655	70,427,104	64,799,929			160,378		160,378		64,961,552		3,204,098	3,204,098	1,183,669	XXX
8399999.	Γotal - Bonds					187,392,783	162,550,873	165,940,537	100,892,224		(86, 156)		(86, 156)		165,607,236		20,587,010	20,587,010	6,974,146	XXX
8999997.	Total - Preferred Stocks - Part 4						XXX													XXX
8999998.	Total - Preferred Stocks - Part 5						XXX													XXX
8999999.	Total - Preferred Stocks						XXX													XXX
9799997.	Total - Common Stocks - Part 4						XXX													XXX
9799998.	Total - Common Stocks - Part 5				_		XXX	_												XXX
9799999.	799999. Total - Common Stocks																			XXX
	Total - Preferred and Common Stocks	S					XXX												•	XXX
9999999 -	Totals		<u> </u>	<del></del>		187,392,783	XXX	165.940.537	100.892.224		(86, 156)	1	(86, 156)		165,607,236		20,587,010	20,587,010	6.974.146	XXX

## **SCHEDULE D - PART 5**

Showing All Long-Term Bonds and Stocks ACQUIRED During Year and Fully DISPOSED OF During Current Year

					During rea	r and Fully														
1	2	3	4	5	6	7	8	9	10	11	С	hange in Boo	ok/Adjusted C	Carrying Value	9	17	18	19	20	21
											12	13	14	15	16					1
															Total					1
													Current	Total	Foreign					1
							Par Value						Year's	Change in	Exchange				Interest	1
										D = =1./		0				F:				Deleter
							(Bonds)			Book/		Current	Other-	Book/	Change in	Foreign			and	Paid for
							or			Adjusted	Unrealized	Year's	Than-	Adjusted	Book/	Exchange	Realized		Dividends	Accrued
CUSIP							Number of			Carrying	Valuation	(Amort-	Temporary	Carrying	Adjusted	Gain	Gain	Total Gain	Received	Interest
Identi-		For-	Date		Disposal	Name of	Shares		Consid-	Value at	Increase/	ization)/	Impairment	Valu (12 +	Carrying	(Loss) on	(Loss) on	(Loss) on	During	and
fication	Description	eign	Acquired	Name of Vendor	Date	Purchaser	(Stock)	Actual Cost	eration	Disposal	(Decrease)	Accretion	Recognized	13 - 14)	Value	Disposal	Disposal	Disposal	Year	Dividends
00206R-ME-9	AT&T INC SENIOR CORP BND 144A		09/18/2020	Tax Free Exchange	09/18/2020 .	DIRECT	816	643	816	643							173	173		
00206R-ME-9	AT&T INC SENIOR CORP BND 144A			Tax Free Exchange	10/28/2020 .		723, 100	569,712	690,438	569,865		153		153			120,572	120,572	3,006	L
00432C-BJ-9	ACCSS_04-A4 ABS04-A4			Various	10/28/2020 .	. Various	3,952,000	3,603,054	3,635,501	3,620,477		17,423		17,423			15,024	15,024	39,602	
	APPLIED MATERIALS INC SENIOR CORP BND		08/25/2020	RBC DOMINION SECURITIES INC	10/28/2020	Accordia	1,050,000	1,092,137	1,082,687	1,091,423		(713)		(713)			(8,737)	(8,737)	7,656	4,492
	BB-UBS TRUST BBUBS_12-SHOW SUB CMBS_012-																			1
05538U-AG-8			05/01/2020		10/28/2020 .		3,575,000	3,229,532	3,296,646	3,252,674		23, 142		23, 142			43,971	43,971	69,588	1, 199
05604F-AN-5	BWAY_13-1515 CMBS_13-1515 D 144A		05/01/2020	Various	10/28/2020 .	. Various	3,800,000	3,535,803	3,896,025	3,556,477		20,674		20,674			339,548	339,548	59,786	11,505
	BRISTOL-MYERS SQUIBB CO SENIOR CORP BND																			1
110122-DJ-4				Tax Free Exchange	10/28/2020 .		350,000	376,883	489,255	376,722		(160)		(160)			112,532	112,532	12,347	7 , 389
133434-AD-2	CAMERON LNG LLC SECURED CORP BND 144A		05/01/2020	Accordia	08/04/2020 .	. Accordia	4,900,000	4,693,318	5,613,293	4,695,552		2,234		2,234			917,741	917,741	116,869	
	COMCAST CORPORATION CORP BND		05/01/2020	Accordia	10/28/2020 .		1,680,000	2,436,050	2,530,416	2,419,240		(16,811)		(16,811)			111, 176	111, 176	67,424	
	ENTERGY LOUISIANA LLC SECURED CORP BND .			BARCLAYS CAPITAL	08/04/2020 .		850,000	1,017,850	1,170,578	1,016,031		(1,819)		(1,819)			154,547	154,547	30 , 147	11,008
	ENTERGY TX SECURED CORP BND		09/28/2020	BA SECURITIES	10/28/2020 .		1,750,000	1,743,525	1,746,465	1,743,568		43		43			2,897	2,897	2,382	56
	GSAA_06-10 SENIORABS06-10		05/01/2020	Accordia	12/01/2020 .		334, 191	133,632 4.497.295	334, 191	334, 191		200,559		200,559			215,634	215,634	1,740	56
	GSAA_06-10 SENIORABS06-10			Various	10/28/2020 .		11,246,997	3,070,380	4,594,8933,120,103	4,379,259 3,096,783		(118,036)		(118,036)			215,634	23,320	24,201	1,870
	HEF_04-1 ABS 04-1 B2 144A			Various	10/28/2020 .			2,735,486	2,710,444	2,733,563							(23, 320	(23, 119)	24,201	9,713
44U43Z-AF-/	INTERNATIONAL BUSINESS MACHINE SENIOR CO		08/21/2020	SUSQUENANNA PARTNERS	10/28/2020 .	. Accordia		2,730,480	2,710,444	2,733,303		(1,923)		(1,923)			(23,119)	(23, 119)		9,713
459200-KB-6	INTERNATIONAL BUSTINESS MACRIME SENTOR CO		05/01/2020	Accordia	.08/04/2020	Accordia	4,000,000	4,674,520	5,058,320	4.667.834		(6,686)		(6,686)			390,486	390,486	119.889	76,544
	KEYBANK NATIONAL ASSOCIATION SUB CORP BN		03/01/2020	ACCOI UI a	00/ 04/ 2020 .	. Accordia			3,030,320	4,007,004		(0,000)		(0,000)					119,009	
49327V-2B-9	REIDHIR INTIONE NOODOTHITON OOD OOM DIV		05/01/2020	Various	10/28/2020	Various	3.496.000	3,721,247	4,001,430	3.711.810		(9.437)		(9,437)			289.619	289.619	65.860	6,817
	MCDONALDS CORPORATION SENIOR CORP BND		05/01/2020	Accordia	08/04/2020 .		2,800,000	3,466,148	3,670,716	3,457,157		(8,991)		(8,991)			213,559	213,559		
	PAYPAL HOLDINGS INC SENIOR CORP BND			CITICORP SECURITIES MARKETS	10/28/2020	Accordia	1.050.000	1,119,080	1,112,496	1, 117, 944		(1,135)		(1, 135)			(5,448)	(5,448)	10.800	
	PROLOGIS LP SENIOR CORP BND			BARCLAYS CAPITAL	10/28/2020	Accordia	1,750,000	1,715,140	1,715,070	1,715,383		243		243			(313)	(313)	4, 193	
	ROPER TECHNOLOGIES INC SENIOR CORP BND		08/21/2020	WELLS FARGO SECURITIES	10/28/2020	Accordia	2,625,000	2,640,724	2,625,735	2,640,493		(231)		(231)			(14,758)	(14,758)	7,401	L
	SOUTHERN CALIFORNIA EDISON CO. CORP BND																			1
842400-FH-1				Accordia	10/28/2020 .		1,610,000	2,074,163	2,071,474	2,065,155		(9,008)		(9,008)			6,319	6,319	71,314	
	STARBUCKS CORPORATION SENIOR CORP BND		05/01/2020	Accordia	10/28/2020 .	. Accordia	2,168,000	2,379,618	2,509,742	2,369,370		(10,249)		(10,249)			140,372	140,372	54,361	16,248
	BANCO SANTANDER SA CORP BND	D	05/01/2020	Various	10/28/2020 .	Various	3,040,000	3, 170, 690	3,342,486	3, 165, 380		(5,310)		(5,310)			177 , 106	177, 106		
	IVY HILL MIDDLE MARKET CREDIT ABS7A	D	05/01/2020	Various	10/28/2020 .	. Various	3,869,000	3,493,165	3,533,539	3,554,432		60,021		60,021			(20,893)	(20,893)	51,465	3,647
	MADISON PARK FUNDING LTD MDPK_ ABS 2015-			L																1 .
55818Y-BL-4		D		Various	10/28/2020 .	_ Various	3,610,000	3,610,134	3,612,896	3,610,126		(8)		(8)			2,770	2,770	63,045	3,801
	Subtotal - Bonds - Industrial and M	liscell	aneous (Un	affiliated)			70,427,104	64,799,929	68,165,655	64,961,552		160,378		160,378			3,204,098	3,204,098	1,183,669	358,110
8399998. T	otal - Bonds		. <u></u>	<del></del>			70,427,104	64,799,929	68,165,655	64,961,552		160,378		160,378			3,204,098	3,204,098	1,183,669	358,110
8999998 T	otal - Preferred Stocks							1	, .,	1. 1.44		,		,			-, ,	-, ,	, .,	[
	otal - Common Stocks																			
	otal - Preferred and Common Sto	alca						+	+				-							l
		CKS																		<del>                                     </del>
9999999 -	l otals							64,799,929	68,165,655	64,961,552		160,378		160,378			3,204,098	3,204,098	1, 183, 669	358,110

# Schedule D-Part 6-Section 1-Valuation of Shares of Subsidiary, Controlled or Affiliated Companies **NONE**

Schedule D - Part 6 - Section 2 **N O N E** 

## **SCHEDULE DA - PART 1**

Showing All SHORT-TERM INVESTMENTS Owned December 31 of Current Year

					Showing	All SHORT-													
1	Co	des	4	5	6	7	Chang	je in Book/Ad	justed Carrying	y Value	12	13			Intere	st			20
	2	3					8	9	10	11			14	15	16	17	18	19	
										Total									
									Current	Foreign			Amount Due						
									Year's	Exchange			and Accrued						
								Current	Other-	Change in			Dec. 31 of						
						Book/	Unrealized	Year's	Than-	Book/			Current Year	Non-				Amount	
						Adjusted	Valuation	(Amor-	Temporary	Adjusted			on Bond	Admitted		Effective		Received	Paid for
		For-	Date		Maturity	Carrying	Increase/	tization)/	Impairment	Carrying			Not	Due and	Rate	Rate	When	During	Accrued
Description	Code	eign	Acquired		Date	Value	(Decrease)	Accretion	Recognized	Value	Par Value	Actual Cost	in Default	Accrued	of	of	Paid	Year	Interest
UNITED STATES TREASURY TBILLCASH			12/22/2020 .	CITICORP SECURITIES MARKETS	03/25/2021	6,998,636		148			7,000,000	6,998,488			0.084	0.086	MAT		
UNITED STATES TREASURY TBILLCASHUNITED STATES TREASURY TBILLCASH			12/17/2020 .	J.P. MORGAN SECURITIES INC	05/20/2021	2,998,083		1,033			3,000,000	2,997,050			0.000	0.166	MAT		
UNITED STATES TREASURY TBILLCASH			10/16/2020 .	Accordia	07/15/202107/15/2021			185	' <del></del>		900,000				0.100	0.101 0.109	MAT		
UNITED STATES TREASURY TBILLCASH			12/17/2020 .	Accordia	07/15/2021	1,998,834		84			2.000.000	1.998.751			0.108	0.109	MAT		
UNITED STATES TREASURY TBILLCASH			07/16/2020	NOMURA SECURITIES INTL. INC.	01/14/2021	149,993		93			150,000	149,900			0.132	0.134	MAT		
UNITED STATES TREASURY TBILLCASH			08/06/2020	J.P. MORGAN SECURITIES INC	02/04/2021	299,967		141			300,000	299,827			0.000	0.115	MAT		
UNITED STATES TREASURY TBILLCASH			09/24/2020 .	J.P. MORGAN SECURITIES INC	09/09/2021	1,049,140		336			1,050,000	1,048,804			0.117	0.119	MAT		
UNITED STATES TREASURY TBILLCASH			12/17/2020 .	Accordia	09/09/2021	2,447,979		113			2,450,000	2,447,866			0.118	0.120	MAT		
UNITED STATES TREASURY TBILLCASHUNITED STATES TREASURY TBILLCASH			11/24/2020 .	NOMURA SECURITIES INTL. INC.				104			1,000,000				0.102 1.436	0.103	MAT		
UNITED STATES TREASURY TBILLCASH			08/28/2020	J.P. MORGAN SECURITIES INC	02/25/2021	599.902					600.000				0.108	0.109	MAT		
0199999. Subtotal - Bonds - U.S. Gov	ernment	s - Issue	,,			18.840.796		6.419			18.850.000	18.834.379			XXX	XXX	XXX		
0599999. Total - U.S. Government Bo		0 10000	or obligation	10		18,840,796		6,419			18.850.000	18.834.379			XXX	XXX	XXX		
1099999. Total - All Other Governmen						10,040,730		0,413			10,000,000	10,004,073			XXX	XXX	XXX		
1799999. Total - U.S. States. Territori			one Bonde												XXX	XXX	XXX		
2499999. Total - U.S. Political Subdiv			oris Borius												XXX	XXX	XXX		
															XXX	XXX	XXX		
3199999. Total - U.S. Special Revenu			-4																
3899999. Total - Industrial and Miscel	ianeous	(Unamilia	atea) Bonas	S											XXX	XXX	XXX		
4899999. Total - Hybrid Securities															XXX	XXX	XXX		
5599999. Total - Parent, Subsidiaries		iates Boi	nds												XXX	XXX	XXX		
6099999. Subtotal - SVO Identified Fu															XXX	XXX	XXX		
6599999. Subtotal - Unaffiliated Bank	Loans														XXX	XXX	XXX		
7699999. Total - Issuer Obligations						18,840,796		6,419			18,850,000	18,834,379			XXX	XXX	XXX		
7799999. Total - Residential Mortgage															XXX	XXX	XXX		
7899999. Total - Commercial Mortgag															XXX	XXX	XXX		
7999999. Total - Other Loan-Backed	and Struc	ctured Se	ecurities												XXX	XXX	XXX		
8099999. Total - SVO Identified Fund															XXX	XXX	XXX		
8199999. Total - Affiliated Bank Loans	S														XXX	XXX	XXX		
8299999. Total - Unaffiliated Bank Lo															XXX	XXX	XXX		
8399999. Total Bonds						18.840.796		6,419			18.850.000	18.834.379			XXX	XXX	XXX		
8699999. Total - Parent. Subsidiaries	and Affili	iates				12,212,100		3,110			XXX	,,			XXX	XXX	XXX		
9199999 - Totals	G. 1G / WIII					18.840.796		6.419			XXX	18.834.379			XXX	XXX	XXX		
0 100000 Totalo						10,040,790		0,419	1	l	////	10,004,379			////	////	/VV\		

Bo	ook/Adjusted Carrying	⊦ Value by NAIC Designat	ion Category Footnote:				
1A	\$	1B\$	1C\$	1D\$	1E\$	1F\$	1G\$
2A	\$	2B\$	2C\$				
3A	\$	3B\$	3C\$				
44	\$	4B\$	4C\$				
5A	\$	5B\$	5C\$				
6.	\$						

## Schedule DB - Part A - Section 1 - Options, Caps, Floors, Collars, Swaps and Forwards Open NONE

Schedule DB - Part A - Section 2 - Options, Caps, Floors, Collars, Swaps and Forwards Terminated **NONE** 

Schedule DB - Part B - Section 1 - Futures Contracts Open NONE

Schedule DB - Part B - Section 1B - Brokers with whom cash deposits have been made **NONE** 

Schedule DB - Part B - Section 2 - Futures Contracts Terminated **NONE** 

Schedule DB - Part D - Section 1 - Counterparty Exposure for Derivative Instruments Open NONE

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged By NONE

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged To **N O N E** 

Schedule DB - Part E - Derivatives Hedging Variable Annuity Guarantees as of December 31 of Current Year

## NONE

Schedule DL - Part 1 - Reinvested Collateral Assets Owned NONE

Schedule DL - Part 2 - Reinvested Collateral Assets Owned NONE

Schedule E - Part 1 - Month End Depository Balances **NONE** 

## **SCHEDULE E - PART 2 - CASH EQUIVALENTS**

Show Investments Owned December 31 of Current Year

			December 31 of C					_
1	2	3	4	5	6	7	8	9
						Book/Adjusted	Amount of Interest	Amount Received
CUSIP	Description	Code	Date Acquired	Rate of Interest	Maturity Date	Carrying Value	Due and Accrued	During Year
	UNITED STATES TREASURY TBILLCASH	-	12/17/2020	0.139				
	UNITED STATES TREASURY TBILLCASH UNITED STATES TREASURY TBILLCASH	-	12/17/2020	0.000 1.501	02/04/2021			4
	UNITED STATES TREASURY TBILLCASH	-	12/17/2020	0.110	01/26/2021	1,399,765		4
	otal - Bonds - U.S. Governments - Issuer Obligations					3.148.881		5
	- U.S. Government Bonds					3,148,881		5
	- All Other Government Bonds					0,110,001		
	I - U.S. States, Territories and Possessions Bonds							
	I - U.S. Political Subdivisions Bonds							
	I - U.S. Special Revenues Bonds							
	I - Industrial and Miscellaneous (Unaffiliated) Bonds							
	- Hybrid Securities							
	I - Parent, Subsidiaries and Affiliates Bonds							
	otal - SVO Identified Funds							
	otal - Unaffiliated Bank Loans							
	I - Issuer Obligations					3,148,881		5
	I - Residential Mortgage-Backed Securities					0,140,001		
	l - Commercial Mortgage-Backed Securities							
	- Other Loan-Backed and Structured Securities							
	- SVO Identified Funds							
	- Affiliated Bank Loans							
	- Unaffiliated Bank Loans							
8399999. Tota						3,148,881		5
	GOLDMAN SACHS FIN SQ TR OB-IN STIF FUND		12/28/2020	0.000		465.777		9.6
	otal - Exempt Money Market Mutual Funds - as Identified by the SVO					465,777		9.6
						100,111		0,0
		-						
		-						
		-						
		-						
		.			• · · · · · · · · · · · · · · · · · · ·			1
		.						
	al Cash Equivalents					3,614,658		10,10

Book/Adjusted Carrying	Value by NAIC De	signation Cate	egory Footnote:				
1A\$	1B\$3,1	48,881 1C\$		1D\$	1E\$	1F\$	1G\$
2A\$	2B\$	2C\$					
3A\$	3B\$	3C\$					
4A\$	4B\$	4C\$					
5A\$	5B\$	5C\$					
6\$							

## **SCHEDULE E - PART 3 - SPECIAL DEPOSITS**

		<b>7116</b>	OULE E - PART 3 - SPE		s For the		
		,	_	Benefit of All	Policyholders		ecial Deposits
	States, Etc.	Type of Deposit	Purpose of Deposit	3 Book/Adjusted Carrying Value	4 Fair Value	5 Book/Adjusted Carrying Value	6 Fair Value
1.	•						
2.	AlaskaAK						
3.	ArizonaAZ						
4.	ArkansasAR						
5. 6	CaliforniaCA ColoradoCO						
6. 7.	Colorado						
8.	DelawareDE						
9.	District of ColumbiaDC						
10.	FloridaFL						
11.	GeorgiaGA						
12.	HawaiiHI						
13.	Idaho ID						
14.	Illinois JL					<del> </del>	
15. 16.	IndianaIN IowaIA						
17.	Kansas KS						
18.	Kentucky KY						
19.	LouisianaLA					<b></b>	
20.	MaineME					ļ	
21.	MarylandMD						
22.	MassachusettsMA					<del> </del>	
23.	MichiganMI					<b>†</b>	
24. 25.	MinnesotaMN MississippiMS						
26.	MissouriMO						
27.	MontanaMT						
28.	NebraskaNE						
29.	NevadaNV						
30.	New HampshireNH						
31.	New JerseyNJ					<b></b>	
32.	New MexicoNM						
33. 34.	New York	·····					
3 <del>4</del> .	North DakotaND				<u> </u>		
36.	Ohio OH						
37.	OklahomaOK						
38.	OregonOR						
39.	PennsylvaniaPA						
40.	Rhode IslandRI						
41.	South CarolinaSC						
42.	South Dakota SD Tennessee TN						
43. 44.	TexasTX						
45.	UtahUT						
46.	VermontVT						
47.	VirginiaVA					<b> </b>	
48.	WashingtonWA					ļ	
49.	West VirginiaWV					ļ	
50.	WisconsinWI					ł	
51.	WyomingWY					<del> </del>	
52.	American SamoaAS					<b>†</b>	l
53. 54.	GuamGU Puerto RicoPR				•	İ	
55.	U.S. Virgin IslandsVI						
56.	Northern Mariana IslandsMP						
57.	CanadaCAN					<b> </b>	
58.	Aggregate Alien and OtherOT	XXX	XXX				
59.	Subtotal	XXX	XXX				
	DETAILS OF WRITE-INS						
5801.						<del> </del>	
5802.							
						<del> </del>	
5898.	Summary of remaining write-ins for Line 58 from overflow page	xxx	xxx				
5899.	Totals (Lines 5801 thru 5803 plus						
	5898)(Line 58 above)	XXX	XXX			<u> </u>	



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

### **ANNUAL STATEMENT**

FOR THE YEAR ENDED DECEMBER 31, 2020 OF THE CONDITION AND AFFAIRS OF THE

Cape Verity III, Inc.

NAIC Group Code Organized under the Laws of		rior)	e <u>15473</u> Employer's I		46-348	5456 IA
	IOWa			ли у		IA .
Country of Domicile		United States	of America			
Licensed as business type:	Life,	Accident and Health X F	raternal Benefit Societies			
Incorporated/Organized	08/23/2013		Commenced Business		08/	/23/2013
Statutory Home Office	215 10th Street Su	ite 1100 ,		Des Moin	es, IA, US 503	09
	(Street and Nun	nber)	(City o	or Town, Sta	te, Country and	d Zip Code)
Main Administrative Office		215 10th Street				
Des Moines	IA US 50309	(Street and	Number)	855	5-887-4487	
(City or Town, State,	Country and Zip Co	ode)	()	Area Code)	(Telephone Nu	mber)
	10th Street Suite 11				es, IA, US 503	
(Street	and Number or P.O	). Box)	(City o	or Town, Sta	te, Country and	d Zip Code)
Primary Location of Books and Records		215 10th Stree				
Des Moines	IA, US 50309	(Street and	Number)	85!	5-887-4487	
(City or Town, State,	Country and Zip Co	de)	(,	Area Code)	(Telephone Nu	ımber)
Internet Website Address		N/A				
Statutory Statement Contact	Tonya Rac	chelle Maxwell			515-393-372	5
fan a maya	(N rell=guaf ,com	lame)			ođe) (Telephor 1-369-3684	ne Number)
	Address)				X Number)	
PresidentChief Executive Officer	David Paul V		Chief Financial Officer Vice President, Assistant General Counsel, Secretary			Allen Jacob auren Freund #
John Nicholas Giamalis Treas Bryan Edward Nelson, Vice President a		OTHI Vi inia Ho e Johnsor				Maxwell, Vice President ging Director, Associate General
Actualy		Philip William Sherrill	Mana in Director			Assistant Secretary
Robert Michael Arena Jr.		DIRECTORS OF Hanben I			David	Paul Wilken
State of Iowa County of Polk		SS:				
Tolk						
The officers of this reporting entity being du all of the herein described assets were the statement, together with related exhibits, so condition and affairs of the said reporting er in accordance with the NAIC Annual Stater rules or regulations require differences in respectively. Furthermore, the scope of this exact copy (except for formatting difference to the enclosed statement.	absolute property hedules and explan ntity as of the reporti ment Instructions ar reporting not rela s attestation by the	of the said reporting entity, ations therein contained, an ing period stated above, and and Accounting Practices and ted to accounting practices described officers also incl	free and clear from any lien nexed or referred to, is a full I of its income and deduction Procedures manual except a and procedures, according udes the related correspondi	is or claims and true stand is therefrom to the exter g to the be and electronic	thereon, exceptement of all the for the period of that: (1) state at of their info c filing with the	pt as herein stated, and that this se assets and liabilities and of the ended, and have been completed e law may differ; or, (2) that state formation, knowledge and belief a NAIC, when required, that is an
DocuSigned by:		DocuSigned by:		- b	ocuSigned by:	
David P. Will		DECREE ODRIGATO	nd	Da	wid Jacoby	
David Paul Wilken President		Kathryn Laur Vice President, Assista Secre	nt General Counsel,			avid Allen Jacoby ef Financial Officer
Subscilled and sworn to before me this day of	neity	2001	a. Is this an original filir b. If no, 1. State the amendn 2. Date filed 3. Number of pages	nent numbe	r	Yes[X]No[]

Lisa K Ridenour Notary Public Seal State of Indiana Hendricks County
My Commission Expires 07/13/2024



DIRECT BUSINESS IN THE NAIC Group Code 3891	STATE O	F Alabama		LI	FE II	NSUR/	ANC	E				EAR 2020 Code 15473
·	DEMILIME		,	1		2			3	4	Company	5
AND ANNUITY O			Ordi	nary		dit Life (Gı ıd Individu		Gre	oup	Industrial		Total
Life insurance     Annuity considerations								<u> </u>				
Deposit-type contract func	ls					XXX						
Other considerations      Totals (Sum of Lines 1 to												
DIRECT DI	VIDENDS T	-										
POLICYHOLDERS/R Life insurance:	EFUNDS TO	O MEMBERS										
6.1 Paid in cash or left on dep												
6.2 Applied to pay renewal pro										<del> </del>		
endowment or premiu	m-paying pe	eriod										
6.4 Other												
Annuities:												
7.1 Paid in cash or left on dep 7.2 Applied to provide paid-up	osit annuities											
7.3 Other												
7.4 Totals (Sum of Lines 7.1 t 8. Grand Totals (Lines 6.5 pl							<del>-</del>					
DIRECT CLAIMS A		ITS PAID					┫					
9. Death benefits												
Matured endowments     Annuity benefits								T				
12. Surrender values and with												
13. Aggregate write-ins for mi and benefits paid												
14. All other benefits, except a	accident and	health								<b></b>		
DETAILS OF WRITE-INS										1	+	
1301. 1302.								<b></b>		<del> </del>		
1303.												
1398. Summary of Line 13 from	overflow pa	ge										
1399. Totals (Lines 1301 thru 13 above)	303 plus 139	18) (Line 13										
				Credit Life								
DIRECT DEATH	1	Ordinary 2	(Group	and Individ	ual)	5	Grou	<u>р</u> 6	7 I	idustrial 8	9	Total 10
BENEFITS AND		2	No. of	7		3		O	-	O		10
MATURED ENDOWMENTS	No. of Pols. &		Ind.Pols. & Gr.			No. of			No. of Pols. &		No. of Pols. &	
INCURRED  16. Unpaid December 31, prior	Certifs.	Amount	Certifs.	Amour	nt	Certifs.	Α	Amount	Certifs.	Amount	Certifs.	Amount
year												
17. Incurred during current year Settled during current year:												
18.1 By payment in full												
18.2 By payment on compromised claims												
18.3 Totals paid												
18.4 Reduction by compromise 18.5 Amount rejected			\									
18.6 Total settlements							<u>.</u>					
19. Unpaid Dec. 31, current year (16+17-18.6)												
POLICY EXHIBIT						No. of Policies						
20. In force December 31, prior						Folicies						
year21. Issued during year				(a)								
22. Other changes to in force												
(Net)												
current year (a) Includes Individual Credit Life	ngurance n	ior vear \$		(a), c	urrent	vear ¢					<u> </u>	
Includes Group Credit Life Inst	urance Loan	is less than or ed	qual to 60 m	onths at issu	ue, pric	or year \$				rrent year \$		
Loans greater than 60 months	at issue BU				•				, cu	rrent year \$		
Γ		Δ.		NT AND	HEA		ISUI		3	4	Г	5
				1		2		Policyholde	r Dividends	-		Э
					Dire	ect Premiu	ıms		efunds to or Credited			Direct Losses
24 Oronin Delicir (II)			Direct P	remiums	2	Earned			Business	Direct Losses	Paid	Incurred
24. Group Policies (b)			<b></b>					†		<del> </del>		
premium (b)								<del> </del>				
24.3 Collectively renewable po	licies/certific	ates (b)								<u> </u>		
24.4 Medicare Title XVIII exem Other Individual Policies:	pt from state	e taxes or fee	<b>\!</b>		<b>D</b>							
25.1 Non-cancelable (b)							<b></b>					
25.2 Guaranteed renewable (b	)							<b></b>				
25.3 Non-renewable for stated 25.4 Other accident only						· ·		<u> </u>			<u>-</u>	
25.5 All other (b)												
25.6 Totals (sum of Lines 25.1 26. Totals (Lines 24 + 24.1 +	,							<del> </del>		<u> </u>		
(b) For health business on indi		,	of persons i	nsured unde	er PPO	managed	d care i	products		and	number of	persons

24.AL

insured under indemnity only products



DIRECT BUSINESS IN THE NAIC Group Code 3891	STATE O	F Alaska		L	IFE II	NSUR/	ANC	F				YEAR 2020 y Code 15473
•				1		2			3	NAIC 4	Company	5 5
DIRECT F AND ANNUITY C	PREMIUMS CONSIDERA		Ord	inary		dit Life (Gr nd Individu		Gr	oup	Industria	d	Total
Life insurance												
<ol> <li>Annuity considerations</li> <li>Deposit-type contract fund</li> </ol>						XXX				XXX		
Other considerations												
5. Totals (Sum of Lines 1 to DIRECT DI	,		<u> </u>									
DIRECT DI POLICYHOLDERS/R		-		l								
Life insurance:												
<ul><li>6.1 Paid in cash or left on dep</li><li>6.2 Applied to pay renewal pre</li></ul>			[		<b> </b>			-				
6.3 Applied to provide paid-up								<b>-</b>			····	
endowment or premiu	ım-paying p	eriod			ļ							
6.5 Totals (Sum of Lines 6.1 t												
Annuities:	•											
<ul><li>7.1 Paid in cash or left on dep</li><li>7.2 Applied to provide paid-up</li></ul>	iositiosit											
7.3 Other			<b></b>			,			<del></del>			
7.4 Totals (Sum of Lines 7.1 t	to 7.3)						<b>.</b>					
Grand Totals (Lines 6.5 pl     DIRECT CLAIMS A		EITS PAID				$\blacksquare$			_			
Death benefits												
10. Matured endowments												
<ol> <li>Annuity benefits</li> <li>Surrender values and with</li> </ol>					T							
13. Aggregate write-ins for mis					***************************************							
and benefits paid												
<ol> <li>All other benefits, except a</li> <li>Totals</li> </ol>	accident and	d nealth										
DETAILS OF WRITE-INS												
1301.					ļ			-				
1302. 1303.												
1398. Summary of Line 13 from	overflow pa	ige										
1399. Totals (Lines 1301 thru 13 above)	303 plus 139	98) (Line 13										
anove)	п		<u> </u>			т			T		<del></del>	
	(	Ordinary		Credit Life and Individ	lual)		Grou	מו	In	dustrial		Total
DIRECT DEATH	1	2	3	4	<u>,</u>	5		6	7	8	9	10
BENEFITS AND MATURED	No. of		No. of Ind.Pols.						No. of		No. of	
ENDOWMENTS	Pols. &		& Gr.			No. of			Pols. &		Pols. &	
INCURRED  16. Unpaid December 31, prior	Certifs.	Amount	Certifs.	Amour	nt	Certifs.	А	Amount	Certifs.	Amount	Certifs.	Amount
year				-					ļ		-	
17. Incurred during current year Settled during current year:											-	
18.1 By payment in full						ļ						
18.2 By payment on												
compromised claims												
18.4 Reduction by compromise			<b></b>		•						-	
18.5 Amount rejected					<b>)</b>						-	
19. Unpaid Dec. 31, current			1									
year (16+17-18.6)	<u> </u>		+			<b>       </b>					ļ	
POLICY EXHIBIT					-	No. of Policies	_					
20. In force December 31, prior							1					
year21. Issued during year				.(a)					<del>-</del>			
22. Other changes to in force			1						†			
(Net)												
current year				(a)			$ldsymbol{ld}}}}}}}}}$					
<ul><li>(a) Includes Individual Credit Life I Includes Group Credit Life Inst</li></ul>		•		, (		•				rant waar \$		
Loans greater than 60 months			•			•				•		
· ·				NT AND		•				•		
				NI AND		2 2	130.		3	4		5
						_		Policyholde	er Dividends			-
					Dire	ect Premiu	ums		efunds to or Credited			Direct Losses
5 5 P. P. S. W. V.			Direct P	remiums	<u> </u>	Earned			Business	Direct Losses	Paid	Incurred
24. Group Policies (b)					<del> </del>			-				
premium (b)					ļ							
<ul><li>24.2 Credit (Group and Individue</li><li>24.3 Collectively renewable pole</li></ul>	,				<b></b>			-				
24.4 Medicare Title XVIII exem		` '					<b>-</b>					
Other Individual Policies:	•								<del></del>			
25.1 Non-cancelable (b)							<b>V</b> .					
<ul><li>25.2 Guaranteed renewable (b)</li><li>25.3 Non-renewable for stated</li></ul>											·····	
25.4 Other accident only												
25.5 All other (b)												

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

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



DIRECT BUSINESS IN THE NAIC Group Code 3891	STATE O	F Arizona		1	IFF II	NSUR	ΔNC	F				YEAR 2020 Code 15473
•				1		2			3	NAIC 4	Company	5 5
DIRECT F AND ANNUITY C	PREMIUMS CONSIDERA		Ord	inary		dit Life (G nd Individu		Gro	oup	Industria	ı	Total
Life insurance												
<ol> <li>Annuity considerations</li> <li>Deposit-type contract fund</li> </ol>						XXX				XXX		
Other considerations												
5. Totals (Sum of Lines 1 to	,											
DIRECT DI POLICYHOLDERS/RI												
Life insurance:	LI ONDO I	O MILMBLING										
6.1 Paid in cash or left on dep												
<ul><li>6.2 Applied to pay renewal pre</li><li>6.3 Applied to provide paid-up</li></ul>												
endowment or premiu	m-paying p	eriod										
6.4 Other 6.5 Totals (Sum of Lines 6.1 to												
Annuities:	0 0.4)											
7.1 Paid in cash or left on dep	osit											
7.2 Applied to provide paid-up 7.3 Other			<b>\</b>		•							
7.4 Totals (Sum of Lines 7.1 to			7 / 7				\					
8. Grand Totals (Lines 6.5 pl												
DIRECT CLAIMS A  9. Death benefits												
Matured endowments												
11. Annuity benefits												
<ol> <li>Surrender values and with</li> <li>Aggregate write-ins for mis</li> </ol>												
and benefits paid												
14. All other benefits, except a	accident and	d health										
15. Totals  DETAILS OF WRITE-INS											<del></del>	
1301.												
1302.												
1303 1398. Summary of Line 13 from	overflow pa	ine										
1399. Totals (Lines 1301 thru 13		•										
above)												
		Ordinant		Credit Life	ual\		Cross		In	duatrial		Total
DIRECT DEATH	1	Ordinary 2	(Group	and Individ	uai)	5	Grou	<u>р</u> 6	7	dustrial 8	9	Total 10
BENEFITS AND	NI f		No. of						N1 6		NI	
MATURED ENDOWMENTS	No. of Pols. &		Ind.Pols. & Gr.			No. of			No. of Pols. &		No. of Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amou	nt	Certifs.	Α	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior year												
17. Incurred during current year												
Settled during current year: 18.1 By payment in full												
18.2 By payment on												
compromised claims 18.3 Totals paid												
18.4 Reduction by compromise			V									
18.5 Amount rejected	•											
18.6 Total settlements 19. Unpaid Dec. 31, current							4 -					
year (16+17-18.6)												
POLICY EXHIBIT		_				No. of Policies						
20. In force December 31, prior						Policies						
year				(a)								
<ul><li>21. Issued during year</li><li>22. Other changes to in force</li></ul>												
(Net)												
current year				(a)								
(a) Includes Individual Credit Life I		•		, (		•					•	•
Includes Group Credit Life Insu Loans greater than 60 months			•							•		
Louis grouter than so months	at loods Be								, <b>ou</b> i	ioni your ψ		
				NT AND	HEA	ALTH II	120I		3	4		5
				'		2		Policyholde	er Dividends	-		3
					Dire	ect Premi	ıme		efunds to or Credited			Direct Losses
			Direct P	remiums	יווכ	Earned	۵1110		Business	Direct Losses	, Paid	Incurred
24. Group Policies (b)					<b></b>			<b> </b>				
24.1 Federal Employees Health premium (b)					ļ			ļ				
24.2 Credit (Group and Individu	ıal)				<b></b>			<b></b>				
<ul><li>24.3 Collectively renewable pol</li><li>24.4 Medicare Title XVIII exem</li></ul>		` '										
Other Individual Policies:	F Jiii Jidi				1					†		
25.1 Non-cancelable (b)							\. <b>.</b>		<b>I</b>			
<ul><li>25.2 Guaranteed renewable (b)</li><li>25.3 Non-renewable for stated</li></ul>							٠					
25.4 Other accident only												
25.5 All other (b)					ļ							

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

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



DIRECT BUSINESS IN THE	STATE O	F Arkansas		1.1	IFF II	NSURA	ANC	F				YEAR 2020
NAIC Group Code 3891				1		2			3	NAIC 4	Company	Code 15473 5
DIRECT F AND ANNUITY C	REMIUMS		Ordi	nary		dit Life (G nd Individu		Gr	oup	Industria	al	Total
Life insurance												
<ol> <li>Annuity considerations</li> <li>Deposit-type contract fund</li> </ol>						XXX				XXX		
Other considerations												
5. Totals (Sum of Lines 1 to	4)											
DIRECT DIV POLICYHOLDERS/RI												
Life insurance:	LI GIVEG IV	O MEMBERO										
6.1 Paid in cash or left on dep												
<ul><li>6.2 Applied to pay renewal pre</li><li>6.3 Applied to provide paid-up</li></ul>										<b>†</b>		
endowment or premiu	m-paying p	eriod										
6.4 Other 6.5 Totals (Sum of Lines 6.1 to												
Annuities:	0.17											
7.1 Paid in cash or left on dep												
7.2 Applied to provide paid-up 7.3 Other			<b>\</b>		•							
7.4 Totals (Sum of Lines 7.1 to			7 /				\					
8. Grand Totals (Lines 6.5 pl												
DIRECT CLAIMS A  9. Death benefits												
Matured endowments												
11. Annuity benefits					ļ							
<ol> <li>Surrender values and with</li> <li>Aggregate write-ins for mis</li> </ol>												
and benefits paid												
14. All other benefits, except a	accident and	d health										
15. Totals  DETAILS OF WRITE-INS											+	
1301.												
1302.												
1303 1398. Summary of Line 13 from												
1399. Totals (Lines 1301 thru 13		•										
above)												
		N		Credit Life			0			al. ratulal		Tatal
DIRECT DEATH	1	Ordinary 2	(Group	and Individ	uai)	5	Grou	<u>ір</u> 6	7	dustrial 8	9	Total 10
BENEFITS AND			No. of						N		N1	
MATURED ENDOWMENTS	No. of Pols. &		Ind.Pols. & Gr.			No. of			No. of Pols. &		No. of Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amou	nt	Certifs.	Α	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior year												
17. Incurred during current year												
Settled during current year: 18.1 By payment in full												
18.2 By payment on												
compromised claims												
18.4 Reduction by compromise												
18.5 Amount rejected	•		<b></b>								-	
18.6 Total settlements							<u>-</u>					
year (16+17-18.6)												
						No. of						
POLICY EXHIBIT 20. In force December 31, prior						Policies						
year				(a)								
<ul><li>21. Issued during year</li><li>22. Other changes to in force</li></ul>												
(Net)												
23. In force December 31 of current year				(a)								
(a) Includes Individual Credit Life I				, (							*	*
Includes Group Credit Life Insu Loans greater than 60 months			•			•				•		
Loans greater than 60 months	at issue bu				•				, Cui	ieiii yeai \$		
			CCIDE	NT AND	HEA	LTH IN	NSU		3	T 4	1	5
				1		2			ડ er Dividends			5
					D:-	4 D:		Paid, Re	efunds to			Discot I seese
			Direct P	remiums	Dire	ect Premiu Earned	JIIIS		or Credited Business	Direct Losses	s Paid	Direct Losses Incurred
24. Group Policies (b)												
24.1 Federal Employees Health premium (b)												
24.2 Credit (Group and Individu	ıal)				Ī					I		
<ul><li>24.3 Collectively renewable pol</li><li>24.4 Medicare Title XVIII exemptor</li></ul>			<b></b>		L					<b></b>		
Other Individual Policies:	ot nom State	c lanes of 166	<b></b>		1				<del></del>	<b>†</b>		
25.1 Non-cancelable (b)							\ <b>.</b>					
25.2 Guaranteed renewable (b)			<b>\</b>					.   .		<b>_</b>		
25.3 Non-renewable for stated 25.4 Other accident only			<b>-</b>							İ		
25.5 All other (b)												
25.6 Totals (sum of Lines 25.1	to 25.5)				1			I		1		

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

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



DIRECT BUSINESS IN THE NAIC Group Code 3891	STATE O	F California		LI	IFE II	NSUR/	ANC	E				'EAR 2020 Code 15473
	PREMIUMS			1		2 dit Life (G			3	4	Company	5
AND ANNUITY O	CONSIDERA	ATIONS		nary		id Individu		Gre	oup	Industrial	ı	Total
Life insurance     Annuity considerations												
Deposit-type contract fund						XXX						
Other considerations     Totals (Sum of Lines 1 to												
DIRECT DI	VIDENDS T	-										
POLICYHOLDERS/R Life insurance:	EFUNDS TO	O MEMBERS										
6.1 Paid in cash or left on dep												
<ul><li>6.2 Applied to pay renewal pro</li><li>6.3 Applied to provide paid-up</li></ul>	additions o	r shorten the										
endowment or premit 6.4 Other										-		
6.5 Totals (Sum of Lines 6.1 t Annuities:	to 6.4)											
7.1 Paid in cash or left on dep 7.2 Applied to provide paid-up	osit											
7.3 Other					7 /							
7.4 Totals (Sum of Lines 7.1 t 8. Grand Totals (Lines 6.5 p					)		<u> </u>					
DIRECT CLAIMS A	AND BENEF	-					•					
Death benefits  10. Matured endowments												
11. Annuity benefits												
<ul><li>12. Surrender values and with</li><li>13. Aggregate write-ins for mi</li></ul>	scellaneous	direct claims										
and benefits paid												
15. Totals  DETAILS OF WRITE-INS												
1301												
1302.												
1303 1398. Summary of Line 13 from												
1399. Totals (Lines 1301 thru 13 above)	303 plus 139	98) (Line 13										
,				Credit Life				•		1		
DIRECT DEATH	1	Ordinary 2	(Group	and Individ	ual)	5	Grou	ір 6	7 Ir	ndustrial 8	9	Total 10
BENEFITS AND MATURED		-	No. of					Ü		Ü		
ENDOWMENTS INCURRED	No. of Pols. & Certifs.	Amount	Ind.Pols. & Gr. Certifs.	Amoui	nt.	No. of Certifs.	,	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior		Amount	Ocitiis.	Ailloui		Octus.		Amount	Certiis.	Amount	Certiis.	Amount
year 17. Incurred during current year												
Settled during current year: 18.1 By payment in full												
18.2 By payment on												
compromised claims			<del></del>									
18.4 Reduction by compromise			V									
18.5 Amount rejected			<b>\</b>									
19. Unpaid Dec. 31, current							7					
year (16+17-18.6)						No. of						
POLICY EXHIBIT 20. In force December 31, prior						Policies						
year21. Issued during year				(a)								
22. Other changes to in force												
(Net)				(a)		***************************************						
current year (a) Includes Individual Credit Life		•		(a), (		•					1	1
Includes Group Credit Life Inst Loans greater than 60 months			•			•				•		
<u> </u>				NT AND	•				,			
		,		1		2			3 ar Dividends	4		5
								Paid, Re	efunds to			D'I.
			Direct P	remiums	Dire	ect Premiu Earned	ums		or Credited Business	Direct Losses	Paid	Direct Losses Incurred
24. Group Policies (b)								+				
premium (b)								-				
24.3 Collectively renewable po	licies/certific	ates (b)										
24.4 Medicare Title XVIII exem Other Individual Policies:	pt from state	e taxes or fee	<b>\ </b>									
25.1 Non-cancelable (b)							\. <b>.</b>					
<ul><li>25.2 Guaranteed renewable (b</li><li>25.3 Non-renewable for stated</li></ul>												
25.4 Other accident only												
25.5 All other (b)												
26. Totals (Lines 24 + 24.1 +	24.2 + 24.3	+ 24.4 + 25.6)			DE 1		1					
(b) For health business on indi	icated lines	report: Number	of persons i	nsured unde	er PPO	managed	d care	products		and	number of	persons

24.CA

insured under indemnity only products



DIRECT BUSINESS IN THE	STATE O	F Colorado		11	IFF II	NSURA	ANC	F				YEAR 2020
NAIC Group Code 3891			,	1		2			3	NAIC 4	Company	Code 15473 5
DIRECT F AND ANNUITY C	REMIUMS ONSIDERA		Ordi	inary		dit Life (G ıd Individu		Gr	oup	Industria	al I	Total
Life insurance												
<ol> <li>Annuity considerations</li> <li>Deposit-type contract fund</li> </ol>						XXX				XXX		
Other considerations												
5. Totals (Sum of Lines 1 to	,											
DIRECT DIV POLICYHOLDERS/RI												
Life insurance:												
<ul><li>6.1 Paid in cash or left on dep</li><li>6.2 Applied to pay renewal pre</li></ul>												
6.3 Applied to provide paid-up	additions o	r shorten the										
endowment or premiu 6.4 Other					T							
6.5 Totals (Sum of Lines 6.1 to												
Annuities: 7.1 Paid in cash or left on dep	ooit											
7.1 Paid in cash of left of dep 7.2 Applied to provide paid-up												
7.3 Other			<b></b>		1	👠						
7.4 Totals (Sum of Lines 7.1 to 8. Grand Totals (Lines 6.5 pl	,						<u> </u>					
DIRECT CLAIMS A		ITS PAID										
9. Death benefits												
Matured endowments     Annuity benefits								-				
12. Surrender values and with	drawals for	life contracts			I							
<ol> <li>Aggregate write-ins for mis and benefits paid</li> </ol>												
14. All other benefits, except a												
15. Totals  DETAILS OF WRITE-INS												
1301												
1302.												
1303 1398. Summary of Line 13 from												
1399. Totals (Lines 1301 thru 13		•						· •				
above)			<u> </u>									
		Ordinary		Credit Life and Individ	lual)		Grou	ın	In	dustrial		Total
DIRECT DEATH	1	2	3	4	iuai)	5	Giou	6 6	7	8	9	10
BENEFITS AND MATURED	No. of		No. of Ind.Pols.						No. of		No. of	
ENDOWMENTS	Pols. &		& Gr.			No. of			Pols. &		Pols. &	
INCURRED  16. Unpaid December 31, prior	Certifs.	Amount	Certifs.	Amou	nt	Certifs.	P	Amount	Certifs.	Amount	Certifs.	Amount
year												
17. Incurred during current year Settled during current year:												
18.1 By payment in full												
18.2 By payment on compromised claims	,											
18.3 Totals paid												
18.4 Reduction by compromise 18.5 Amount rejected			<b>A</b>		1							
18.6 Total settlements						<i>\</i> \ \ \ '	Ţ					
19. Unpaid Dec. 31, current year (16+17-18.6)					J							
year (10117-10.0)						No. of						
POLICY EXHIBIT 20. In force December 31, prior						Policies						
year				(a)								
<ul><li>21. Issued during year</li><li>22. Other changes to in force</li></ul>												
(Net)												
23. In force December 31 of current year				(a)								
(a) Includes Individual Credit Life I	nsurance p	rior year \$		, (	current	year \$						<del>- !</del>
Includes Group Credit Life Insu Loans greater than 60 months			•			•				•		
Loans greater than oo months	at issue DC				•				, Cui	ient year ψ		
			CCIDE	NT AND	HEA	LTH II	งอบโ		3	4	1	5
				•		2		Policyholde	er Dividends	-		J
					Dire	ect Premiu	ıms		efunds to or Credited			Direct Losses
04 0 5 5 5 5			Direct P	remiums	J.,,	Earned	.,		Business	Direct Losses	s Paid	Incurred
24. Group Policies (b)			ļ									
premium (b)					ļ							
<ul><li>24.2 Credit (Group and Individu</li><li>24.3 Collectively renewable pol</li></ul>					J			· <del> </del>		<b>!</b>		
24.4 Medicare Title XVIII exemp					<b>Z</b>							
Other Individual Policies:												
25.1 Non-cancelable (b)							/.					
25.3 Non-renewable for stated	reasons onl	y (b)			<b>J</b>		V.					
25.4 Other accident only					Ţ				<del></del>	<u> </u>		
25.5 All other (b)					<b>†</b>			+		-		

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

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



DIRECT BUSINESS IN THE STATE OF Connecticut DURING THE YEAR 2020 LIFE INSURANCE NAIC Group Code 3891 NAIC Company Code 15473 3 2 Credit Life (Group **DIRECT PREMIUMS** AND ANNUITY CONSIDERATIONS Ordinary and Individual) Industrial Group Total Life insurance Annuity considerations 3 Deposit-type contract funds XXX XXX 4. Other considerations Totals (Sum of Lines 1 to 4) 5. DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS Life insurance: 6.1 Paid in cash or left on deposit 6.2 Applied to pay renewal premiums .. Applied to provide paid-up additions or shorten the 6.3 endowment or premium-paying period 64 Other 6.5 Totals (Sum of Lines 6.1 to 6.4) Annuities: Paid in cash or left on deposit 7.1 7.2 Applied to provide paid-up annuities 7.3 Other .. Totals (Sum of Lines 7.1 to 7.3) 8. Grand Totals (Lines 6.5 plus 7.4) DIRECT CLAIMS AND BENEFITS PAID 9. Death benefits Matured endowments 11 Annuity benefits . 12. Surrender values and withdrawals for life contracts Aggregate write-ins for miscellaneous direct claims 13 and benefits paid 14. All other benefits, except accident and health 15 Totals DETAILS OF WRITE-INS 1301. 1302. 1303 1398. Summary of Line 13 from overflow page Totals (Lines 1301 thru 1303 plus 1398) (Line 13 1399. above) Credit Life Ordinary (Group and Individual) Industrial Group Total DIRECT DEATH 5 9 10 BENEFITS AND MATURED No. of No. of Pols. & No. of Pols. & Ind.Pols No. of **ENDOWMENTS** & Gr. INCURRED Certifs. Amount Certifs Amount Certifs Amount Certifs. Amount Certifs Amount 16. Unpaid December 31, prior year ......17. Incurred during current year Settled during current year: 18.1 By payment in full 18.2 By payment on compromised claims 18.3 Totals paid 18.4 Reduction by compromise 18.5 Amount rejected 18.6 Total settlements 19. Unpaid Dec. 31. current year (16+17-18.6) **POLICY EXHIBIT** 20. In force December 31, prior year (a) 21. Issued during year 22. Other changes to in force (Net) 23. In force December 31 of current year (a) Includes Individual Credit Life Insurance prior year \$ .. current vear \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$ Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ .., current year \$ **ACCIDENT AND HEALTH INSURANCE** 5 Policyholder Dividends Paid, Refunds to Direct Premiums Members or Credited **Direct Losses** Direct Premiums Ea<u>rned</u> on Direct Business Direct Losses Paid Incurred 24 Group Policies (b) 24.1 Federal Employees Health Benefits Plan premium (b) Credit (Group and Individual) Collectively renewable policies/certificates (b) ...... Medicare Title XVIII exempt from state taxes or fee 24.3 24.4 Other Individual Policies: 25.1 Non-cancelable (b). 25.2 Guaranteed renewable (b) 25.3 Non-renewable for stated reasons only (b) Other accident only .. 25.5 All other (b). 25.6 Totals (sum of Lines 25.1 to 25.5)

24.CT

and number of persons

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

insured under indemnity only products

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

26.



DIRECT BUSINESS IN THE NAIC Group Code 3891	STATE O	F Delaware		LI	IFE II	NSUR/	ANCI	E	•			YEAR 20 y Code 1	
DIRECT F	PREMIUMS	3		1	Cre	2 dit Life (Gı	roup	3	3	4		5	
AND ANNUITY C	ONSIDER	ATIONS	Ord	inary		d Individu		Gro	oup	Industria	ı	Total	
Life insurance     Annuity considerations								<b>†</b>					
<ol><li>Deposit-type contract fund</li></ol>	ls					XXX				xxx			
Other considerations  Totals (Cum of Lines 1 to													
5. Totals (Sum of Lines 1 to 4	,	го											
POLICYHOLDERS/RI		-											
Life insurance: 6.1 Paid in cash or left on dep	osit												
6.2 Applied to pay renewal pre													
6.3 Applied to provide paid-up													
endowment or premiu 6.4 Other													
6.5 Totals (Sum of Lines 6.1 to	o 6.4)												
Annuities: 7.1 Paid in cash or left on dep	osit												
7.2 Applied to provide paid-up	annuities .												
7.3 Other	. 7 2)		<b>.</b>			👠			<b></b>				
8. Grand Totals (Lines 6.5 pl							<i>A</i>						
DIRECT CLAIMS A		FITS PAID					┫						
Death benefits      Metured and autments					Ī				<del></del>				
Matured endowments     Annuity benefits			L		<u> </u>			İ		<u> </u>			
<ol><li>Surrender values and with</li></ol>	idrawals foi	r life contracts											
Aggregate write-ins for mis     and benefits paid													
14. All other benefits, except a								<b>.</b>					
15. Totals  DETAILS OF WRITE-INS													
1301.													
1302.													
1303 1398. Summary of Line 13 from													
1399. Totals (Lines 1301 thru 13		•						<del> </del>					
above)													
		Ordinary		Credit Life and Individ	ual)		Grou	n	le.	ndustrial		Total	
DIRECT DEATH	1	2	3	4	uaij	5	Giou	<u>р</u> 6	7	8	9	10(a)	0
BENEFITS AND MATURED	No. of		No. of Ind.Pols.						No. of		No. of		
ENDOWMENTS	Pols. &		& Gr.			No. of			Pols. &		Pols. &		
INCURRED  16. Unpaid December 31, prior	Certifs.	Amount	Certifs.	Amou	nt	Certifs.	А	mount	Certifs.	Amount	Certifs.	Amo	ount
year													
17. Incurred during current year Settled during current year:													
18.1 By payment in full													
18.2 By payment on compromised claims													
18.3 Totals paid													
18.4 Reduction by compromise			<b>\</b>										
18.5 Amount rejected 18.6 Total settlements	-		<b>1</b>										
19. Unpaid Dec. 31, current	*						4						
year (16+17-18.6)			-			No. of	1						
POLICY EXHIBIT						Policies							
20. In force December 31, prior year				(a)									
21. Issued during year						Ī							
22. Other changes to in force (Net)			1										
23. In force December 31 of				(-)									
current year (a) Includes Individual Credit Life I	nsurance n	prior year \$		(a), (	current	year \$					1	1	
Includes Group Credit Life Insu	urance Loa	ns less than or ed	qual to 60 m	onths at iss	ue, prio	or year \$				•			
Loans greater than 60 months	at issue Bl								, cu	rrent year \$			
			CCIDE	NT AND	HEA		ISUI			T .	1		
				ı		2		Policyholde		4		5	
					Die	ect Premiu	ıme	Paid, Re	efunds to			Direct Los	2000
			Direct P	remiums	טונט	Earned	di 115		Business	Direct Losses	Paid	Incurre	
24. Group Policies (b)				<del>_</del> _	ļ			ļ	<del>_</del> _			<del>_</del> _	
24.1 Federal Employees Health premium (b)					ļ			<u> </u>		ļ			
<ul><li>24.2 Credit (Group and Individu</li><li>24.3 Collectively renewable pol</li></ul>					<b> </b>			<b> </b>					
24.4 Medicare Title XVIII exemp		` '			<b></b>			1					
Other Individual Policies:					A								
25.1 Non-cancelable (b)			7			-17	\. <u> </u>		<b>I</b>				
25.3 Non-renewable for stated						- T				<u> </u>	····		
25.4 Other accident only													
25.5 All other (b)					<b></b>			<b>-</b>					
26. Totals (Lines 24 + 24.1 + 2					<b></b>			†		·			
(b) For health business on indi			of persons i	insured unde	er PPO	managed	l care	oroducts		and	l number o	f persons	

24.DE

insured under indemnity only products



DIRECT BUSINESS IN THE STATE OF District of Columbia DURING THE YEAR 2020 LIFE INSURANCE NAIC Group Code 3891 NAIC Company Code 15473 3 2 Credit Life (Group **DIRECT PREMIUMS** AND ANNUITY CONSIDERATIONS Ordinary and Individual) Industrial Group Total Life insurance Annuity considerations 3 Deposit-type contract funds XXX XXX 4. Other considerations Totals (Sum of Lines 1 to 4) 5. DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS Life insurance: 6.1 Paid in cash or left on deposit 6.2 Applied to pay renewal premiums .. Applied to provide paid-up additions or shorten the 6.3 endowment or premium-paying period 64 Other 6.5 Totals (Sum of Lines 6.1 to 6.4) Annuities: Paid in cash or left on deposit 7.1 7.2 Applied to provide paid-up annuities 7.3 Other .. Totals (Sum of Lines 7.1 to 7.3) 8. Grand Totals (Lines 6.5 plus 7.4) DIRECT CLAIMS AND BENEFITS PAID 9. Death benefits 10. Matured endowments 11 Annuity benefits . 12. Surrender values and withdrawals for life contracts Aggregate write-ins for miscellaneous direct claims 13 and benefits paid 14. All other benefits, except accident and health 15 Totals DETAILS OF WRITE-INS 1301. 1302. 1303 Summary of Line 13 from overflow page 1398. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 1399. above) Credit Life Ordinary (Group and Individual) Industrial Group Total DIRECT DEATH 5 9 10 BENEFITS AND MATURED No. of No. of Pols. & No. of Pols. & Ind.Pols No. of **ENDOWMENTS** & Gr. INCURRED Certifs. Amount Certifs Amount Certifs Amount Certifs. Amount Certifs Amount 16. Unpaid December 31, prior year ......17. Incurred during current year Settled during current year: 18.1 By payment in full 18.2 By payment on compromised claims 18.3 Totals paid 18.4 Reduction by compromise 18.5 Amount rejected 18.6 Total settlements 19. Unpaid Dec. 31. current year (16+17-18.6) **POLICY EXHIBIT** 20. In force December 31, prior year (a) 21. Issued during year 22. Other changes to in force (Net) 23. In force December 31 of current year (a) Includes Individual Credit Life Insurance prior year \$ .. current vear \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$ Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ .., current year \$ **ACCIDENT AND HEALTH INSURANCE** 5 Policyholder Dividends Paid, Refunds to Direct Premiums Members or Credited **Direct Losses** Direct Premiums Ea<u>rned</u> on Direct Business Direct Losses Paid Incurred 24 Group Policies (b) 24.1 Federal Employees Health Benefits Plan premium (b) Credit (Group and Individual) Collectively renewable policies/certificates (b) ...... Medicare Title XVIII exempt from state taxes or fee 24.3 24.4 Other Individual Policies: 25.1 Non-cancelable (b). 25.2 Guaranteed renewable (b) 25.3 Non-renewable for stated reasons only (b) Other accident only .. 25.5 All other (b). 25.6 Totals (sum of Lines 25.1 to 25.5)

24.DC

and number of persons

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

insured under indemnity only products

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

26.



DIRECT BUSINESS IN THE	STATE O	F Florida			IFF II	NSURA	ANC	F				YEAR 2020
NAIC Group Code 3891				1		2			3	NAIC 4	Company	/ Code 15473 5
DIRECT F AND ANNUITY C	REMIUMS ONSIDERA		Ordi	nary		dit Life (G nd Individu		Gr	oup	Industria	al	Total
Life insurance												
<ol> <li>Annuity considerations</li> <li>Deposit-type contract fund</li> </ol>						XXX				XXX		
Other considerations												
5. Totals (Sum of Lines 1 to	,											
DIRECT DIV POLICYHOLDERS/RI												
Life insurance:												
<ul><li>6.1 Paid in cash or left on dep</li><li>6.2 Applied to pay renewal pre</li></ul>								-				
6.3 Applied to provide paid-up												
endowment or premiu 6.4 Other					I							
6.5 Totals (Sum of Lines 6.1 to												
Annuities:	11											
<ul><li>7.1 Paid in cash or left on dep</li><li>7.2 Applied to provide paid-up</li></ul>												
7.3 Other		······			<b>N</b>							
<ul><li>7.4 Totals (Sum of Lines 7.1 to</li><li>8. Grand Totals (Lines 6.5 pl</li></ul>	,						<u> </u>					
DIRECT CLAIMS A		ITS PAID					$\blacksquare$					
Death benefits												
Matured endowments     Annuity benefits												
12. Surrender values and with	drawals for	life contracts								İ		
Aggregate write-ins for mis     and benefits paid												
and benefits paid14. All other benefits, except a								<u> </u>		İ		
15. Totals												
DETAILS OF WRITE-INS 1301.												
1302.												
1303.												
1398. Summary of Line 13 from 1399. Totals (Lines 1301 thru 13		•						+		<del> </del>		
above)			<u> </u>									
		Sandia a a .		Credit Life			0	_	1	الماسلسان		Tatal
DIRECT DEATH	1	Ordinary 2	(Group	and Individ	uai)	5	Grou	<u>ір</u> 6	7 In	idustrial 8	9	Total 10
BENEFITS AND MATURED	No. of		No. of						No. of		No. of	
ENDOWMENTS	No. of Pols. &		Ind.Pols. & Gr.			No. of			No. of Pols. &		No. of Pols. &	
INCURRED  16. Unpaid December 31, prior	Certifs.	Amount	Certifs.	Amou	nt	Certifs.	Α	Amount	Certifs.	Amount	Certifs.	Amount
year												
<ol> <li>Incurred during current year</li> <li>Settled during current year:</li> </ol>												
18.1 By payment in full												
18.2 By payment on												
compromised claims												
18.4 Reduction by compromise			<b>\</b>									
18.5 Amount rejected 18.6 Total settlements							-					
19. Unpaid Dec. 31, current												
year (16+17-18.6)			+			NO of						
POLICY EXHIBIT						Policies						
20. In force December 31, prior year				(a)								
21. Issued during year												
22. Other changes to in force (Net)												
23. In force December 31 of				(-)								
current year (a) Includes Individual Credit Life I	nsurance p	rior year \$		(a), (	current	year \$					1	
Includes Group Credit Life Insu	ırance Loar	ns less than or ed	•			•				•		
Loans greater than 60 months	at issue BU	JI NOI GREATE	ER THAN 12	20 MONTHS	s, prior	year \$			, cui	rrent year \$		
			CCIDE	NT AND	HEA		NSU					
			<u> </u>	1		2			3 er Dividends	4		5
					Dis	aat Dramii		Paid, Re	efunds to			Direct League
			Direct P	remiums	Dire	ect Premiu Earned	JIIIS		or Credited Business	Direct Losses	s Paid	Direct Losses Incurred
24. Group Policies (b)												
24.1 Federal Employees Health premium (b)					ļ					<u> </u>		
24.2 Credit (Group and Individu	ıal)				ļ							
<ul><li>24.3 Collectively renewable pol</li><li>24.4 Medicare Title XVIII exemptor</li></ul>												
Other Individual Policies:					1					***************************************		
25.1 Non-cancelable (b)							\.					
<ul><li>25.2 Guaranteed renewable (b)</li><li>25.3 Non-renewable for stated</li></ul>							₩.			-		
25.4 Other accident only												
25.5 All other (b)								-				

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

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



DIRECT BUSINESS IN THE S NAIC Group Code 3891	STATE OF	Georgia		LI	IFE II	NSUR/	ANC	E				EAR 2020 Code 15473
·	REMIUMS		,			2 dit Life (G			3	4	Company	5
AND ANNUITY C	ONSIDERA		Ordi	nary		nd Individu		Gro	oup	Industria	ı	Total
Life insurance     Annuity considerations												
Deposit-type contract funds	s					XXX				XXX		
Other considerations      Totals (Sum of Lines 1 to 4)												
DIRECT DIV	IDENDS T											
POLICYHOLDERS/RE Life insurance:	FUNDS TO	MEMBERS										
6.1 Paid in cash or left on depo		F										
<ul><li>6.2 Applied to pay renewal pre</li><li>6.3 Applied to provide paid-up</li></ul>												
endowment or premiur	m-paying pe	eriod										
6.4 Other												
Annuities:	,											
<ul><li>7.1 Paid in cash or left on deport</li><li>7.2 Applied to provide paid-up</li></ul>			····									
7.3 Other			<b></b>		7 /							
7.4 Totals (Sum of Lines 7.1 to 8. Grand Totals (Lines 6.5 plu							<u> </u>					
DIRECT CLAIMS A		ITS PAID	$\neg$			+	┫					
9. Death benefits												
Matured endowments      Annuity benefits		T T						<b>-</b>				
12. Surrender values and with	drawals for	life contracts										
Aggregate write-ins for mis and benefits paid												
<ol><li>All other benefits, except a</li></ol>												
15. Totals  DETAILS OF WRITE-INS												
1301.					ļ			<b>.</b>		ļ		
1302. 1303.												
1398. Summary of Line 13 from o	overflow pag	ge										
1399. Totals (Lines 1301 thru 130 above)	03 plus 139	8) (Line 13										
3.20107		l		Credit Life	ı			I				
DIDECT DEATH		rdinary	(Group	and Individ	ual)		Grou			ndustrial		Total
DIRECT DEATH BENEFITS AND	1	2	3 No. of	4		5		6	7	8	9	10
MATURED ENDOWMENTS	No. of Pols. &		Ind.Pols. & Gr.			No. of			No. of Pols. &		No. of Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amou	nt	Certifs.	Α	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior year												
17. Incurred during current year												
Settled during current year: 18.1 By payment in full												
18.2 By payment on compromised claims												
18.3 Totals paid												
18.4 Reduction by compromise 18.5 Amount rejected			\		•	- \-						
18.6 Total settlements							Ţ.					
19. Unpaid Dec. 31, current year (16+17-18.6)												
						No. of						
POLICY EXHIBIT 20. In force December 31, prior						Policies						
year				(a)								
<ul><li>21. Issued during year</li><li>22. Other changes to in force</li></ul>												
(Net)												
current year				(a)								
(a) Includes Individual Credit Life In Includes Group Credit Life Insu		•		onths at iss						rrent vear \$		
Loans greater than 60 months			•			•				•		
		A	CCIDE	NT AND	HEA		<u>IS</u> UI					
			-	1		2		Policyholde	3 er Dividends	4		5
					۲.	oot D ··	ıms	Paid, Re	efunds to			Direct Lease
			Direct P	remiums	Dire	ect Premiu Earned	ums		or Credited Business	Direct Losses	Paid	Direct Losses Incurred
24. Group Policies (b)					ļ <u>-</u>			ļ				<del></del>
premium (b)					ļ					-		
<ul><li>24.2 Credit (Group and Individu</li><li>24.3 Collectively renewable poli</li></ul>			_		<u> </u>			† <u> </u>				
24.4 Medicare Title XVIII exemp			\ <b>I</b>									
Other Individual Policies: 25.1 Non-cancelable (b)												
25.2 Guaranteed renewable (b)							<b>Y</b>					
25.3 Non-renewable for stated r 25.4 Other accident only								- <b>                                   </b>	<b></b>			
25.5 All other (b)		r i										
25.6 Totals (sum of Lines 25.1 t 26. Totals (Lines 24 + 24.1 + 2	,				ļ							
		+ // / + 25 6)			1			1		I		

24.GA

insured under indemnity only products



DIRECT BUSINESS IN THE NAIC Group Code 3891	STATE C	OF Hawaii		LI	IFE I	NSURA	ANC	E				EAR 2020 Code 15473
DIRECT F	PREMIUM:	s		1	Cre	2 dit Life (G	roup	;	3	4		5
AND ANNUITY C	ONSIDER	ATIONS	Ord	inary		nd Individu		Gro	oup	Industria	al	Total
Life insurance     Annuity considerations										<u> </u>		
<ol><li>Deposit-type contract fund</li></ol>	s					XXX				XXX		
Other considerations      Totals (Sum of Lines 1 to 4)												
DIRECT DIV	,	то										
POLICYHOLDERS/RE	EFUNDS 1	TO MEMBERS										
Life insurance: 6.1 Paid in cash or left on dep	osit											
6.2 Applied to pay renewal pre	emiums											
6.3 Applied to provide paid-up endowment or premiu												
6.4 Other												
6.5 Totals (Sum of Lines 6.1 to	0 6.4)											
Annuities: 7.1 Paid in cash or left on dep	osit					_	_					
7.2 Applied to provide paid-up			<b>\</b>						<b></b>			
7.3 Other			<b>\</b>							<del> </del>		
8. Grand Totals (Lines 6.5 pl							4					
DIRECT CLAIMS A		-				1						
Death benefits  10. Matured endowments							<u></u>			<b></b>		
11. Annuity benefits								1		İ		
12. Surrender values and with												
<ol> <li>Aggregate write-ins for mis and benefits paid</li> </ol>												
14. All other benefits, except a												
15. Totals  DETAILS OF WRITE-INS												
1301.												
1302.												
1303 1398. Summary of Line 13 from (	overflow n	age										
1399. Totals (Lines 1301 thru 13		•										
above)												
		Ordinary		Credit Life and Individe	ual)		Grou	D	Ir	dustrial		Total
DIRECT DEATH	1	2	3	4		5		6	7	8	9	10
BENEFITS AND MATURED	No. of		No. of Ind.Pols.						No. of		No. of	
ENDOWMENTS INCURRED	Pols. & Certifs.	Amount	& Gr. Certifs.	Amoui	ot	No. of Certifs.	,	Amount	Pols. & Certifs.	Amount	Pols. & Certifs.	Amount
16. Unpaid December 31, prior	Certiis.	Amount	Certiis.	Amou		Certiis.	,	anount	Certiis.	Amount	Certiis.	Amount
year  17. Incurred during current year												
Settled during current year:												
18.1 By payment in full												
18.2 By payment on compromised claims	,											
18.3 Totals paid			·									
18.4 Reduction by compromise 18.5 Amount rejected			<b>\</b>		<b>1</b>	-						
18.6 Total settlements												
19. Unpaid Dec. 31, current year (16+17-18.6)												
						No. of						
POLICY EXHIBIT 20. In force December 31, prior						Policies						
year				(a)								
<ul><li>21. Issued during year</li><li>22. Other changes to in force</li></ul>						ļ					-	
(Net)									ļ		-	
<ol> <li>In force December 31 of current year</li> </ol>				(a)								
(a) Includes Individual Credit Life I		•		, 0		•					•	•
Includes Group Credit Life Insu Loans greater than 60 months			•			•				•		
•				NT AND		•			ŕ	•		
		<i>F</i>		1		2	100	;	3	4		5
								Policyholde	er Dividends efunds to	3		
					Dir	ect Premiu	ums	Members	or Credited			Direct Losses
24. Group Policies (b)			Direct P	remiums		Earned		on Direct	Business	Direct Losses	s Paid	Incurred
24.1 Federal Employees Health	Benefits I	Plan	h		·····			<b>†</b>		<b>†</b>		
premium (b)24.2 Credit (Group and Individu								<b>†</b>		<b></b>		
24.3 Collectively renewable pol	icies/certif	icates (b)										
24.4 Medicare Title XVIII exemp	ot from sta	te taxes or fee	<b>\ </b>									
Other Individual Policies: 25.1 Non-cancelable (b)						1/						
25.2 Guaranteed renewable (b)												
25.3 Non-renewable for stated			<b></b>							<b>-</b>		
25.4 Other accident only					L							
25.6 Totals (sum of Lines 25.1	to 25.5)				[			Ţ				
26. Totals (Lines 24 + 24.1 + 2					- 55.0	\					d manufacture of	
(b) For health business on indi-	cated lines	report: Number	of persons i	nsured under	er PPC	managed	care	products		and	number of	persons

insured under indemnity only products



DIRECT BUSINESS IN THE	STATE O	F Idaho		11	IFF II	NSURA	ANC	=				/EAR 2020
NAIC Group Code 3891				1		2			3	NAIC 4	Company	Code 15473 5
DIRECT F AND ANNUITY C	PREMIUMS ONSIDERA		Ordi	inary		dit Life (G nd Individu		Gr	oup	Industria	al	Total
Life insurance												
<ol> <li>Annuity considerations</li> <li>Deposit-type contract fund</li> </ol>						XXX				XXX		
Other considerations												
5. Totals (Sum of Lines 1 to	4)											
DIRECT DIV POLICYHOLDERS/RI												
Life insurance:	LI ONDO I	O MILIMBLING										
6.1 Paid in cash or left on dep												
<ul><li>6.2 Applied to pay renewal pre</li><li>6.3 Applied to provide paid-up</li></ul>												
endowment or premiu	m-paying p	eriod								<b></b>		
6.4 Other 6.5 Totals (Sum of Lines 6.1 to												
Annuities:	0 0. 1/											
7.1 Paid in cash or left on dep												
7.2 Applied to provide paid-up 7.3 Other			<b>\</b>		•							
7.4 Totals (Sum of Lines 7.1 to			X X				\					
8. Grand Totals (Lines 6.5 pl												
DIRECT CLAIMS A  9. Death benefits		-										
10. Matured endowments										İ		
11. Annuity benefits					ļ							
<ol> <li>Surrender values and with</li> <li>Aggregate write-ins for mis</li> </ol>												
and benefits paid												
14. All other benefits, except a	accident and	d health										
15. Totals  DETAILS OF WRITE-INS											+	
1301.												
1302.										<b>-</b>		
1303 1398. Summary of Line 13 from												
1399. Totals (Lines 1301 thru 13		•										
above)												
		Nadia		Credit Life			0			الماسلسان		Tatal
DIRECT DEATH	1	Ordinary 2	(Group	and Individ	uai)	5	Grou	<u>р</u> 6	7	idustrial 8	9	Total 10
BENEFITS AND			No. of									
MATURED ENDOWMENTS	No. of Pols. &		Ind.Pols. & Gr.			No. of			No. of Pols. &		No. of Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amou	nt	Certifs.	Α	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior year												
17. Incurred during current year												
Settled during current year: 18.1 By payment in full												
18.2 By payment on												
compromised claims 18.3 Totals paid												
18.4 Reduction by compromise												
18.5 Amount rejected			<b></b>						<u> </u>		-	
18.6 Total settlements												
year (16+17-18.6)						<b>1</b>						
						No. of						
POLICY EXHIBIT 20. In force December 31, prior						Policies						
year				(a)					ļ			
<ul><li>21. Issued during year</li><li>22. Other changes to in force</li></ul>						<del> </del>			<del> </del>			
(Net)												
23. In force December 31 of current year				(a)								
(a) Includes Individual Credit Life I	nsurance p	rior year \$		, (	current	year \$						<del>"</del>
Includes Group Credit Life Insu			•			•				•		
Loans greater than 60 months	at issue BC	II NOI GREATE	ER THAN 1.	20 MONTHS	s, prior	year \$			, cu	rrent year \$		
			CCIDE	NT AND	HEA		NSU			Т		
				1		2			3 er Dividends	4		5
								Paid, Re	efunds to			
			Direct P	remiums	Dire	ect Premiu Earned	ums		or Credited t Business	Direct Losses	s Paid	Direct Losses Incurred
24. Group Policies (b)			2.10011					J D.1001		550		
24.1 Federal Employees Health premium (b)												
24.2 Credit (Group and Individu	ıal)									1		
24.3 Collectively renewable pol	icies/certific	cates (b)										
24.4 Medicare Title XVIII exemple Other Individual Policies:	pt from state	e taxes or fee	<b>\ </b>		1					<u> </u>		
25.1 Non-cancelable (b)									<b></b>			
25.2 Guaranteed renewable (b)	)											
25.3 Non-renewable for stated		,				<u>-</u>				<u> </u>		
25.4 Other accident only								<u> </u>				
25.6 Totals (sum of Lines 25.1								T		1		

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

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



DIRECT BUSINESS IN THE S NAIC Group Code 3891	STATE O	F Illinois		1 !	IFF I	NSURA	ΔNCI	F				YEAR 2020 y Code 15473
,				1		2			3	NAIC 4	Company	y Code 15473 5
DIRECT F AND ANNUITY C	PREMIUMS ONSIDERA		Ord	linary		dit Life (G nd Individu		Gro	oup	Industria	d	Total
Life insurance												
<ol> <li>Annuity considerations</li> <li>Deposit-type contract fund</li> </ol>										XXX		
Other considerations						XXX				XXX		
5. Totals (Sum of Lines 1 to 4	4)											
DIRECT DIV POLICYHOLDERS/RE		-					_					
Life insurance:	TEOMDS I	O MEMBERS		l								
6.1 Paid in cash or left on dep			ļ		ļ							
<ul><li>6.2 Applied to pay renewal pre</li><li>6.3 Applied to provide paid-up</li></ul>					ļ							
endowment or premiu					ļ							
6.4 Other								-				
6.5 Totals (Sum of Lines 6.1 to Annuities:	) 6.4)							-				
7.1 Paid in cash or left on dep	osit											
7.2 Applied to provide paid-up	annuities		<b></b>									
7.3 Other							<u>.                                      </u>		<b></b>			
8. Grand Totals (Lines 6.5 pl						···						
DIRECT CLAIMS A							T					
Death benefits      Matured endowments					Ţ	<del></del> -	<del></del>	<del></del>				
11. Annuity benefits					ļ							
12. Surrender values and with	drawals for	life contracts			T							
<ol> <li>Aggregate write-ins for mis and benefits paid</li> </ol>												
14. All other benefits, except a												
15. Totals			<u> </u>		<u> </u>							
DETAILS OF WRITE-INS 1301.				l								
1302.					İ							
1303.												
1398. Summary of Line 13 from (1399. Totals (Lines 1301 thru 13		•			<b></b>			+				
above)		, , , = -										
				Credit Life							T	
DIRECT DEATH	1	Ordinary 2	(Group	and Individ	ual)	5	Grou	ір 6	7 In	dustrial 8	9	Total 10
BENEFITS AND		_	No. of	7		3		U		U		10
MATURED ENDOWMENTS	No. of Pols. &		Ind.Pols. & Gr.			No. of			No. of Pols. &		No. of Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amour	nt	Certifs.	А	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior year												
17. Incurred during current year												
Settled during current year:												
18.1 By payment in full				-							-	
compromised claims		ļ		-		<b> </b>	ļ		<del> </del>		-	
18.3 Totals paid 18.4 Reduction by compromise							-				-	
18.5 Amount rejected												
18.6 Total settlements											-	
19. Unpaid Dec. 31, current year (16+17-18.6)									_			
						No. of						
POLICY EXHIBIT 20. In force December 31, prior						Policies	ļ					
year				.(a)								
21. Issued during year 22. Other changes to in force									·		-	
(Net)							ļ				-	
23. In force December 31 of current year				(a)								
(a) Includes Individual Credit Life I		•		, (		•				_	-	
Includes Group Credit Life Insu Loans greater than 60 months			•			•				•		
Loans greater than 55 monas	at issue L								,	ient year φ		
Γ				NT AND	HEA	ALTH IN	15Ur		3	4		5
				1		_		Policyholde	er Dividends	1		J
					Dire	ect Premiu	ums		efunds to or Credited		1	Direct Losses
			Direct P	Premiums		Earned			Business	Direct Losses	Paid	Incurred
24. Group Policies (b) 24.1 Federal Employees Health												
premium (b)												
24.2 Credit (Group and Individu	,											
24.3 Collectively renewable pol 24.4 Medicare Title XVIII exemp		` '										
Other Individual Policies:												
25.1 Non-cancelable (b)							<b>.</b>		<b></b>			
<ul><li>25.2 Guaranteed renewable (b)</li><li>25.3 Non-renewable for stated</li></ul>												
25.4 Other accident only												
25.5 All other (b)												

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

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



DIRECT BUSINESS IN THE NAIC Group Code 3891	STATE O	F Indiana		11	IFF II	NSUR	ΔNC	F				YEAR 2020 / Code 15473
•	~ = > = 1 = 10			1		2			3	NAIC 4	Company	5 5
DIRECT F AND ANNUITY C	PREMIUMS ONSIDER		Ord	inary		dit Life (G ıd Individu		Gr	oup	Industria	ı	Total
Life insurance												
<ol> <li>Annuity considerations</li> <li>Deposit-type contract fund</li> </ol>						XXX				XXX		
Other considerations												
5. Totals (Sum of Lines 1 to	,											
DIRECT DIV POLICYHOLDERS/RI												
Life insurance:												
<ul><li>6.1 Paid in cash or left on dep</li><li>6.2 Applied to pay renewal pre</li></ul>												
6.3 Applied to provide paid-up												
endowment or premiu 6.4 Other												
6.4 Other 6.5 Totals (Sum of Lines 6.1 to												
Annuities:	•											
<ul><li>7.1 Paid in cash or left on dep</li><li>7.2 Applied to provide paid-up</li></ul>	osit											
7.3 Other					7				<del></del>			
7.4 Totals (Sum of Lines 7.1 to	o 7.3)						Ţ					
Grand Totals (Lines 6.5 pl     DIRECT CLAIMS A		TE DAID	7.1			$\blacksquare$						
9. Death benefits												
10. Matured endowments												
Annuity benefits     Surrender values and with					T			T				
Surrender values and with     13. Aggregate write-ins for mis												
and benefits paid												
<ol> <li>All other benefits, except a</li> <li>Totals</li> </ol>	accident an	d nealth										
DETAILS OF WRITE-INS												
1301.												
1302. 1303.												
1398. Summary of Line 13 from	overflow pa	ige										
1399. Totals (Lines 1301 thru 13 above)	03 plus 139	98) (Line 13										
above			1	0 111 1 15		1					<u>I</u>	
	(	Ordinary		Credit Life and Individ	lual)		Grou	ıp	In	dustrial		Total
DIRECT DEATH	1	2	3	4	,	5		6	7	8	9	10
BENEFITS AND MATURED	No. of		No. of Ind.Pols.						No. of		No. of	
ENDOWMENTS INCURRED	Pols. &		& Gr.	•		No. of	١.		Pols. &	A	Pols. &	
16. Unpaid December 31, prior	Certifs.	Amount	Certifs.	Amou	nt	Certifs.	F	Amount	Certifs.	Amount	Certifs.	Amount
year												
17. Incurred during current year Settled during current year:												
18.1 By payment in full												
18.2 By payment on compromised claims												
18.3 Totals paid												
18.4 Reduction by compromise 18.5 Amount rejected			\		•						-	
18.6 Total settlements			7 /									
19. Unpaid Dec. 31, current												
year (16+17-18.6)						No. of						
POLICY EXHIBIT						Policies						
20. In force December 31, prior year				.(a)								
21. Issued during year				(a)								
22. Other changes to in force (Net)												
23. In force December 31 of												
current year (a) Includes Individual Credit Life I	neuranco n	rior year \$		(a)	current	voor ¢			L			
Includes Group Credit Life Insu		•				•				rent year \$		
Loans greater than 60 months	at issue Bl	JT NOT GREATI	ER THAN 1	20 MONTHS	S, prior	year \$			, cur	rent year \$		
		Į.	ACCIDE	NT AND	HEA	LTH I	NSU	RANCE				
				1		2			3	4		5
									er Dividends efunds to			
			Disc et D	<b></b>	Dire	ect Premi	ums	Members	or Credited	Discottone	Deid	Direct Losses
24. Group Policies (b)			Direct P	remiums	<u> </u>	Earned		on Direct	Business	Direct Losses	raid	Incurred
24.1 Federal Employees Health	n Benefits F	Plan										
premium (b)24.2 Credit (Group and Individu					<b></b>			+		<b>†</b>		
24.3 Collectively renewable pol	icies/certific	cates (b)										
24.4 Medicare Title XVIII exemp	pt from stat	e taxes or fee								<b></b>		
Other Individual Policies: 25.1 Non-cancelable (b)												
25.2 Guaranteed renewable (b)	)						V					
25.3 Non-renewable for stated										<b> </b>		
25.4 Other accident only					<b></b>	<del></del>	<del></del>	· · · · · · · · · · · · · · · · · · ·				
25.5 All other (b)					†					<b>†</b>		

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

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



NAIC Group Code 3891	STATE OF Iov			L		NSURA	NC	E		NAIC	Company	Code 15473
DIRECT I	PREMIUMS		,	1	Cred	2 lit Life (Gro	up	;	3	4		5
AND ANNUITY Of the insurance	ONSIDERATION			inary		d Individua		Gr	oup	Industria	al	Total
Annuity considerations								İ				
Deposit-type contract func     Other considerations						XXX				XXX.		
Other considerations      Totals (Sum of Lines 1 to												
DIRECT DI	VIDENDS TO											
POLICYHOLDERS/R Life insurance:	EFUNDS TO MEI	MBERS										
6.1 Paid in cash or left on dep												
6.2 Applied to pay renewal pro												
6.3 Applied to provide paid-up endowment or premiu												
6.4 Other												
6.5 Totals (Sum of Lines 6.1 t Annuities:	0 6.4)											
7.1 Paid in cash or left on dep	osit											
7.2 Applied to provide paid-up												
7.3 Other			<b>\</b>								T	
8. Grand Totals (Lines 6.5 pl	lus 7.4)											
DIRECT CLAIMS A												
Death benefits  10. Matured endowments												
11. Annuity benefits												
12. Surrender values and with			•					<b>-</b>				
<ol> <li>Aggregate write-ins for mi and benefits paid</li> </ol>								<u> </u>				
<ol><li>All other benefits, except a</li></ol>					ļ			ļ				
15. Totals  DETAILS OF WRITE-INS	1				-							
1301					ļ							
1302.								ļ			T	
1303.												
1398. Summary of Line 13 from 1399. Totals (Lines 1301 thru 13												
above)												
	0.45			Credit Life	1)		<u> </u>					T. (.)
DIRECT DEATH	Ordina 1	ary 2	(Group	and Individ	iuai)	5	Grou	<u>р</u> 6	7	ndustrial 8	9	Total 10
BENEFITS AND			No. of							-		
MATURED ENDOWMENTS	No. of Pols. &		Ind.Pols. & Gr.			No. of			No. of Pols. &		No. of Pols. &	
INCURRED		Amount	Certifs.	Amou	nt	Certifs.	Α	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior year												
17. Incurred during current year												
0												
Settled during current year:												
18.1 By payment in full												
18.1 By payment in full 18.2 By payment on compromised claims												
18.1 By payment in full												
18.1 By payment in full												
18.1 By payment in full						A						
18.1 By payment in full												
18.1 By payment in full 18.2 By payment on compromised claims			V		)	No. of						
18.1 By payment in full					)	No. of Policies						
18.1 By payment in full				(a)								
18.1 By payment in full				(a)	)							
18.1 By payment in full				(a)	)							
18.1 By payment in full				(a)								
18.1 By payment in full				(a)		Policies						
18.1 By payment in full	Insurance prior ye			(a),		Policies  year \$				urrent year \$		
18.1 By payment in full	Insurance prior ye	s than or ed	qual to 60 m	(a), (a) onths at iss	ue, prio	Policies  year \$ r year \$			, Cl	ırrent year \$		
18.1 By payment in full	Insurance prior ye	s than or ed OT GREATE	qual to 60 m ER THAN 1:	(a), (a) onths at iss	ue, prio S, prior	year \$ r year \$ year \$			, Cl	•		
18.1 By payment in full	Insurance prior ye	s than or ed OT GREATE	qual to 60 m ER THAN 12	(a), (a), (a) onths at iss	ue, prio S, prior	year \$ r year \$ year \$		RANCE	, cu	urrent year \$		5
18.1 By payment in full	Insurance prior ye	s than or ed OT GREATE	qual to 60 m ER THAN 12	(a), (on this at iss 20 MONTHS	ue, prio S, prior	year \$ r year \$ year \$		RANCE Policyholde	, cu	urrent year \$		5
18.1 By payment in full	Insurance prior ye	s than or ed OT GREATE	qual to 60 m ER THAN 12	(a) nonths at iss 20 MONTHS	HEA	year \$ r year \$ year \$ year \$ vear \$ year \$	SUI	Policyholde Paid, Re Members	3 er Dividence efunds to or Creditec	urrent year \$		Direct Losses
18.1 By payment in full	Insurance prior ye urance Loans less at issue BUT NO	s than or ec DT GREATE	qual to 60 m ER THAN 12	(a), (on this at iss 20 MONTHS	HEA	policies  year \$ r year \$ year \$ LTH IN 2	SUI	Policyholde Paid, Re Members	3 er Dividence	s 4	s Paid	
18.1 By payment in full	Insurance prior ye urance Loans less at issue BUT NO	s than or ec DT GREATE	qual to 60 m ER THAN 12	(a) nonths at iss 20 MONTHS	HEA	year \$ r year \$ year \$ year \$ vear \$ year \$	SUI	Policyholde Paid, Re Members	3 er Dividence efunds to or Creditec	urrent year \$	s Paid	Direct Losses
18.1 By payment in full	Insurance prior ye urance Loans less at issue BUT NO	s than or ec DT GREATE	qual to 60 m ER THAN 12	(a) nonths at iss 20 MONTHS	HEA	year \$ r year \$ year \$ year \$ vear \$ year \$	SUI	Policyholde Paid, Re Members	3 er Dividence efunds to or Creditec	urrent year \$	s Paid	Direct Losses
18.1 By payment in full	Insurance prior ye urance Loans less at issue BUT NO	s than or ec	qual to 60 m ER THAN 12	(a) nonths at iss 20 MONTHS	HEA	year \$ r year \$ year \$ year \$ vear \$ year \$	SUI	Policyholde Paid, Re Members	3 er Dividence efunds to or Creditec	urrent year \$	s Paid	Direct Losses
18.1 By payment in full	Insurance prior yeurance Loans less at issue BUT NO	s than or ec DT GREATE	qual to 60 m ER THAN 12	(a) nonths at iss 20 MONTHS	HEA	year \$ r year \$ year \$ year \$ vear \$ year \$	SUI	Policyholde Paid, Re Members	3 er Dividence efunds to or Creditec	urrent year \$	s Paid	Direct Losses
18.1 By payment in full	Insurance prior yeurance Loans less at issue BUT NO  h Benefits Plan  ual)  licies/certificates (pt from state taxe	s than or ec DT GREATE	qual to 60 m ER THAN 12	(a) nonths at iss 20 MONTHS	HEA	year \$ r year \$ year \$ year \$ vear \$ year \$	SUI	Policyholde Paid, Re Members	3 er Dividence efunds to or Creditec	urrent year \$	s Paid	Direct Losses
18.1 By payment in full	Insurance prior yeurance Loans less at issue BUT NO  th Benefits Plan  ual)  licies/certificates (pt from state taxe	s than or ec DT GREATE	qual to 60 m ER THAN 12	(a) nonths at iss 20 MONTHS	HEA	year \$ r year \$ year \$ year \$ vear \$ year \$	SUI	Policyholde Paid, Re Members	3 er Dividence efunds to or Creditec	urrent year \$	s Paid	Direct Losses
18.1 By payment in full	Insurance prior ye urance Loans less at issue BUT NO  h Benefits Plan  ual) licies/certificates ( pt from state taxe  ) reasons only (b)	s than or ec DT GREATE	qual to 60 m ER THAN 12	(a) nonths at iss 20 MONTHS	HEA	year \$ r year \$ year \$ year \$ vear \$ year \$	SUI	Policyholde Paid, Re Members	3 er Dividence efunds to or Creditec	urrent year \$	s Paid	Direct Losses
18.1 By payment in full	Insurance prior ye urance Loans less at issue BUT NO  h Benefits Plan  ual) licies/certificates ( pt from state taxe)  reasons only (b)	s than or ec DT GREATE	qual to 60 m ER THAN 12	(a) , (on this at iss 20 MONTHS 11 remiums	HEA	year \$ r year \$ year \$ year \$ vear \$ year \$	SUI	Policyholde Paid, Re Members	3 er Dividence efunds to or Creditec	urrent year \$	s Paid	Direct Losses
18.1 By payment in full	h Benefits Plan  Jal)  Jicies/certificates (pt from state taxe)  reasons only (b)	s than or ec DT GREATE	Qual to 60 m ER THAN 1:	(a) , (on this at iss 20 MONTHS 11 remiums	HEA	year \$ r year \$ year \$ year \$ vear \$ year \$	SUI	Policyholde Paid, Re Members	3 er Dividence efunds to or Creditec	urrent year \$	s Paid	Direct Losses
18.1 By payment in full	h Benefits Plan  Jal)  Jicies/certificates (pt from state taxe)  reasons only (b)	s than or ec DT GREATE	Qual to 60 m ER THAN 1:	(a) , (on this at iss 20 MONTHS 11 remiums	HEA	year \$ r year \$ year \$ year \$ vear \$ year \$	SUI	Policyholde Paid, Re Members	3 er Dividence efunds to or Creditec	urrent year \$	s Paid	Direct Losses

24.IA

insured under indemnity only products



DIRECT BUSINESS IN THE NAIC Group Code 3891	STATE O	F Kansas		LI		NSUR!						YEAR 2020 y Code 15473
·	DEMILINA		<del></del>	1		2			3	4	Company	5
AND ANNUITY C		ATIONS	Ord	inary		dit Life (Gr nd Individu		Gro	oup	Industria	al	Total
Life insurance     Annuity considerations			[		····							
Deposit-type contract fund			L			XXX				XXX		
Other considerations  Totals (Sum of Lines 1 to			<b> </b>									
5. Totals (Sum of Lines 1 to 4	,	(0			-					1		
POLICYHOLDERS/RE		-	İ				ĺ					
Life insurance: 6.1 Paid in cash or left on dep	osit											
6.2 Applied to pay renewal pre	emiums									ļ		
6.3 Applied to provide paid-up endowment or premiu			ļ		<u> </u>							
6.4 Other												
Annuities:					·							
7.1 Paid in cash or left on dep	osit		L									
7.2 Applied to provide paid-up 7.3 Other	annuncs											
7.4 Totals (Sum of Lines 7.1 to	o 7.3)						<b>.</b>					
8. Grand Totals (Lines 6.5 pl		ITS PAID				1			_			
9. Death benefits												
Matured endowments     Annuity benefits					ļ					<b> </b>		
<ol><li>Surrender values and with</li></ol>	drawals for	life contracts	ļ									
Aggregate write-ins for mis     and benefits paid												
14. All other benefits, except a												
15. Totals  DETAILS OF WRITE-INS					-					<u> </u>		
1301.			ļ		ļ							
1302. 1303.					ļ							
1398. Summary of Line 13 from	overflow pa	ige										
1399. Totals (Lines 1301 thru 13 above)	03 plus 139	98) (Line 13	i				ĺ					
			$\overline{\tau}$	Credit Life				I	 		<del></del>	
DIDECT DEATH		Ordinary	(Group	and Individu	ual)	<u> </u>	Group			ndustrial		Total
DIRECT DEATH BENEFITS AND	1	2	3 No. of	4		5		6	7	8	9	10
MATURED ENDOWMENTS	No. of Pols. &		Ind.Pols. & Gr.			No. of			No. of Pols. &		No. of Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amour	nt	Certifs.	Α	mount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior year		ļ										
17. Incurred during current year												
Settled during current year: 18.1 By payment in full		L	1				<u> </u>					
18.2 By payment on compromised claims												
18.3 Totals paid		·····										
18.4 Reduction by compromise 18.5 Amount rejected			<b>_</b>				<b>  -</b>					
18.6 Total settlements							<b></b>					
19. Unpaid Dec. 31, current year (16+17-18.6)						1			_			
			<del>  •</del>			No. of					+	
POLICY EXHIBIT 20. In force December 31, prior						Policies	ļ					
year				(a)								
<ul><li>21. Issued during year</li><li>22. Other changes to in force</li></ul>		 	+	<u> </u>		l	ļ				-	
(Net)				<b> </b>								
current year		<u> </u>		(a)		لــِــا	<u> </u>					
(a) Includes Individual Credit Life Includes Group Credit Life Insu				, c nonths at issu		•			, cu	rrent year \$		
Loans greater than 60 months			•			•				•		
		Δ	CCIDE	NT AND	HEA		<u>NSUF</u>					
			ĺ	1		2		Policyholde	3 er Dividends	4		5
			İ	ļ	Dire	ect Premiu		Páid, Re	efunds to or Credited			Direct Losses
			Direct P	remiums	יווט	Earned	JIII2		Business	Direct Losses	s Paid	Incurred
24. Group Policies (b)			<b>†</b>		ļ			<u> </u>		-		
premium (b)			ļ		ļ			ļ				
<ul><li>24.2 Credit (Group and Individu</li><li>24.3 Collectively renewable pol</li></ul>			[		ļ							
24.4 Medicare Title XVIII exemp		` '	<b>A</b>									
Other Individual Policies: 25.1 Non-cancelable (b)		Y										
25.2 Guaranteed renewable (b)	)						<b>1</b>					
25.3 Non-renewable for stated 25.4 Other accident only					<b></b>		•		<b></b>	-		
25.5 All other (b)		The state of the s										
25.6 Totala (aum of Linea 25.1)	to 0F F)	1	1	,								

and number of persons insured under indemnity only products



DIRECT BUSINESS IN THE NAIC Group Code 3891	STATE O	F Kentucky		LI	IFE II	NSUR/	ANCI	E	•			YEAR 20 y Code ´	
DIRECT F	REMIUMS	3		1	Cre	2 dit Life (Gı	roup	3	3	4		5	
AND ANNUITY C	ONSIDER	ATIONS	Ord	inary		d Individu		Gro	oup	Industria	I	Total	I
Life insurance     Annuity considerations								<b>†</b>		-			
<ol><li>Deposit-type contract fund</li></ol>	s					XXX				xxx			
Other considerations  Totals (Cum of Lines 1 to													
5. Totals (Sum of Lines 1 to 4	,	го											
POLICYHOLDERS/RI		-											
Life insurance: 6.1 Paid in cash or left on dep	osit												
6.2 Applied to pay renewal pre													
6.3 Applied to provide paid-up endowment or premiu													
6.4 Other													
6.5 Totals (Sum of Lines 6.1 to	0 6.4)												
Annuities: 7.1 Paid in cash or left on dep	osit												
7.2 Applied to provide paid-up	annuities .												
7.3 Other			<b>\</b>						<u></u>	-			
8. Grand Totals (Lines 6.5 pl							,	•					
DIRECT CLAIMS A		_				<b>T</b>							
Death benefits  10. Matured endowments					l	_ <del>_</del>				-			
11. Annuity benefits								1		<u> </u>			
12. Surrender values and with					ļ								
<ol> <li>Aggregate write-ins for mis and benefits paid</li> </ol>													
<ol><li>All other benefits, except a</li></ol>								ļ					
15. Totals  DETAILS OF WRITE-INS								1					
1301					<b> </b>			ļ		<u> </u>			
1302.					<u> </u>			ļ					
1303 1398. Summary of Line 13 from													
1399. Totals (Lines 1301 thru 13		•						*					
above)													
		Ordinary		Credit Life and Individ	ual)		Grou	n	lr	ndustrial		Total	
DIRECT DEATH	1	2	3	4	uu.,	5	0.00	6	7	8	9		0
BENEFITS AND MATURED	No. of		No. of Ind.Pols.						No. of		No. of		
ENDOWMENTS INCURRED	Pols. &		& Gr.			No. of			Pols. &		Pols. &		
16. Unpaid December 31, prior	Certifs.	Amount	Certifs.	Amou	nt	Certifs.	A	mount	Certifs.	Amount	Certifs.	Amo	ount
year													
17. Incurred during current year Settled during current year:													
18.1 By payment in full													
18.2 By payment on compromised claims													
18.3 Totals paid													
18.4 Reduction by compromise 18.5 Amount rejected			\		•	- \							
18.6 Total settlements						7							
19. Unpaid Dec. 31, current						<b>II</b> 7							
year (16+17-18.6)			+ -			No. of	•						
POLICY EXHIBIT						Policies							
20. In force December 31, prior year				(a)									
21. Issued during year													
22. Other changes to in force (Net)													
23. In force December 31 of current year				(a)									
(a) Includes Individual Credit Life I	nsurance p	prior year \$			current	year \$							
Includes Group Credit Life Insu Loans greater than 60 months			•			•				•			
Louis greater than 00 months	at 10000 Dt								, cu	γεαι φ			
		P	CODE	NT AND	пЕА	ALTH IN	100l		3	4	1	5	
				•		_		Policyholde	r Dividend			3	
					Dire	ect Premiu	ıms	Paid, Re Members	funds to or Credited			Direct Lo	sses
24 Crown Delining (L)			Direct P	remiums		Earned			Business	Direct Losses	Paid	Incurre	
24. Group Policies (b) 24.1 Federal Employees Health					ļ			<del> </del>		†			
premium (b)					<b>.</b>			<b></b>					
<ul><li>24.2 Credit (Group and Individu</li><li>24.3 Collectively renewable pol</li></ul>					L								
24.4 Medicare Title XVIII exemp		` '	<b>\</b>					<b></b>					
Other Individual Policies: 25.1 Non-cancelable (b)													
25.2 Guaranteed renewable (b)					J		<b>N</b>						
25.3 Non-renewable for stated					<b></b>				<b></b>	-			
25.4 Other accident only			<del></del>		ļ	<del></del>	<del></del>	<del></del>					
25.6 Totals (sum of Lines 25.1	to 25.5)												
26. Totals (Lines 24 + 24.1 + 2												•	
(b) For health business on indi-	cated lines	report: Number	ot persons i	insured unde	er PPO	managed	care p	oroducts		and	number o	t persons	

24.KY

insured under indemnity only products



DIRECT BUSINESS IN THE NAIC Group Code 3891	STATE O	F Louisiana		1 !	IFF I	NSURA	ΔNCI	F				YEAR 2020 y Code 15473
•				1		2			3	NAIC 4	Company	y Code 15473 5
DIRECT F AND ANNUITY C	PREMIUMS CONSIDERA		Ord	linary		dit Life (G nd Individu		Gro	oup	Industria	d	Total
Life insurance												
<ol> <li>Annuity considerations</li> <li>Deposit-type contract fund</li> </ol>										XXX		
Other considerations						XXX				XXX		
5. Totals (Sum of Lines 1 to	4)											
DIRECT DIV POLICYHOLDERS/RI		-										
Life insurance:	EFUNDS 1	O MEMBERS		ĺ								
6.1 Paid in cash or left on dep			ļ		ļ							
<ul><li>6.2 Applied to pay renewal pre</li><li>6.3 Applied to provide paid-up</li></ul>								-				
endowment or premiu					ļ							
6.4 Other												
6.5 Totals (Sum of Lines 6.1 to Annuities:	3 6.4)							-				
7.1 Paid in cash or left on dep	osit											
7.2 Applied to provide paid-up	annuities		<b></b>									
7.3 Other					<b>- 13</b>							
8. Grand Totals (Lines 6.5 pl						···						
DIRECT CLAIMS A							T					
Death benefits  10. Matured endowments					Ţ	<del></del> -	<del></del>	<del></del>				
11. Annuity benefits					ļ							
12. Surrender values and with	drawals for	life contracts			T							
<ol> <li>Aggregate write-ins for mis and benefits paid</li> </ol>												
14. All other benefits, except a												
15. Totals			<u> </u>		<u> </u>						-	
DETAILS OF WRITE-INS 1301.				l								
1302.					İ							
1303.												
1398. Summary of Line 13 from 1399. Totals (Lines 1301 thru 13		•			<b></b>			+				
above)		, (										
				Credit Life								
DIRECT DEATH	1	Ordinary 2	(Group	and Individ	ual)	5	Grou	ір 6	7 In	dustrial 8	9	Total 10
BENEFITS AND		۷	No. of	7		3		U		U		10
MATURED ENDOWMENTS	No. of Pols. &		Ind.Pols. & Gr.			No. of			No. of Pols. &		No. of Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amour	nt	Certifs.	А	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior year												
17. Incurred during current year												
Settled during current year:												
18.1 By payment in full				-							-	
compromised claims				-		<b> </b>	ļ		<del> </del>		-	
18.3 Totals paid 18.4 Reduction by compromise											-	
18.5 Amount rejected									<u></u>			
18.6 Total settlements											-	
19. Unpaid Dec. 31, current year (16+17-18.6)									_			
						No. of						
POLICY EXHIBIT 20. In force December 31, prior						Policies	ł					
year				.(a)					ļ		-	
21. Issued during year 22. Other changes to in force	<del> </del>			-					† <u></u>			
(Net)									ļ		-	
23. In force December 31 of current year			l	(a)					<u> </u>			<u></u>
(a) Includes Individual Credit Life I		•		, (		•				_	+	
Includes Group Credit Life Insu Loans greater than 60 months			•			•				•		
Loans greater than so monais	at 13500 L 5								,	ient year φ		
Γ				NT AND	HEA	ALTH IN	15Ur		3	4		5
				1		_		Policyholde	er Dividends	1		J
					Dire	ect Premiu	ııms		efunds to or Credited		1	Direct Losses
			Direct P	Premiums		Earned	JIII.C		Business	Direct Losses	Paid	Incurred
24. Group Policies (b) 24.1 Federal Employees Health					<b> </b>			-		ļ		
premium (b)					ļ							
24.2 Credit (Group and Individu	,				ļ							
24.3 Collectively renewable pol 24.4 Medicare Title XVIII exemptors												
Other Individual Policies:									<del></del>			
25.1 Non-cancelable (b)							<b>V</b> .					
<ul><li>25.2 Guaranteed renewable (b)</li><li>25.3 Non-renewable for stated</li></ul>												
25.4 Other accident only												
25.5 All other (b)												

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

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



DIRECT BUSINESS IN THE	STATE O	F Maine		11	IFF II	NSURA	ANC	F				/EAR 2020
NAIC Group Code 3891				1		2			3	NAIC 4	Company	Code 15473 5
DIRECT F AND ANNUITY C	REMIUMS ONSIDER		Ordi	inary		dit Life (G nd Individu		Gr	oup	Industria	al	Total
Life insurance												
Annuity considerations     Deposit-type contract fund			 			XXX				XXX		
Other considerations												
5. Totals (Sum of Lines 1 to 4	,	·0										
POLICYHOLDERS/RI												
Life insurance:												
6.1 Paid in cash or left on dep 6.2 Applied to pay renewal pre												
6.3 Applied to provide paid-up												
endowment or premiu 6.4 Other					T							
6.4 Other 6.5 Totals (Sum of Lines 6.1 to												
Annuities:	,											
<ul><li>7.1 Paid in cash or left on dep</li><li>7.2 Applied to provide paid-up</li></ul>												
7.3 Other					7				<del></del>			
7.4 Totals (Sum of Lines 7.1 to	o 7.3)						\					
Grand Totals (Lines 6.5 pl     DIRECT CLAIMS A		ITS DAID										
Direct CLAIMS A     Death benefits		-										
10. Matured endowments												
Annuity benefits     Surrender values and with			ļ		<del> </del>					<b></b>		
13. Aggregate write-ins for mis					t							
and benefits paid					ļ					<b></b>		
<ul><li>14. All other benefits, except a</li><li>15. Totals</li></ul>	iccident and	neaith										
DETAILS OF WRITE-INS												
1301.												
1302. 1303.												
1398. Summary of Line 13 from												
1399. Totals (Lines 1301 thru 13 above)	03 plus 139	98) (Line 13										
above)						1		1				
	C	Ordinary		Credit Life and Individ	lual)		Grou	ıp	In	dustrial		Total
DIRECT DEATH	1	2	3	4	,	5		6	7	8	9	10
BENEFITS AND MATURED	No. of		No. of Ind.Pols.						No. of		No. of	
ENDOWMENTS	Pols. &	A	& Gr.			No. of	١.		Pols. &	A	Pols. &	A
INCURRED  16. Unpaid December 31, prior	Certifs.	Amount	Certifs.	Amou	nt	Certifs.	F	Amount	Certifs.	Amount	Certifs.	Amount
year												
17. Incurred during current year Settled during current year:												
18.1 By payment in full												
18.2 By payment on compromised claims												
18.3 Totals paid												
18.4 Reduction by compromise			<b>\</b>									
18.5 Amount rejected	•											
19. Unpaid Dec. 31, current							7					
year (16+17-18.6)			+									
POLICY EXHIBIT						Policies						
20. In force December 31, prior				(-)								
year21. Issued during year				(a)								
22. Other changes to in force												
(Net)												
current year				(a)								
<ul><li>(a) Includes Individual Credit Life I Includes Group Credit Life Insu</li></ul>				, onths at iss						rrent vear \$		
Loans greater than 60 months			•			•				•		
		4	CCIDE	NT AND	HΕΔ	LTHI	งรม	RANCE				
				1		2			3	4		5
									er Dividends efunds to	3		
					Dire	ect Premi	ums	Members	or Credited			Direct Losses
24. Group Policies (b)			Direct P	remiums		Earned		on Direct	Business	Direct Losses	s Paid	Incurred
24.1 Federal Employees Health					<b>†</b>			†		<u> </u>		
premium (b)					<b></b>							
<ul><li>24.2 Credit (Group and Individu</li><li>24.3 Collectively renewable pol</li></ul>					<u> </u>							
24.4 Medicare Title XVIII exemp			<b></b>									
Other Individual Policies:												
25.1 Non-cancelable (b)												
25.3 Non-renewable for stated	reasons onl	y (b)										
25.4 Other accident only					Ī							
25.5 All other (b)					<b>-</b>			-				

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

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



NAIC Group Code 3891	SIAIEUI	r Marylanu		LI	IFE II	NSUR/	ANCI	E				EAR 2020 Code 15473
	PREMIUMS		1			2 dit Life (Gr			3	4		5
AND ANNUITY C	ONSIDERA		Ordi	nary		nd Individu		Gro	oup	Industria	I	Total
Life insurance      Annuity considerations												
Annuity considerations     Deposit-type contract fund						XXX		-				
4. Other considerations												
5. Totals (Sum of Lines 1 to 4		0	<del> </del>							+		
POLICYHOLDERS/RI												
Life insurance:	!4											
6.1 Paid in cash or left on dep 6.2 Applied to pay renewal pre		i i								†		
6.3 Applied to provide paid-up	additions o	r shorten the										
endowment or premiu 6.4 Other										-		
6.5 Totals (Sum of Lines 6.1 to												
Annuities: 7.1 Paid in cash or left on dep	ocit											
7.1 Faid in cash of left of dep	annuities											
7.3 Other			<b></b>		7	🔼						
7.4 Totals (Sum of Lines 7.1 to 8. Grand Totals (Lines 6.5 pl							/ ···					
DIRECT CLAIMS A		ITS PAID				-						
9. Death benefits												
Matured endowments     Annuity benefits		ĺ						<b>†</b>		<del> </del>		
12. Surrender values and with	drawals for	life contracts	ļ									
13. Aggregate write-ins for mis												
and benefits paid			ļ					1				
15. Totals			<b></b>							1		
DETAILS OF WRITE-INS 1301.												
1302.												
1303.												
1398. Summary of Line 13 from 1399. Totals (Lines 1301 thru 13		_										
above)		-, (=	<u> </u>									
	_			Credit Life								
DIRECT DEATH	1	Ordinary 2	(Group	and Individ	ual)	5	Grou	р 6	7 I	ndustrial 8	9	Total 10
BENEFITS AND	-	2	No. of	7				O		O		10
MATURED ENDOWMENTS	No. of Pols. &		Ind.Pols. & Gr.			No. of			No. of Pols. &		No. of Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amour	nt	Certifs.	А	Mount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior year												
17. Incurred during current year												
Settled during current year:												
18.1 By payment in full												
compromised claims												
18.4 Reduction by compromise												
18.5 Amount rejected												
18.6 Total settlements							<del>-</del>					
year (16+17-18.6)												
DOLLOV EVIUSIT						No. of						
POLICY EXHIBIT 20. In force December 31, prior						Policies						
year				(a)		<b></b>						
Issued during year      Other changes to in force						†						-
(Net)												-
23. In force December 31 of current year			,	(a)		<u> </u>						
(a) Includes Individual Credit Life I		•		, (								
Includes Group Credit Life Insu Loans greater than 60 months			•			•				-		
200.10 g. 00.101 that 00 months						•			, 00	σ γουι ψ		
		A	CCIDEN		пЕА	<u> 2</u>	100l		3	4	1	5
			'	•		۷		Policyholde	r Dividend			5
					Dire	ect Premiu	ıms	Paid, Re Members	efunds to or Credited			Direct Losses
			Direct Pr	remiums		Earned			Business	Direct Losses	Paid	Incurred
24. Group Policies (b)			<u> </u>		ļ			<del> </del>		+		
premium (b)					<u> </u>			ļ				
24.2 Credit (Group and Individu 24.3 Collectively renewable pol	,		<u> </u>		ļ			<del> </del>		+		
24.4 Medicare Title XVIII exemp												
Other Individual Policies:									_			
25.1 Non-cancelable (b)				-		<b></b>	/-					
25.3 Non-renewable for stated	reasons onl	y (b)				· · · · · · · · · · · · · · · · · · ·						
25.4 Other accident only												
25.5 All other (b)					<b></b>			<b>.</b>				
25.6 Lotals (stim of Lines 25.1			Į.									
25.6 Totals (sum of Lines 25.1 26. Totals (Lines 24 + 24.1 + 2	to 25.5)											

24.MD

insured under indemnity only products



DIRECT BUSINESS IN THE STATE OF Massachusetts DURING THE YEAR 2020 LIFE INSURANCE NAIC Group Code 3891 NAIC Company Code 15473 3 2 Credit Life (Group **DIRECT PREMIUMS** AND ANNUITY CONSIDERATIONS Ordinary and Individual) Industrial Group Total Life insurance Annuity considerations 3 Deposit-type contract funds XXX XXX 4. Other considerations Totals (Sum of Lines 1 to 4) 5. DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS Life insurance: 6.1 Paid in cash or left on deposit 6.2 Applied to pay renewal premiums .. Applied to provide paid-up additions or shorten the 6.3 endowment or premium-paying period 64 Other 6.5 Totals (Sum of Lines 6.1 to 6.4) Annuities: Paid in cash or left on deposit 7.1 7.2 Applied to provide paid-up annuities 7.3 Other .. Totals (Sum of Lines 7.1 to 7.3) Grand Totals (Lines 6.5 plus 7.4) 8. DIRECT CLAIMS AND BENEFITS PAID Death benefits . 9. Matured endowments 11 Annuity benefits . Surrender values and withdrawals for life contracts 12. Aggregate write-ins for miscellaneous direct claims 13 and benefits paid 14. All other benefits, except accident and health 15 Totals DETAILS OF WRITE-INS 1301. 1302. 1303 Summary of Line 13 from overflow page 1398. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 1399. above) Credit Life Ordinary (Group and Individual) Industrial Group Total DIRECT DEATH 5 9 10 BENEFITS AND MATURED No. of No. of Pols. & No. of Pols. & Ind.Pols No. of **ENDOWMENTS** & Gr. INCURRED Certifs. Amount Certifs Amount Certifs Amount Certifs. Amount Certifs Amount 16. Unpaid December 31, prior year ......17. Incurred during current year Settled during current year: 18.1 By payment in full 18.2 By payment on compromised claims 18.3 Totals paid 18.4 Reduction by compromise 18.5 Amount rejected 18.6 Total settlements 19. Unpaid Dec. 31. current year (16+17-18.6) **POLICY EXHIBIT** 20. In force December 31, prior year ..... 21. Issued during year (a) 22. Other changes to in force (Net) 23. In force December 31 of current year (a) Includes Individual Credit Life Insurance prior year \$ .. current vear \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$ Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ .., current year \$ **ACCIDENT AND HEALTH INSURANCE** 5 Policyholder Dividends Paid, Refunds to Direct Premiums Members or Credited **Direct Losses** Direct Premiums Ea<u>rned</u> on Direct Business Direct Losses Paid Incurred 24 Group Policies (b) 24.1 Federal Employees Health Benefits Plan premium (b) Credit (Group and Individual) Collectively renewable policies/certificates (b) ...... Medicare Title XVIII exempt from state taxes or fee 24.3 24.4 Other Individual Policies: 25.1 Non-cancelable (b). 25.2 Guaranteed renewable (b) 25.3 Non-renewable for stated reasons only (b) Other accident only .. 25.5 All other (b). 25.6 Totals (sum of Lines 25.1 to 25.5)

and number of persons

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

insured under indemnity only products

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

26.



DIRECT BUSINESS IN THE NAIC Group Code 3891	OTATE OF			L	IFE INSL	RANG	CE		NAIC	Company	Code 15473
DIRECT F	PREMIUMS			1	2 Credit Life	(Group		3	4		5
AND ANNUITY C	ONSIDERA			inary	and Ind	vidual)	G	roup	Industria	ı	Total
Life insurance     Annuity considerations											
Deposit-type contract fund									XXX		
<ol> <li>Other considerations</li> <li>Totals (Sum of Lines 1 to a</li> </ol>											
`	VIDENDS TO	0									
POLICYHOLDERS/RI Life insurance:	EFUNDS TO	MEMBERS									
6.1 Paid in cash or left on dep	osit										
6.2 Applied to pay renewal pre											
6.3 Applied to provide paid-up endowment or premiu											
6.4 Other											
6.5 Totals (Sum of Lines 6.1 to Annuities:	o 6.4)								<b>+</b>		
7.1 Paid in cash or left on dep	osit										
7.2 Applied to provide paid-up	annuities		<b>\</b>			<b>\</b>					
7.3 Other						<b></b>		<u></u>	<del> </del>		
8. Grand Totals (Lines 6.5 pl	us 7.4)					7					
DIRECT CLAIMS A											
Death benefits  10. Matured endowments											
11. Annuity benefits									İ		
12. Surrender values and with											
<ol> <li>Aggregate write-ins for mis and benefits paid</li> </ol>											
<ol><li>14. All other benefits, except a</li></ol>											
15. Totals  DETAILS OF WRITE-INS											
1301									ļ		
1302.											
1303 1398. Summary of Line 13 from											
1399. Totals (Lines 1301 thru 13											
above)											
				Credit Life		0		1	الماسات		Takal
DIRECT DEATH	1	ordinary 2	(Group	and Individ	uai) 5	Gro	6	7	idustrial 8	9	Total 10
BENEFITS AND	NI f		No. of					N		N 6	
MATURED ENDOWMENTS	No. of Pols. &		Ind.Pols. & Gr.		No.	of		No. of Pols. &		No. of Pols. &	
INCURRED  16. Unpaid December 31, prior	Certifs.	Amount	Certifs.	Amou	nt Cert	fs.	Amount	Certifs.	Amount	Certifs.	Amount
· · · · · · · · · · · · · · · · · · ·											
year											
17. Incurred during current year											
17. Incurred during current year Settled during current year:											
Incurred during current year     Settled during current year:     18.1 By payment in full											
Incurred during current year     Settled during current year:     18.1 By payment in full  18.2 By payment on compromised claims											
Incurred during current year     Settled during current year:     18.1 By payment in full											
Incurred during current year Settled during current year:     18.1 By payment in full     18.2 By payment on compromised claims     18.3 Totals paid     18.4 Reduction by compromise     18.5 Amount rejected											
Incurred during current year     Settled during current year:     18.1 By payment in full     18.2 By payment on     compromised claims     18.3 Totals paid     18.4 Reduction by compromise     18.5 Amount rejected     18.6 Total settlements											
Incurred during current year Settled during current year:     18.1 By payment in full     18.2 By payment on compromised claims     18.3 Totals paid     18.4 Reduction by compromise     18.5 Amount rejected											
17. Incurred during current year Settled during current year: 18.1 By payment in full 18.2 By payment on compromised claims 18.3 Totals paid 18.4 Reduction by compromise 18.5 Amount rejected 18.6 Total settlements 19. Unpaid Dec. 31, current year (16+17-18.6)					) No.	-					
17. Incurred during current year Settled during current year: 18.1 By payment in full 18.2 By payment on compromised claims 18.3 Totals paid 18.4 Reduction by compromise 18.5 Amount rejected 18.6 Total settlements 19. Unpaid Dec. 31, current					NO. Polic	-					
17. Incurred during current year Settled during current year: 18.1 By payment in full 18.2 By payment on compromised claims				(a)	-	-					
17. Incurred during current year Settled during current year: 18.1 By payment in full 18.2 By payment on compromised claims 18.3 Totals paid 18.4 Reduction by compromise 18.5 Amount rejected 18.6 Total settlements 19. Unpaid Dec. 31, current year (16+17-18.6)  POLICY EXHIBIT 20. In force December 31, prior				(a)	-	-					
17. Incurred during current year Settled during current year: 18.1 By payment in full 18.2 By payment on compromised claims 18.3 Totals paid 18.4 Reduction by compromise 18.5 Amount rejected 18.6 Total settlements 19. Unpaid Dec. 31, current year (16+17-18.6)  POLICY EXHIBIT 20. In force December 31, prior year 21. Issued during year 22. Other changes to in force (Net)				(a)	-	-					
17. Incurred during current year Settled during current year: 18.1 By payment in full 18.2 By payment on compromised claims 18.3 Totals paid 18.4 Reduction by compromise 18.5 Amount rejected 18.6 Total settlements 19. Unpaid Dec. 31, current year (16+17-18.6)  POLICY EXHIBIT 20. In force December 31, prior year 21. Issued during year 22. Other changes to in force				(a)	-	-					
17. Incurred during current year Settled during current year: 18.1 By payment in full 18.2 By payment on compromised claims	nsurance pri	•		(a),	Police Po	ies					
17. Incurred during current year Settled during current year: 18.1 By payment in full 18.2 By payment on compromised claims	nsurance pri	s less than or ed	qual to 60 m	(a), (anonths at iss	Polici current year ue, prior yea	ies		, cu	•		
17. Incurred during current year Settled during current year: 18.1 By payment in full 18.2 By payment on compromised claims 18.3 Totals paid 18.4 Reduction by compromise 18.5 Amount rejected 18.6 Total settlements 19. Unpaid Dec. 31, current year (16+17-18.6)  POLICY EXHIBIT 20. In force December 31, prior year 21. Issued during year 22. Other changes to in force (Net) (Net) 15. In force December 31 of current year (a) Includes Individual Credit Life I Includes Group Credit Life Insu	nsurance pri	s less than or ed T NOT GREATE	qual to 60 m ER THAN 1	(a), (a), (a) onoths at iss	current year ue, prior year S, prior year	s		, cu	•		
17. Incurred during current year Settled during current year: 18.1 By payment in full 18.2 By payment on compromised claims 18.3 Totals paid 18.4 Reduction by compromise 18.5 Amount rejected 18.6 Total settlements 19. Unpaid Dec. 31, current year (16+17-18.6)  POLICY EXHIBIT 20. In force December 31, prior year 21. Issued during year 22. Other changes to in force (Net) 23. In force December 31 of current year (a) Includes Individual Credit Life I Includes Group Credit Life Insu	nsurance pri	s less than or ed T NOT GREATE	qual to 60 m ER THAN 1:	(a), (a), (a) onoths at iss	current year ue, prior year S, prior year	s		, cu	•		5
17. Incurred during current year Settled during current year: 18.1 By payment in full 18.2 By payment on compromised claims 18.3 Totals paid 18.4 Reduction by compromise 18.5 Amount rejected 18.6 Total settlements 19. Unpaid Dec. 31, current year (16+17-18.6)  POLICY EXHIBIT 20. In force December 31, prior year 21. Issued during year 22. Other changes to in force (Net) 23. In force December 31 of current year (a) Includes Individual Credit Life I Includes Group Credit Life Insu	nsurance pri	s less than or ed T NOT GREATE	qual to 60 m ER THAN 1:	(a) (on this at iss 20 MONTHS	current year ue, prior year S, prior year	s	JRANCE Policyhold	, cul	rrent year \$		5
17. Incurred during current year Settled during current year: 18.1 By payment in full 18.2 By payment on compromised claims 18.3 Totals paid 18.4 Reduction by compromise 18.5 Amount rejected 18.6 Total settlements 19. Unpaid Dec. 31, current year (16+17-18.6)  POLICY EXHIBIT 20. In force December 31, prior year 21. Issued during year 22. Other changes to in force (Net) 23. In force December 31 of current year (a) Includes Individual Credit Life I Includes Group Credit Life Insu	nsurance pri	s less than or ed T NOT GREATE	qual to 60 m ER THAN 1:	(a) (on this at iss 20 MONTHS	current year ue, prior year S, prior year	\$	JRANCE Policyhold Paid, R	, cu	rrent year \$		5 Direct Losses
17. Incurred during current year Settled during current year: 18.1 By payment in full 18.2 By payment on compromised claims 18.3 Totals paid 18.4 Reduction by compromise 18.5 Amount rejected 18.6 Total settlements 19. Unpaid Dec. 31, current year (16+17-18.6)  POLICY EXHIBIT 20. In force December 31, prior year 21. Issued during year 22. Other changes to in force (Net) 23. In force December 31 of current year (a) Includes Individual Credit Life I Includes Group Credit Life Insu Loans greater than 60 months	insurance pri urance Loans at issue BU	s less than or ec T NOT GREATE	qual to 60 m ER THAN 1:	(a) (on this at iss 20 MONTHS	current year ue, prior year HEALTI	\$	Policyhold Paid, R Members	3 er Dividends	rrent year \$	s Paid	
17. Incurred during current year Settled during current year: 18.1 By payment in full 18.2 By payment on compromised claims 18.3 Totals paid 18.4 Reduction by compromise 18.5 Amount rejected 18.6 Total settlements 19. Unpaid Dec. 31, current year (16+17-18.6)  POLICY EXHIBIT 20. In force December 31, prior year 21. Issued during year 22. Other changes to in force (Net) 23. In force December 31 of current year (a) Includes Individual Credit Life I Includes Group Credit Life Insu	nsurance pri irance Loans at issue BU	s less than or ec T NOT GREATE	qual to 60 m ER THAN 1:	(a) , on on this at iss 20 MONTHS	current year ue, prior year S, prior year HEALTI	\$	Policyhold Paid, R Members	3 er Dividends Refunds to	rrent year \$	s Paid	Direct Losses
17. Incurred during current year Settled during current year: 18.1 By payment in full 18.2 By payment on compromised claims 18.3 Totals paid 18.4 Reduction by compromise 18.5 Amount rejected 18.6 Total settlements 19. Unpaid Dec. 31, current year (16+17-18.6)  POLICY EXHIBIT 20. In force December 31, prior year 21. Issued during year 22. Other changes to in force (Net) 23. In force December 31 of current year (a) Includes Individual Credit Life I Includes Group Credit Life Insu Loans greater than 60 months  24. Group Policies (b)	insurance pri urance Loans at issue BU	s less than or ec T NOT GREATE	qual to 60 m ER THAN 1:	(a) , on on this at iss 20 MONTHS	current year ue, prior year S, prior year HEALTI	\$	Policyhold Paid, R Members	3 er Dividends Refunds to	rrent year \$	s Paid	Direct Losses
17. Incurred during current year Settled during current year: 18.1 By payment in full 18.2 By payment on compromised claims 18.3 Totals paid 18.4 Reduction by compromise 18.5 Amount rejected 18.6 Total settlements 19. Unpaid Dec. 31, current year (16+17-18.6)  POLICY EXHIBIT 20. In force December 31, prior year 21. Issued during year 22. Other changes to in force (Net) 23. In force December 31 of current year (a) Includes Individual Credit Life I Includes Group Credit Life Inst Loans greater than 60 months  24. Group Policies (b) 24.1 Federal Employees Health premium (b) 24.2 Credit (Group and Individu	insurance pri urance Loans at issue BU	s less than or ec T NOT GREATE	qual to 60 m ER THAN 1:	(a) , on on this at iss 20 MONTHS	current year ue, prior year S, prior year HEALTI	\$	Policyhold Paid, R Members	3 er Dividends Refunds to	rrent year \$	s Paid	Direct Losses
17. Incurred during current year Settled during current year: 18.1 By payment in full 18.2 By payment on compromised claims 18.3 Totals paid 18.4 Reduction by compromise 18.5 Amount rejected 18.6 Total settlements 19. Unpaid Dec. 31, current year (16+17-18.6)  POLICY EXHIBIT 20. In force December 31, prior year 21. Issued during year 22. Other changes to in force (Net) 23. In force December 31 of current year (a) Includes Individual Credit Life I Includes Group Credit Life Insu Loans greater than 60 months  24. Group Policies (b) 24. Federal Employees Healtt premium (b)	insurance pri urance Loans at issue BU	s less than or ec T NOT GREATE  A  lan  ates (b)	qual to 60 m ER THAN 1:	(a) , on on this at iss 20 MONTHS	current year ue, prior year S, prior year HEALTI	\$	Policyhold Paid, R Members	3 er Dividends Refunds to	rrent year \$	s Paid	Direct Losses
17. Incurred during current year Settled during current year: 18.1 By payment in full 18.2 By payment on compromised claims 18.3 Totals paid 18.4 Reduction by compromise 18.5 Amount rejected 18.6 Total settlements 19. Unpaid Dec. 31, current year (16+17-18.6)  POLICY EXHIBIT 20. In force December 31, prior year 21. Issued during year 22. Other changes to in force (Net) 23. In force December 31 of current year (a) Includes Individual Credit Life I Includes Group Credit Life Insu Loans greater than 60 months  24. Group Policies (b) 24.1 Federal Employees Health premium (b) 24.2 Credit (Group and Individu 24.3 Collectively renewable pol 24.4 Medicare Title XVIII exem Other Individual Policies:	nsurance pri urance Loans at issue BU	s less than or ec T NOT GREATE  A  lan  ates (b) e taxes or fee	qual to 60 m ER THAN 1:	(a) , on on this at iss 20 MONTHS	current year ue, prior year S, prior year HEALTI	\$	Policyhold Paid, R Members	3 er Dividends Refunds to	rrent year \$	S Paid	Direct Losses
17. Incurred during current year Settled during current year: 18.1 By payment in full 18.2 By payment on compromised claims 18.3 Totals paid 18.4 Reduction by compromise 18.5 Amount rejected 18.6 Total settlements 19. Unpaid Dec. 31, current year (16+17-18.6)  POLICY EXHIBIT 20. In force December 31, prior year 21. Issued during year 22. Other changes to in force (Net) 23. In force December 31 of current year (a) Includes Individual Credit Life I Includes Group Credit Life Inst Loans greater than 60 months  24. Group Policies (b) 24.1 Federal Employees Health premium (b) 24.2 Credit (Group and Individu 24.3 Collectively renewable pol 24.4 Medicare Title XVIII exem Other Individual Policies: 25.1 Non-cancelable (b)	nsurance pri irance Loans at issue BU	s less than or ec T NOT GREATE  A  lan  ates (b) e taxes or fee	qual to 60 m ER THAN 1:	(a) , on on this at iss 20 MONTHS	current year ue, prior year S, prior year HEALTI	\$	Policyhold Paid, R Members	3 er Dividends Refunds to	rrent year \$	s Paid	Direct Losses
17. Incurred during current year Settled during current year: 18.1 By payment in full 18.2 By payment on compromised claims	insurance pri urance Loans at issue BU	s less than or ec T NOT GREATE  A  an  ates (b) e taxes or fee	qual to 60 m ER THAN 1:	(a) , on on this at iss 20 MONTHS	current year ue, prior year S, prior year HEALTI	\$	Policyhold Paid, R Members	3 er Dividends Refunds to	rrent year \$	s Paid	Direct Losses
17. Incurred during current year Settled during current year: 18.1 By payment in full 18.2 By payment on compromised claims	nsurance pri urance Loans at issue BU	an ates (b) ataxes or fee	qual to 60 m ER THAN 1:	(a) , on on this at iss 20 MONTHS NT AND 1	current year ue, prior year S, prior year HEALTI	\$	Policyhold Paid, R Members	3 er Dividends Refunds to	rrent year \$	s Paid	Direct Losses
17. Incurred during current year Settled during current year: 18.1 By payment in full. 18.2 By payment on compromised claims. 18.3 Totals paid. 18.4 Reduction by compromise. 18.5 Amount rejected. 18.6 Total settlements. 19. Unpaid Dec. 31, current year (16+17-18.6)  POLICY EXHIBIT 20. In force December 31, prior year. 21. Issued during year. 22. Other changes to in force (Net). 23. In force December 31 of current year (a) Includes Individual Credit Life Includes Group Credit	nsurance pri urance Loans at issue BU	s less than or ec T NOT GREATE  A  an  ates (b) b taxes or fee	Direct P	(a) , on on this at iss 20 MONTHS NT AND 1	current year ue, prior year S, prior year HEALTI	\$	Policyhold Paid, R Members	3 er Dividends Refunds to	rrent year \$	s Paid	Direct Losses
17. Incurred during current year Settled during current year: 18.1 By payment in full 18.2 By payment on compromised claims	nsurance pri urance Loans at issue BU	s less than or ec T NOT GREATE  A  an  ates (b) b taxes or fee	Direct P	(a) , on on this at iss 20 MONTHS NT AND 1	current year ue, prior year S, prior year HEALTI	\$	Policyhold Paid, R Members	3 er Dividends Refunds to	rrent year \$	s Paid	Direct Losses

24.MI

insured under indemnity only products



NAIC Group Code 3891	SIAIEU	r wiirinesota		LI	IFE I	NSURA	ANC	E				EAR 2020 Code 15473
DIRECT F	PREMIUMS		,	1		2 dit Life (G			3	4		5
AND ANNUITY C  1. Life insurance				nary	ar	nd Individu	ıal)	Gr	oup	Industria	al	Total
Annuity considerations								T				
<ol> <li>Deposit-type contract fund</li> <li>Other considerations</li> </ol>						XXX						
5. Totals (Sum of Lines 1 to												
DIRECT DIV	VIDENDS T											
POLICYHOLDERS/RI Life insurance:	EFUNDS T	O MEMBERS										
6.1 Paid in cash or left on dep	osit											
6.2 Applied to pay renewal pre												
6.3 Applied to provide paid-up endowment or premiu												
6.4 Other												
Annuities:	0 0.4)									<u> </u>		
7.1 Paid in cash or left on dep	osit											
7.2 Applied to provide paid-up 7.3 Other	annuities		<b>\</b>		•				<u> </u>			
7.4 Totals (Sum of Lines 7.1 to	0 7.3)											
8. Grand Totals (Lines 6.5 pl												
9. Death benefits												
Matured endowments												
11. Annuity benefits					ļ							
<ul><li>12. Surrender values and with</li><li>13. Aggregate write-ins for mis</li></ul>					ļ							
and benefits paid					ļ							
<ul><li>14. All other benefits, except a</li><li>15. Totals</li></ul>	accident and	d health			<del> </del>			+		+		
DETAILS OF WRITE-INS								+				
1301					<b> </b>			<b></b>		<b></b>		
1302. 1303.					<b></b>							
1398. Summary of Line 13 from												
1399. Totals (Lines 1301 thru 13	03 plus 139	98) (Line 13										
above)						1						
		Ordinary		Credit Life and Individ	ual)		Grou	מנ		ndustrial		Total
DIRECT DEATH	1	2	3	4		5		6	7	8	9	10
BENEFITS AND MATURED	No. of		No. of Ind.Pols.						No. of		No. of	
ENDOWMENTS	Pols. &		& Gr.			No. of	١.		Pols. &	A	Pols. &	
INCURRED  16. Unpaid December 31, prior	Certifs.	Amount	Certifs.	Amou	nt	Certifs.	F	Amount	Certifs.	Amount	Certifs.	Amount
year												
17. Incurred during current year Settled during current year:												
18.1 By payment in full												
18.2 By payment on compromised claims												
18.3 Totals paid												
18.4 Reduction by compromise			\									
18.5 Amount rejected		·	<b>\</b>									
19. Unpaid Dec. 31, current							7					
year (16+17-18.6)						af af						
POLICY EXHIBIT						No. of Policies						
20. In force December 31, prior				(a)								
year21. Issued during year				(a)								
22. Other changes to in force												
(Net)						+						
current year		rion ve a		(a)		L					1	
<ul><li>(a) Includes Individual Credit Life I Includes Group Credit Life Insu</li></ul>		•		onths at iss		•				rrent vear \$		
Loans greater than 60 months			•			•				-		
		Δ	CCIDE	NT AND	HEA	ALTH IN	NSU	RANCE				
			(O O I D E I		T	2			3	4		5
								Policyholde Paid Re	er Dividend efunds to	S		
					Dir	ect Premiu	ums	Members	or Credited		_	Direct Losses
24. Group Policies (b)			Direct P	remiums		Earned		on Direct	Business	Direct Losses	s Paid	Incurred
24.1 Federal Employees Health	n Benefits P	Plan			1						····	
premium (b)					<b></b>			-		<b>-</b>		
24.3 Collectively renewable pol	icies/certific	cates (b)			<u> </u>							
24.4 Medicare Title XVIII exemp	pt from stat	e taxes or fee	\ <b>I</b>									
Other Individual Policies: 25.1 Non-cancelable (b)												
25.2 Guaranteed renewable (b)	)											
25.3 Non-renewable for stated	reasons on	ly (b)										
25.4 Other accident only					Ī	<u></u>			<del></del>			
25.6 Totals (sum of Lines 25.1					1							
26. Totals (Lines 24 + 24.1 + 2	24.2 + 24.3	+ 24.4 + 25.6)										
		report: Number							-	and		-

insured under indemnity only products



DIRECT BUSINESS IN THE STATE OF Mississippi DURING THE YEAR 2020 LIFE INSURANCE NAIC Group Code 3891 NAIC Company Code 15473 3 2 Credit Life (Group **DIRECT PREMIUMS** AND ANNUITY CONSIDERATIONS Ordinary and Individual) Industrial Group Total Life insurance Annuity considerations 3 Deposit-type contract funds XXX XXX 4. Other considerations Totals (Sum of Lines 1 to 4) 5. DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS Life insurance: 6.1 Paid in cash or left on deposit 6.2 Applied to pay renewal premiums .. Applied to provide paid-up additions or shorten the 6.3 endowment or premium-paying period 64 Other 6.5 Totals (Sum of Lines 6.1 to 6.4) Annuities: Paid in cash or left on deposit 7.1 7.2 Applied to provide paid-up annuities 7.3 Other .. Totals (Sum of Lines 7.1 to 7.3) 8. Grand Totals (Lines 6.5 plus 7.4) DIRECT CLAIMS AND BENEFITS PAID 9. Death benefits Matured endowments 11 Annuity benefits . 12. Surrender values and withdrawals for life contracts Aggregate write-ins for miscellaneous direct claims 13 and benefits paid 14. All other benefits, except accident and health 15 Totals DETAILS OF WRITE-INS 1301. 1302. 1303 Summary of Line 13 from overflow page 1398. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 1399. above) Credit Life Ordinary (Group and Individual) Industrial Group Total DIRECT DEATH 5 9 10 BENEFITS AND MATURED No. of No. of Pols. & No. of Pols. & Ind.Pols No. of **ENDOWMENTS** & Gr. INCURRED Certifs. Amount Certifs Amount Certifs Amount Certifs. Amount Certifs Amount 16. Unpaid December 31, prior year ......17. Incurred during current year Settled during current year: 18.1 By payment in full 18.2 By payment on compromised claims 18.3 Totals paid 18.4 Reduction by compromise 18.5 Amount rejected 18.6 Total settlements 19. Unpaid Dec. 31. current year (16+17-18.6) **POLICY EXHIBIT** 20. In force December 31, prior year (a) 21. Issued during year 22. Other changes to in force (Net) 23. In force December 31 of current year (a) Includes Individual Credit Life Insurance prior year \$ .. current vear \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$ Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ .., current year \$ **ACCIDENT AND HEALTH INSURANCE** 5 Policyholder Dividends Paid, Refunds to Direct Premiums Members or Credited **Direct Losses** Direct Premiums Ea<u>rned</u> on Direct Business Direct Losses Paid Incurred 24 Group Policies (b) 24.1 Federal Employees Health Benefits Plan premium (b) Credit (Group and Individual) Collectively renewable policies/certificates (b) ...... Medicare Title XVIII exempt from state taxes or fee 24.3 24.4 Other Individual Policies: 25.1 Non-cancelable (b). 25.2 Guaranteed renewable (b) 25.3 Non-renewable for stated reasons only (b) Other accident only .. 25.5 All other (b). 25.6 Totals (sum of Lines 25.1 to 25.5)

and number of persons

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

insured under indemnity only products

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

26.



DIRECT PREMIUMS AND ANNITY CONSIDERATIONS  1. Life insurance 2. Arrundy considerations 3. Augustation of truds 4. Other considerations 5. Totals (Sum of Lines 1 to 4) DIRECT DIVIDENDS TO POLICYHOLDERSREFUNDS TO MEMBERS 6.1 Paid in cash or left on deposit 6.2 Applied to provide paid-up additions or shorten the 6.3 Applied to provide paid-up additions or shorten the 6.5 Totals (Sum of Lines 1 to 4) Annualises 7.1 Paid in cash or left on deposit 7.2 Applied to provide paid-up additions or shorten the 6.5 Totals (Sum of Lines 1 to 4) Annualises 7.1 Paid in cash or left on deposit 7.2 Applied to provide paid-up additions or shorten the 6.5 Totals (Sum of Lines 7 to 7.3) 8. Grand Totals (Lines 6 5 plus 7.4) DIRECT DIAMS AND BENEFITS PAID 9. Augustation of premium applies period 9. Augustation of premium applies 9. Augustation of premium applies 9. Augustation of premium applies 9. Augustation of premium applies 9. Augustation of pr	DIRECT BUSINESS IN THE NAIC Group Code 3891	STATE OF	F Missouri		LI	IFE II	NSUR/	ANC	E				'EAR 2020 Code 15473
AND ANNUTY CONSIDERATIONS OF A PRINCIPLE CONTROL OF A PRINCIPLE CONT	•	PREMILIMS		,			2			3			
2. Pentuly considerations  Described type content under  Described type content under  Described type content under  Described type content under  Described type described to the content to a content	AND ANNUITY O	CONSIDERA	ATIONS						Gr	oup	Industria	ı	Total
3. Depositions contract briefs 5. Totals Communications to 7. Other considerations to 7. Other considerations to 7. POLYPHOLDERREPUNDS TO MEMBERS 1. Parameters 8. Applied to previous previous previous 8. Applied to previous previous previous 8. Applied to previous previous previous 9. Other Control of the set of the control of the contro													
5. Totals (Sum of Limes 1 to 2)  POLYMOLDERS REPUNDS TO MEMBERS  6.12 Applied to payment with a profit may be a first or a profit							XXX				XXX		
DIRECT FOUNDERS PETUNOS TO MEMBERS  (1) Fair in cash or left on epose.  (2) Applied to provide paid up additions or shorten the good period of the pai													
Life insurance.  10.1 Paul in rate or left on degosal  10.2 Applied to say remostly personal present and the control of the endoward of postular-payers of shorter the endoward of postular-payers of shorter the endoward of postular-payers of shorter the endoward of postular-payers of shorter the endoward of postular-payers of shorter the endoward of postular-payers of shorter the endoward of postular-payers of shorter the endoward of postular-payers of shorter the endoward of postular-payers of postular	•	,	о										
6.1 Paci In cash or left on deposit 8.2 Applied to provide pacing additions or electron to 9.3 Applied to provide pacing additions or electron to 9.3 Applied to provide pacing period		EFUNDS TO	O MEMBERS										
6.3 Agoliet to provide gas-fully additions or inhoratine decided of the control o		osit											
6.4 One emclowment of primitime, paying pricid 6.5 Traces (Stum of Lines 6.1 to 6.4). Annualize. 7.2 Applied to growthe paid-spannules 7.2 Applied to growthe paid-spannules 7.3 Officer (T. Paid in case of left on depose in the paid of left of lef													
5-1 Orier So. Totals (Sum of Lines 6-1 to 6-4)  Armatives  7-2 Applied to provide paid-up annutaties  7-3 Orier  7-3 Orier  7-4 Totals (Sum of Lines 1-7 to 7-3)  8- Grand Totals (Lines 5-7 to 7-3)  9- Death benefits  10- Matural endowments  10- Matural endowments  10- Matural endowments  11- Annut penelits  11- Annut penelits  11- Annut penelits  11- Totals  12- Summary of Line 1-3 form overflow page  13- Totals  13- Total													
Armutines: 7.1 Pad in cash or left on deposal 7.2 Applied to provide packup armutilies 7.2 Object of the part of 15 7 3 8. Grand India (Lines 6.5 plas 7.4) 9. Death borrelits 1. Armutip benefits: 1. Armutip benefits	6.4 Other												
7.1 Paid in cash or left on deposed. 7.2 Applied to provide peli-dup annualises 7.3 Other	•	.0 6.4)											
7.2 Applied to provide peids up annulities 7.4 Total Scarled (Lives 5 pts 7 x) 8. Order Column Annul Description of the period o	7.1 Paid in cash or left on dep	osit											
7.4 Totals (Sum of Lines 7, 10 7.3) 6. Grand Totals (Lines 6, plus 74) DIRECT CLAMS AND BENETIS PAID 9. Death benefits 10. Maland and/ournersh 11. Maland and/ournersh 12. Surrender values and withdrawsis for life contracts. 13. Aggregate write-ins for miscellaneous direct claims and benefits paid 14. All other benefits, except accident and health 15. Totals 17. Total 18. Surrender values (Survey and Individuals) 18. Surrender values (Survey and Individuals) 19. Total 19. Unpoid December 31, prior year 19. Settled during current year 19. Settled during current year 19. Settled during current year 19. Settled during current year 19. Total 19. Total paid 19. Total paid 19. Total paid 19. Total 19. To	7.2 Applied to provide paid-up	annuities		<b>\</b>									
6. Grand Totals (Lines 5.9 plus 7.4)  9. Death benefits  1. Annually benefits and withdrawals for life contracts 1. Annually benefits and withdrawals for life contracts 1. Annually benefits paid 1. All orbor benefits, except excident and health 1. Totals 1. Totals 1. All orbor benefits, except excident and health 1. Totals 1													
9. Death benefits 11. Annuly benefits 11. Annuly benefits 11. Annuly benefits 12. Surreined values and withdrawals for life contracts 13. Aggregate write ins for miscelleneous direct claims 14. All other benefits, except accident and health 15. Totals DETALS OF WRITE-INS 1901. 1902. 1903. 1904. 1905. 1906. 1906. 1907. 1908. 1908. 1909	8. Grand Totals (Lines 6.5 pl	lus 7.4)						<i>A</i>					
10. Matured and/comments. 12. Surronder values and withdrawals for life contracts. 13. Agrigates which has for miscellands and statements. 14. Totals of breaking and statements. 15. Totals  DIFFALLS OF WRITE-INS  1502. 1503. 150							<b>\</b>						
11. Annuly benefits 2. Surrender values and withdrawals for life contracts and benefits paid 4. All other benefits, except accident and health 5. DETAILS OF WRITE-INS 130. 130. 130. 130. 130. 130. 130. 130.													
13. Aggregate write-ins for miscollaneous direct claims and benefits paid  14. All other benefits, except accident and health  15. Totals  101.  1302.  1303. Summary of Line 13 from overflow page.  1309. Totals (Lines 1301 thru 1303 plus 1396) (Line 13 solve).  1309. Totals (Lines 1301 thru 1303 plus 1396) (Line 13 solve).  1309. Totals (Lines 1301 thru 1303 plus 1396) (Line 13 solve).  1309. Totals (Lines 1301 thru 1303 plus 1396) (Line 13 solve).  14. All process of the control o	11. Annuity benefits												
and benefits paid  15. Totals  DETALS OF WRITE-INS  301.  DETALS OF WRITE-INS  301.  DETALS OF WRITE-INS  301.  DETALS OF WRITE-INS  302.  303.  303.  304.  DETALS OF WRITE-INS  305.  DIRECT DEATH BENEFITS AND DIRECT DEATH BENEFITS AND MATURED No. of Inch 201.  DIRECT DEATH BENEFITS AND MATURED No. of Inch 201.  No. of Inch 201.  No. of Inch 201.  No. of Inch 201.  No. of Pos. 8.  Geriffs.  Amount Certifs.  Amo											<b></b>		
14. All other benefits, except accident and health 15. Totals  DETAILS OF WRITE-INS 1901 1902 1908 1908 1908 1908 1908 1908 1908 1908	and benefits paid												
DETAILS OF WRITE-INS 1303. 1308. Summary of Line 13 from overflow page 1309. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)    Crostil Life (Group and Individual)   Group   Industrial   Total	<ol><li>All other benefits, except a</li></ol>										<b>.</b>		
1301. 1302. 1303. Summary of Line 13 from overflow page 1309. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)  DIRECT DEATH BENEFITS AND MATURED Pols. 8 No. of No		<u> </u>							1				
1902. 1908. Surmary of Line 13 from overflow page 1909. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 1909. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 1909. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 1909. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 1909. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 1909. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 1909. Total 1 2	1301.								<u> </u>		<u> </u>		
1398. Summary of Line 13 from overflow page	1302.												
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)  DIRECT DEATH BENEFITS AND MATURED No. of ENDOWMENTS Pols. & S. Gr. No. of No. o													
DIRECT DEATH BENEFIS AND ENDOWMENTS POLS & INCURRED Certifs DISCOMMENTS POLS & No. of Pols & No. of	1399. Totals (Lines 1301 thru 13	•	•										
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED Certits Amount Certits Amou	above)												
DIRECT DEATH BENEFITS AND MATURED Plos & Certifs.  No. of Ind Pols. Soft Certifs.  Amount C			Ordinary			ual)		Grou	ın	In	dustrial		Total
MATURED Pols. & Amount Pols. No. of Pols. & Gertifs. Amount Ce				3		uu.,	5	0.00				9	
ENDOWMENTS   Pols. & Amount   Sertifs   Amount   Certifs   Certifs   Amount   Certifs   Certif		No of								No of		No of	
16. Unpaid December 31, prior year 17. Incurred during current year 18.1 By payment in full. 18.2 By payment in full. 18.2 By payment in full. 18.3 Totals paid. 18.4 Reduction by compromise 18.5 Amount rejected. 18.6 Total settlements. 19. Unpaid Dec. 31, current year (18.1-18.6).  POLICY EXHIBIT 20. In force December 31, prior year 21. Issued during year 22. Other changes to in force (18.1). 23. In force December 31 of current year 24. Group Policies (b).  ACCIDENT AND HEALTH INSURANCE  11. 2 Policy fremiums Direct Premium S Direct Premium S Direct		Pols. &		& Gr.	_					Pols. &		Pols. &	
year Settled during current year Settled during current year Settled during current year Settled during current year Settled during current year Settled during current year Settled during current year Settled during current year Settled during current year Settled during current year Settled during current year Settled during current Settled during year Settled during during settled year Settled during during settled year settled year settled year settled year settled year settled year settled year settled year settled year settled year settled year settled year settled year settled year settled year year settled year settled year year settled year year settled year year settled year year settled year year settled year year year settled year year year settled year year year settled year year year settled year year year year year year year year		Certifs.	Amount	Certifs.	Amoui	<u>nt</u>	Certifs.	F	Amount	Certifs.	Amount	Certifs.	Amount
Settled during current year:  18.1 By payment in full  18.2 By payment on compromised claims  18.3 Totals paid  18.4 Reduction by compromise  18.5 Amount rejected  18.6 Total settlements  19. Unpaid Dec. 31, current year (18.6 Total settlements  19. Unpaid Dec. 31, current year (18.6 Total settlements)  19. Unpaid Dec. 31, current year (18.6 Total settlements)  20. In force December 31, prior year  21. Issued during year  22. Other changes to in force  (Net)  23. In force December 31 of  19. Current year (18.6 Total year)  24. Carding Group Credit Life Insurance prior year S  10. Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$  24. Group Policies (b)  24.1 Federal Employees Health Benefits Plan premium (b)  24.2 Credit (Group and Individual)  24.3 Collectively renewable policies(certificates (b)  24.4 Medicare Title XVIII exempt from state laxes or fee Other Individual Policies:  25. Non-cancelable (b)  26. Non-cancelable (c)  27. Rocaledate (c)  28. Rocaledate (c)  29. Rocaledate (c)  29. Cardit (Group and Individual)  29. Credit (Group and Individual)  29. Credit (Group and Individual)  29. Credit (Group and Individual)  29. Credit (Group and Individual)  29. Secondary from state laxes or fee Other Individual Policies:  29. Non-cancelable (b)  29. Non-cancelable (c)	year												
18.1 By payment in full   18.2 By payment in full   18.2 By payment on compromised claims   18.3 Totals paid   18.4 Reduction by compromise   18.5 Annount rejected   18.5 Annount rejected   18.6 Total settlements   19. Unpaid Dec. 31, current year (16+17+18.6)   19. Unpaid Dec. 31, current year (16+17+18.6)   19. Unpaid Dec. 31, current year   22. Other changes to in force (Net)   23. In force December 31 of current year   (a)   23. In force December 31 of current year   (a)   23. In force December 31 of current year   (a)   24. Includes Individual Credit Life Insurance prior year   (a)   27. Includes Individual Credit Life Insurance prior year   (a)   28. Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year   (a)   28. Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year   (a)   29. Current year   (a)	• •												
compromised claims 18.3 Totals paid 18.4 Reduction by compromise 18.5 Amount rejected 18.5 Amount rejected 19. Unpaid Dec. 31, current year (16+17-18.6)  POLICY EXHIBIT 20. In force December 31, prior year 21. Issued during year 22. Other changes to in force (Net) 23. In force December 31 of current year 3 includes Group Credit Life Insurance prior year \$ Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$	18.1 By payment in full												
18.3 Totals paid 18.4 Reduction by compromise 18.5 Amount rejected 18.6 Total settlements 19. Unpaid Dec. 31, current year (16+17-18.6)  POLICY EXHIBIT 20. In force December 31, prior year 21. Issued during year 22. Other changes to in force (Net) 23. In force December 31 of current year 3 Includes Individual Credit Life Insurance prior year \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$ ACCIDENT AND HEALTH INSURANCE  1 2 Policy 3 Very Current year \$ Policy 3 Very Current year \$ Policy 1 3 Very Current year \$ Policy 3 Very Current year \$ Policy 3 Very Current year \$ Policy 1 3 Very Current year \$ Policy 3 Policy Moder Dividends Paid, Refunds to Members or Credited on Direct Business Direct Losses Incurred 24. Group Policies (b) 24. Group Policies (c) 24.1 Federal Employees Health Benefits Plan premium (b) 24.2 Credit (Group and Individual) 24.3 Collectively renewable policies/certificates (b) 24.4 Medicare Title XVIII exempt from state taxes or fee Other Individual Policies: 25.1 Non-cancelable (b)													
18.5 Amount rejected 18.6 Total settlements 19. Unpaid Dec. 31, current year (16+17-18.6)  POLICY EXHIBIT 20. In force December 31, prior year 21. Issued during year 22. Other changes to in force (Net) 23. In force December 31 of current year 3 includes Individual Credit Life Insurance prior year \$ current year 4 includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ COLIDENT AND HEALTH INSURANCE  1 2 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business Direct Losses Paid Direct Los	18.3 Totals paid												
18.6 Total settlements 19. Unpaid Dec. 31, current year (16+17-18.6)  POLICY EXHIBIT 20. In force December 31, prior year 21. Issued during year 22. Other changes to in force (Net) 23. In force December 31 of current year 24. Includes Group Credit Life Insurance prior year \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ Includ				<b>\</b>			\						
POLICY EXHIBIT 20. In force December 31, prior year 21. Issued during year 22. Other changes to in force (Net) 31. In force December 31 of current year 32. In force December 31 of current year 32. In force December 31 of current year 33. Includes Individual Credit Life Insurance prior year \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ CUTTENT AND HEALTH INSURANCE  1 2 3 Collectively renewable policies (b) 24. Group Policies (b) 24. Group Policies (b) 24. Group Policies (b) 24. Credit (Group and Individual) 24. Credit (Group and Individual) 24. Credit (Group and Individual) 24. Credit (Group and Individual) 24. Credit (Group renewable policies/certificates (b) 24. Medicare Title XVIII exempt from state taxes or fec Other Individual Policies: 25. 1 Non-cancelable (b)	18.6 Total settlements												
POLICY EXHIBIT  20. In force December 31, prior year 21. Issued during year 22. Other changes to in force (Net) 23. In force December 31 of current year \$  Includes Individual Credit Life Insurance prior year \$  Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$  Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$  CUIDENT AND HEALTH INSURANCE  1 2 Policy Members or Credited Policy Members or Credited on Direct Premiums  24. Group Policies (b) 24. Group Policies (b) 24.1 Federal Employees Health Benefits Plan premium (b) 24.2 Credit (Group and Individual) 24.3 Collectively renewable policies/certificates (b) 24.4 Medicare Title XVIII exempt from state taxes or fee Other Individual Policies: 25.1 Non-cancelable (b)	•							7					
POLICY EXHIBIT 20. In force December 31, prior year 21. Issued during year 22. Other changes to in force (Net). 23. In force December 31 of current year 24. In force December 31 of current year 25. In force December 31 of current year 26. In force December 31 of current year 27. Includes Individual Credit Life Insurance prior year \$ 28. Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ 29. Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 29. Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 29. Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 29. Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 29. Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 20. Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 20. Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 20. Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 20. Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 20. Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 20. Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 21. Includes Individual Great it is greatly at the prior year \$ 22. Credit Premiums	year (16+17-18.6)	+		-			No of	•					
year													
21. Issued during year 22. Other changes to in force (Net) 23. In force December 31 of current year 31. Includes Individual Credit Life Insurance prior year \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ CUIDENT AND HEALTH INSURANCE  1 2 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Premiums Direct Premiums Direct Premiums Direct Premium (b) 24. Group Policies (b) 24.1 Federal Employees Health Benefits Plan premium (b) 24.2 Credit (Group and Individual) 24.3 Collectively renewable policies/certificates (b) 24.4 Medicare Title XVIII exempt from state taxes or fee Other Individual Policies: 25.1 Non-cancelable (b)	•				(a)								
(Net)	21. Issued during year						I						
23. In force December 31 of current year (a) Includes Individual Credit Life Insurance prior year \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ Incurred \$ Incu													
(a) Includes Individual Credit Life Insurance prior year \$ current year \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ current year \$ Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$ ACCIDENT AND HEALTH INSURANCE  1 2 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business Direct Losses Paid Incurred  24. Group Policies (b) Direct Premium (b) Direct Business Direct Direct Premium (b) Direct Business Direct Direct Business Direct Losses Paid Incurred  24.2 Credit (Group and Individual) Direct Business Direct Direct Business Direct Direct Direct Business Direct Losses Paid Incurred Direct Business Direct Losses Paid Incurred Direct Business Direct Losses Paid Incurred Direct Business Direct Losses Paid Incurred Direct Business Direct Losses Paid Incurred Direct Business Direct Losses Paid Incurred Direct Business Direct Losses Paid Incurred Direct Business Direct Losses Paid Incurred Direct Business Direct Losses Paid Incurred Direct Business Direct Losses Paid Incurred Direct Business Direct Losses Paid Incurred Direct Business Direct Losses Paid Incurred Direct Business Direct Losses Paid Incurred Direct Business Direct Losses Paid Incurred Direct Business Direct Losses Paid Incurred Direct Business Direct Losses Paid Direct Losses Paid Direct Losses Paid Direct Losses Paid Direct Losses Paid Direct Losses Paid Direct Losses Paid Direct Losses Paid Direct Losses Paid Direct Losses Paid Direct Losses Paid Direct Losses Paid Direct Premium Direct Business Direct Losses Paid Direct Losses Paid Direct Premium Direct Business Direct Losses Paid Direct Premium Direct Business Direct Losses Paid Direct Premium Direct Business Direct Losses Paid Direct Premium Direct Business Direct Losses Paid Direct Premium Direct Business Direct Losses Paid Direct Premium Direct Business Direct Losses Paid Direct Premium Direct Premium Direct Premium Direct Premium Direct Premium Direct Premium Direct Premium	23. In force December 31 of												
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ ACCIDENT AND HEALTH INSURANCE   1 2 3 4 5  Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business Direct Losses Paid  24. Group Policies (b)  24.1 Federal Employees Health Benefits Plan premium (b)  24.2 Credit (Group and Individual)  24.3 Collectively renewable policies/certificates (b)  24.4 Medicare Title XVIII exempt from state taxes or fee Other Individual Policies:  25.1 Non-cancelable (b)		Insurance o	rior year \$	1	\- /	current	vear \$					1	
ACCIDENT AND HEALTH INSURANCE  1 2 3 4 5 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business Direct Losses Paid Incurred  24. Group Policies (b)	Includes Group Credit Life Insu	urance Loan	ns less than or eq	qual to 60 m	onths at iss	ue, pric	or year \$				rent year \$		
1 2 3 4 5 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Losses Paid Direct Losses Paid Incurred  24. Group Policies (b)	Loans greater than 60 months	at issue BU	JT NOT GREATE	ER THAN 12	20 MONTHS	S, prior	year \$			, cui	rent year \$		
24. Group Policies (b)				CCIDE	NT AND	HEA		ISU					
24. Group Policies (b)					1		2						5
24. Group Policies (b) 24.1 Federal Employees Health Benefits Plan premium (b) 24.2 Credit (Group and Individual) 24.3 Collectively renewable policies/certificates (b) 24.4 Medicare Title XVIII exempt from state taxes or fee Other Individual Policies: 25.1 Non-cancelable (b)									Páid, R	efunds to			
24. Group Policies (b)				Direct P	remiume	Dire		ıms			Direct Losses	s Paid	
premium (b)	,			200(1					J D.1001				
24.2 Credit (Group and Individual)													
24.3 Collectively renewable policies/certificates (b)	24.2 Credit (Group and Individu	ual)									<b></b>		
Other Individual Policies: 25.1 Non-cancelable (b)	24.3 Collectively renewable pol	licies/certific	cates (b)				<b></b>						
25.1 Non-cancelable (b)		ρι ποm state	e taxes or fee	<b>\</b>							<b>†</b>		
25.2 Guaranteed renewable (b)	25.1 Non-cancelable (b)												
	•	•									<b></b>		
25.3 Non-renewable for stated reasons only (b)				<b>T</b>			<u>'</u>	1	1		<u> </u>		
25.5 All other (b)	25.5 All other (b)												
25.6 Totals (sum of Lines 25.1 to 25.5)	25.6 Totals (sum of Lines 25.1	to 25.5)				<b> </b>					<b>†</b>		
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.0) (b) For health business on indicated lines report: Number of persons insured under PPO managed care products			+ 24 1 + 25 61										

24.MO

insured under indemnity only products



DIRECT BUSINESS IN THE SNAIC Group Code 3891	STATE O	F Montana		LI	IFE II	NSURA	ANC	E				EAR 2020 Code 15473
·	PREMIUMS			1		2 dit Life (G			3	4	Company	5
AND ANNUITY C	ONSIDERA		Ordi	nary		nd Individu		Gro	oup	Industrial	1	Total
Life insurance      Annuity considerations												
Deposit-type contract fund	s					XXX				XXX		
Other considerations      Totals (Sum of Lines 1 to 4)												
DIRECT DIV	VIDENDS T											
POLICYHOLDERS/RE Life insurance:	EFUNDS TO	O MEMBERS										
6.1 Paid in cash or left on dep												
<ul><li>6.2 Applied to pay renewal pre</li><li>6.3 Applied to provide paid-up</li></ul>										-		
endowment or premiu	m-paying pe	eriod										
6.4 Other												
Annuities:	,											
<ul><li>7.1 Paid in cash or left on dep</li><li>7.2 Applied to provide paid-up</li></ul>			····									
7.3 Other					7 7.				<del></del>			
7.4 Totals (Sum of Lines 7.1 to							<u>,</u>					
8. Grand Totals (Lines 6.5 pl		ITS PAID	-11			+						
9. Death benefits									<b></b>			
Matured endowments      Annuity benefits								-				
12. Surrender values and with	drawals for	life contracts										
Aggregate write-ins for mis and benefits paid												
<ol><li>All other benefits, except a</li></ol>												
15. Totals  DETAILS OF WRITE-INS												
1301.												
1302.												
1303 1398. Summary of Line 13 from (	overflow pa	ge										
1399. Totals (Lines 1301 thru 13 above)	03 plus 139	8) (Line 13										
above)			1 (	Credit Life				1	I			
		Ordinary	(Group	and Individ	ual)		Grou			ndustrial		Total
DIRECT DEATH BENEFITS AND	1	2	3 No. of	4		5		6	7	8	9	10
MATURED	No. of		Ind.Pols.			No. of			No. of		No. of	
ENDOWMENTS INCURRED	Pols. & Certifs.	Amount	& Gr. Certifs.	Amour	nt	No. of Certifs.	F	Amount	Pols. & Certifs.	Amount	Pols. & Certifs.	Amount
16. Unpaid December 31, prior year												
17. Incurred during current year												
Settled during current year: 18.1 By payment in full												
18.2 By payment on												
compromised claims												
18.4 Reduction by compromise			<b>\</b>									
18.5 Amount rejected			<b>\</b>			-						-
19. Unpaid Dec. 31, current							٧.					
year (16+17-18.6)						No. of						
POLICY EXHIBIT 20. In force December 31, prior						Policies						
year				(a)								
21. Issued during year22. Other changes to in force						<b> </b>						
(Net)												
23. In force December 31 of current year				(a)		<u> </u>						
(a) Includes Individual Credit Life Includes Group Credit Life Insu		•		, C						rrent voor ¢		
Loans greater than 60 months			•			•				•		
		A	CCIDE	NT AND	HEA	LTH IN	NSU	RANCE				
				1		2		;	3 or Dividond	4		5
									efunds to			
			Direct P	remiums	Dire	ect Premit Earned	ums		or Credited Business	Direct Losses	Paid	Direct Losses Incurred
24. Group Policies (b)			2,,00(1)					SII DIICOL		2000 200063		
24.1 Federal Employees Health premium (b)												
24.2 Credit (Group and Individu	ıal)				ļ							
<ul><li>24.3 Collectively renewable pol</li><li>24.4 Medicare Title XVIII exemptor</li></ul>												
Other Individual Policies:									_		<u></u>	
25.1 Non-cancelable (b)						-17	\.		<b></b>	-	<del>-</del>	
25.3 Non-renewable for stated						······································						
25.4 Other accident only										-		
25.5 All other (b)		i i			<b></b>					<u> </u>		
26. Totals (Lines 24 + 24.1 + 2	24.2 + 24.3	+ 24.4 + 25.6)										
(b) For health business on indic	cated lines	report: Number of	of persons i	nsured unde	er PPO	) managed	d care	products		and	number of	persons

insured under indemnity only products



NAIC Group Code 3891				L		ISURA	NC	E		NAIC	Company	Code 15473
DIRECT F	PREMIUMS		,	1	Cred	2 it Life (Gro	oup	;	3	4		5
AND ANNUITY C				inary		d Individua		Gr	oup	Industria	al	Total
Annuity considerations					T							
Deposit-type contract fund		li di di di di di di di di di di di di di				XXX				xxx.		
<ol> <li>Other considerations</li> <li>Totals (Sum of Lines 1 to a</li> </ol>												
` `	VIDENDS TO	)										
POLICYHOLDERS/RI												
Life insurance: 6.1 Paid in cash or left on dep	ooit.											
6.2 Applied to pay renewal pre												
6.3 Applied to provide paid-up	additions or	shorten the										
endowment or premiu 6.4 Other												
6.5 Totals (Sum of Lines 6.1 to												
Annuities:	,											
7.1 Paid in cash or left on dep	osit											
7.2 Applied to provide paid-up			<b>\</b>		•	-						
7.3 Other			<b></b>		<del> </del>		-				T	
8. Grand Totals (Lines 6.5 pl												
DIRECT CLAIMS A	ND BENEFI	TS PAID										
9. Death benefits		li i										
Matured endowments     Annuity benefits		i i			ł			<b>+</b>				
12. Surrender values and with					İ			1		1		
13. Aggregate write-ins for mis	scellaneous o	direct claims										
and benefits paid					<b></b>							
15. Totals	ACCIDENT AND				†			+				
DETAILS OF WRITE-INS												
1301.					ļ			<b></b>				
1302.												
1303 1398. Summary of Line 13 from												
1399. Totals (Lines 1301 thru 13												
above)												
				Credit Life								
DIRECT DEATH	Or 1	rdinary 2	(Group	and Individ	lual)	5	Grou	р 6	7	ndustrial 8	9	Total 10
BENEFITS AND	'	2	No. of	-		3		U	,	0	9	10
MATURED	No. of		Ind.Pols.						No. of		No. of	
ENDOWMENTS INCURRED	Pols. & Certifs.	Amount	& Gr. Certifs.	Amou	nt	No. of Certifs.	Δ	Amount	Pols. & Certifs.	Amount	Pols. & Certifs.	Amount
16. Unpaid December 31, prior	Ocitiis.	Amount	Certiis.	Amou	111	Certiis.		anount	Ocitiis.	Amount	Certiis.	Amount
year												
17. Incurred during current year Settled during current year:												
18.1 By payment in full												
18.1 By payment in full 18.2 By payment on												
18.1 By payment in full												
18.1 By payment in full	·											
18.1 By payment in full												
18.1 By payment in full												
18.1 By payment in full												
18.1 By payment in full 18.2 By payment on compromised claims						No. of						
18.1 By payment in full					)	No. of Policies						
18.1 By payment in full				(a)	)							
18.1 By payment in full				(a)								
18.1 By payment in full				(a)								
18.1 By payment in full				(a)								
18.1 By payment in full 18.2 By payment on compromised claims 18.3 Totals paid 18.4 Reduction by compromise 18.5 Amount rejected 18.6 Total settlements 19. Unpaid Dec. 31, current year (16+17-18.6)  POLICY EXHIBIT 20. In force December 31, prior year 21. Issued during year 22. Other changes to in force (Net) 23. In force December 31 of current year				(a)		Policies						
18.1 By payment in full 18.2 By payment on compromised claims 18.3 Totals paid 18.4 Reduction by compromise 18.5 Amount rejected 18.6 Total settlements 19. Unpaid Dec. 31, current year (16+17-18.6)  POLICY EXHIBIT 20. In force December 31, prior year 21. Issued during year 22. Other changes to in force (Net) 23. In force December 31 of current year (a) Includes Individual Credit Life I	Insurance price	•		(a),	current	Policies  /ear \$						
18.1 By payment in full	Insurance pricurance Loans	less than or eq	jual to 60 m	(a), (a) onths at iss	current y	Policies  year \$ r year \$			, Cl	urrent year \$		
18.1 By payment in full 18.2 By payment on compromised claims 18.3 Totals paid 18.4 Reduction by compromise 18.5 Amount rejected 18.6 Total settlements 19. Unpaid Dec. 31, current year (16+17-18.6)  POLICY EXHIBIT 20. In force December 31, prior year 21. Issued during year 22. Other changes to in force (Net) 23. In force December 31 of current year (a) Includes Individual Credit Life I	Insurance pricurance Loans	s less than or eq FNOT GREATE	qual to 60 m	(a), (a), (a) onths at iss	current y	Policies  year \$			, Cl	urrent year \$		
18.1 By payment in full	Insurance pricurance Loans	s less than or eq FNOT GREATE	qual to 60 m ER THAN 12	(a), (on this at iss 20 MONTHS	current y	year \$ r year \$ year \$		RANCE	, Cl	ırrent year \$		
18.1 By payment in full	Insurance pricurance Loans	s less than or eq FNOT GREATE	qual to 60 m ER THAN 12	(a), (a), (a) onths at iss	current y	Policies  year \$		RANCE	, cu	urrent year \$		5
18.1 By payment in full	Insurance pricurance Loans	s less than or eq FNOT GREATE	qual to 60 m ER THAN 12	(a), (on this at iss 20 MONTHS	current youe, prior y	Policies  year \$ r year \$ year \$ LTH IN 2	SUI	Policyholde Paid, Re	3 er Dividendefunds to	s 4		
18.1 By payment in full	Insurance pricurance Loans	s less than or eq FNOT GREATE	qual to 60 m ER THAN 12	(a) nonths at iss 20 MONTHS	current youe, prior y	year \$ r year \$ year \$ LTH IN 2	SUI	Policyholde Paid, Re Members	3 er Dividendefunds to or Credited	urrent year \$	s Paid	Direct Losses
18.1 By payment in full	Insurance pricurance Loans at issue BUT	s less than or eq ΓΝΟΤ GREATE <b>Δ</b>	qual to 60 m ER THAN 12	(a), (on this at iss 20 MONTHS	current youe, prior y	Policies  year \$ r year \$ year \$ LTH IN 2	SUI	Policyholde Paid, Re Members	3 er Dividendefunds to	s 4	s Paid	
18.1 By payment in full 18.2 By payment on compromised claims 18.3 Totals paid 18.4 Reduction by compromise 18.5 Amount rejected 18.6 Total settlements 19. Unpaid Dec. 31, current year (16+17-18.6)  POLICY EXHIBIT 20. In force December 31, prior year 21. Issued during year 22. Other changes to in force (Net) 23. In force December 31 of current year (a) Includes Individual Credit Life I Includes Group Credit Life Insu Loans greater than 60 months  24. Group Policies (b) 24.1 Federal Employees Healtit	Insurance pricurance Loans at issue BUT	s less than or eq F NOT GREATE	qual to 60 m ER THAN 12	(a) nonths at iss 20 MONTHS	current y ue, prior S, prior y	year \$ r year \$ year \$ LTH IN 2	SUI	Policyholde Paid, Re Members	3 er Dividendefunds to or Credited	urrent year \$	s Paid	Direct Losses
18.1 By payment in full	Insurance pricurance Loans at issue BUT	s less than or eq F NOT GREATE	qual to 60 m ER THAN 12	(a) nonths at iss 20 MONTHS	current y ue, prior S, prior y	year \$ r year \$ year \$ LTH IN 2	SUI	Policyholde Paid, Re Members	3 er Dividendefunds to or Credited	urrent year \$	s Paid	Direct Losses
18.1 By payment in full 18.2 By payment on compromised claims 18.3 Totals paid 18.4 Reduction by compromise 18.5 Amount rejected 18.6 Total settlements 19. Unpaid Dec. 31, current year (16+17-18.6)  POLICY EXHIBIT 20. In force December 31, prior year 21. Issued during year 22. Other changes to in force (Net) 23. In force December 31 of current year (a) Includes Individual Credit Life I Includes Group Credit Life Insu Loans greater than 60 months  24. Group Policies (b) 24.1 Federal Employees Healtit	Insurance pricurance Loans at issue BUT	S less than or eq F NOT GREATE	qual to 60 m ER THAN 12	(a) nonths at iss 20 MONTHS	current y ue, prior S, prior y	year \$ r year \$ year \$ LTH IN 2	SUI	Policyholde Paid, Re Members	3 er Dividendefunds to or Credited	urrent year \$	s Paid	Direct Losses
18.1 By payment in full	Insurance pricurance Loans at issue BUT	R less than or equal to the state of the sta	qual to 60 m ER THAN 12	(a) nonths at iss 20 MONTHS	current y ue, prior S, prior y	year \$ r year \$ year \$ LTH IN 2	SUI	Policyholde Paid, Re Members	3 er Dividendefunds to or Credited	urrent year \$	s Paid	Direct Losses
18.1 By payment in full	Insurance pricurance Loans at issue BUT  The Benefits Planal (Including the Including	A NOT GREATE  A A A A A A A A A A A A A A A A A A A	qual to 60 m ER THAN 12	(a) nonths at iss 20 MONTHS	current y ue, prior S, prior y	year \$ r year \$ year \$ LTH IN 2	SUI	Policyholde Paid, Re Members	3 er Dividendefunds to or Credited	urrent year \$	s Paid	Direct Losses
18.1 By payment in full	insurance pricurance Loans at issue BUT	A A A A A A A A A A A A A A A A A A A	qual to 60 m ER THAN 12	(a) nonths at iss 20 MONTHS	current y ue, prior S, prior y	year \$ r year \$ year \$ LTH IN 2	SUI	Policyholde Paid, Re Members	3 er Dividendefunds to or Credited	urrent year \$	s Paid	Direct Losses
18.1 By payment in full 18.2 By payment on compromised claims 18.3 Totals paid 18.4 Reduction by compromise 18.5 Amount rejected 18.6 Total settlements 19. Unpaid Dec. 31, current year (16+17-18.6)  POLICY EXHIBIT 20. In force December 31, prior year 21. Issued during year 22. Other changes to in force (Net) 23. In force December 31 of current year (a) Includes Individual Credit Life I Includes Group Credit Life Inst Loans greater than 60 months  24. Group Policies (b) 24.1 Federal Employees Health premium (b) 24.2 Credit (Group and Individu 24.3 Collectively renewable pol 24.4 Medicare Title XVIII exem Other Individual Policies: 25.1 Non-cancelable (b) 25.2 Guaranteed renewable (b)	insurance pricurance Loans at issue BUT	Annotates (b)taxes or fee	qual to 60 m ER THAN 12	(a) nonths at iss 20 MONTHS	current y ue, prior S, prior y	year \$ r year \$ year \$ LTH IN 2	SUI	Policyholde Paid, Re Members	3 er Dividendefunds to or Credited	urrent year \$	s Paid	Direct Losses
18.1 By payment in full 18.2 By payment on compromised claims 18.3 Totals paid 18.4 Reduction by compromise 18.5 Amount rejected 18.6 Total settlements 19. Unpaid Dec. 31, current year (16+17-18.6)  POLICY EXHIBIT 20. In force December 31, prior year 21. Issued during year 22. Other changes to in force (Net) 23. In force December 31 of current year (a) Includes Individual Credit Life Includes Group Credit Life Inst. Loans greater than 60 months  24. Group Policies (b) 24.1 Federal Employees Health premium (b) 24.2 Credit (Group and Individu 24.3 Collectively renewable pol 24.4 Medicare Title XVIII exem Other Individual Policies: 25.1 Non-cancelable (b)	Insurance pricurance Loans at issue BUT  In Benefits Planal I I I I I I I I I I I I I I I I I I I	A NOT GREATE A NOT	pual to 60 m ER THAN 1:	(a) , (on this at iss 20 MONTHS 11 remiums	current y ue, prior S, prior y	year \$ r year \$ year \$ LTH IN 2	SUI	Policyholde Paid, Re Members	3 er Dividendefunds to or Credited	urrent year \$	s Paid	Direct Losses
18.1 By payment in full 18.2 By payment on compromised claims 18.3 Totals paid 18.4 Reduction by compromise 18.5 Amount rejected 18.6 Total settlements 19. Unpaid Dec. 31, current year (16+17-18.6)  POLICY EXHIBIT 20. In force December 31, prior year 21. Issued during year 22. Other changes to in force (Net) 23. In force December 31 of current year (a) Includes Individual Credit Life Includes Group Credit Life Insu Loans greater than 60 months  24. Group Policies (b) 24.1 Federal Employees Health premium (b) 24.2 Credit (Group and Individu 24.3 Collectively renewable pol 24.4 Medicare Title XVIII exem Other Individual Policies: 25.1 Non-cancelable (b) 25.2 Guaranteed renewable (b) 25.3 Non-renewable for stated 25.4 Other accident only 25.5 All other (b)	Insurance pricurance Loans at issue BUT  Benefits Plaual)  Licies/certifica pt from state  neasons only	A NOT GREATE A NOT	qual to 60 m ER THAN 12	(a) , (on this at iss 20 MONTHS 11 remiums	current y ue, prior S, prior y	year \$ r year \$ year \$ LTH IN 2	SUI	Policyholde Paid, Re Members	3 er Dividendefunds to or Credited	urrent year \$	s Paid	Direct Losses
18.1 By payment in full	n Benefits Pla  Jal)  Jicies/certifica pt from state	A NOT GREATE A NOT	pual to 60 m ER THAN 1:	(a) , (on this at iss 20 MONTHS 11 remiums	current y ue, prior S, prior y	year \$ r year \$ year \$ LTH IN 2	SUI	Policyholde Paid, Re Members	3 er Dividendefunds to or Credited	urrent year \$	s Paid	Direct Losses
18.1 By payment in full	Insurance pricurance Loans at issue BUT  The Benefits Plaural (Insurance Loans at issue BUT)  The Benefits Plaural (Insurance Loans at iss	Annotates (b)	pual to 60 m ER THAN 12 ACCIDE!	(a), on this at iss 20 MONTHS  NT AND  1 remiums	current youe, prior S, prior y	year \$ r year \$ year \$ LTH IN 2 ct Premiur Earned	ISUI I	Policyholde Paid, Ro Members on Direct	3 er Dividend efunds to or Credited Business	urrent year \$		Direct Losses Incurred

24.NE

insured under indemnity only products



DIRECT BUSINESS IN THE	STATE O	F Nevada			IFF II	NSURA	ANC	F				YEAR 2020
NAIC Group Code 3891				1		2			3	NAIC 4	Company	/ Code 15473 5
DIRECT F AND ANNUITY C	REMIUMS ONSIDERA		Ordi	nary		dit Life (G nd Individu		Gr	oup	Industria	al	Total
Life insurance												
<ol> <li>Annuity considerations</li> <li>Deposit-type contract fund</li> </ol>						XXX				XXX		
4. Other considerations												
5. Totals (Sum of Lines 1 to 4	,	·n	<del>                                     </del>									
POLICYHOLDERS/RI												
Life insurance: 6.1 Paid in cash or left on dep	osit											
6.2 Applied to pay renewal pre	emiums											
6.3 Applied to provide paid-up endowment or premiu												
6.4 Other					I			T				
6.5 Totals (Sum of Lines 6.1 to Annuities:	0 6.4)											
7.1 Paid in cash or left on dep												
7.2 Applied to provide paid-up 7.3 Other			<b>\</b>									
7.4 Totals (Sum of Lines 7.1 to							<u>.                                    </u>					
Grand Totals (Lines 6.5 pl     DIRECT CLAIMS A		ITS DAID				+	<b>u</b>		_			
9. Death benefits		-										
10. Matured endowments												
Annuity benefits      Surrender values and with												
13. Aggregate write-ins for mis	scellaneous	direct claims										
and benefits paid14. All other benefits, except a												
15. Totals												
DETAILS OF WRITE-INS 1301.												
1302.												
1303 1398. Summary of Line 13 from												
1399. Totals (Lines 1301 thru 13		•										
above)			<u> </u>			T			Т			
	C	Ordinary		Credit Life and Individ	ual)		Grou	ıp	In	dustrial		Total
DIRECT DEATH BENEFITS AND	1	2	3 No. of	4		5		6	7	8	9	10
MATURED	No. of		Ind.Pols.						No. of		No. of	
ENDOWMENTS INCURRED	Pols. & Certifs.	Amount	& Gr. Certifs.	Amou	nt	No. of Certifs.	_	Amount	Pols. & Certifs.	Amount	Pols. & Certifs.	Amount
16. Unpaid December 31, prior												
year17. Incurred during current year												
Settled during current year: 18.1 By payment in full												
18.2 By payment on												
compromised claims												
18.4 Reduction by compromise			<b></b>									
18.5 Amount rejected	•	······		-	-							
19. Unpaid Dec. 31, current							4					
year (16+17-18.6)			$+\mathbf{V}$			No of						
POLICY EXHIBIT						Policies						
20. In force December 31, prior year				(a)								
21. Issued during year												
22. Other changes to in force (Net)												
23. In force December 31 of current year				(a)								
(a) Includes Individual Credit Life I				(							-!-	+
Includes Group Credit Life Insu Loans greater than 60 months			•			•				•		
ū		Δ	CCIDE	NT AND	HEA	I TH IN	usiii	RANCE		•		
			COIDE	1		2	100		3	4		5
									er Dividends efunds to	5		
			Dian et D		Dire	ect Premiu	ums	Members	or Credited		- D-:-I	Direct Losses
24. Group Policies (b)			Direct P	remiums		Earned		on Direct	Business	Direct Losses	s Paid	Incurred
24.1 Federal Employees Health premium (b)	Benefits P	lan					*****				Ī	
24.2 Credit (Group and Individu												
24.3 Collectively renewable pol	icies/certific	ates (b)										
24.4 Medicare Title XVIII exemple Other Individual Policies:	ot nom state	taxes of fee			1				<del></del>			
25.1 Non-cancelable (b)							\. <b>.</b> []					
<ul><li>25.2 Guaranteed renewable (b)</li><li>25.3 Non-renewable for stated</li></ul>												
25.4 Other accident only												
25.5 All other (b)					ļ			-		<u> </u>		

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

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



DIRECT BUSINESS IN THE STATE OF New Hampshire DURING THE YEAR 2020 LIFE INSURANCE NAIC Group Code 3891 NAIC Company Code 15473 3 2 Credit Life (Group **DIRECT PREMIUMS** AND ANNUITY CONSIDERATIONS Ordinary and Individual) Industrial Group Total Life insurance Annuity considerations 3 Deposit-type contract funds XXX XXX 4. Other considerations Totals (Sum of Lines 1 to 4) 5. DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS Life insurance: 6.1 Paid in cash or left on deposit 6.2 Applied to pay renewal premiums .. 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period 64 Other 6.5 Totals (Sum of Lines 6.1 to 6.4) Annuities: Paid in cash or left on deposit 7.1 7.2 Applied to provide paid-up annuities 7.3 Other .. Totals (Sum of Lines 7.1 to 7.3) Grand Totals (Lines 6.5 plus 7.4) 8. DIRECT CLAIMS AND BENEFITS PAID Death benefits . 9. Matured endowments 11 Annuity benefits . Surrender values and withdrawals for life contracts 12. Aggregate write-ins for miscellaneous direct claims 13 and benefits paid 14. All other benefits, except accident and health 15 Totals DETAILS OF WRITE-INS 1301. 1302. 1303 Summary of Line 13 from overflow page 1398. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 1399. above) Credit Life Ordinary (Group and Individual) Industrial Group Total DIRECT DEATH 5 9 10 BENEFITS AND MATURED No. of No. of Pols. & No. of Pols. & Ind.Pols No. of **ENDOWMENTS** & Gr. INCURRED Certifs. Amount Certifs Amount Certifs Amount Certifs. Amount Certifs Amount 16. Unpaid December 31, prior year .....17. Incurred during current year Settled during current year: 18.1 By payment in full 18.2 By payment on compromised claims 18.3 Totals paid 18.4 Reduction by compromise 18.5 Amount rejected 18.6 Total settlements 19. Unpaid Dec. 31. current year (16+17-18.6) **POLICY EXHIBIT** 20. In force December 31, prior year ..... 21. Issued during year (a) 22. Other changes to in force (Net) 23. In force December 31 of current year (a) Includes Individual Credit Life Insurance prior year \$ .. current vear \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$ Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ .., current year \$ **ACCIDENT AND HEALTH INSURANCE** 5 Policyholder Dividends Paid, Refunds to Direct Premiums Members or Credited **Direct Losses** Direct Premiums Ea<u>rned</u> on Direct Business Direct Losses Paid Incurred 24 Group Policies (b) 24.1 Federal Employees Health Benefits Plan premium (b) Credit (Group and Individual) Collectively renewable policies/certificates (b) ...... Medicare Title XVIII exempt from state taxes or fee 24.3 24.4 Other Individual Policies: 25.1 Non-cancelable (b).

25.2 Guaranteed renewable (b)

Other accident only ..

25.6 Totals (sum of Lines 25.1 to 25.5)

All other (b).

25.5

25.3 Non-renewable for stated reasons only (b)



NAIC Group Code 3891						ISURA	INCI	E		NAIC	Company	Code 15473
DIRECT F	PREMIUMS		,	1	Cred	2 it Life (Gro	up		3	4		5
AND ANNUITY C	ONSIDERA			inary	and	d Individua	l)	Gr	oup	Industria	al	Total
Life insurance     Annuity considerations					T							
Deposit-type contract fund		The state of the s								xxx.		
<ol> <li>Other considerations</li> <li>Totals (Sum of Lines 1 to a</li> </ol>								<b>-</b>				
`	VIDENDS TO	)										
POLICYHOLDERS/RI Life insurance:	EFUNDS TO	MEMBERS										
6.1 Paid in cash or left on dep	osit											
6.2 Applied to pay renewal pre												
6.3 Applied to provide paid-up endowment or premiu												
6.4 Other												
6.5 Totals (Sum of Lines 6.1 to	o 6.4)										·····	
Annuities: 7.1 Paid in cash or left on dep	osit											
7.2 Applied to provide paid-up	annuities		<b></b>									
7.3 Other					- <b></b>							
<ul><li>7.4 Totals (Sum of Lines 7.1 to</li><li>8. Grand Totals (Lines 6.5 pl</li></ul>												
DIRECT CLAIMS A		TS PAID										
9. Death benefits												
Matured endowments     Appuity benefits		i i			<del> </del>			<del> </del>				
<ul><li>11. Annuity benefits</li><li>12. Surrender values and with</li></ul>					İ			İ		1		
13. Aggregate write-ins for mis	scellaneous o	direct claims										
and benefits paid					ł			<b></b>				
15. Totals					L			<u> </u>				
DETAILS OF WRITE-INS												
1301 1302					<del> </del>			<del> </del>				
1303.												
1398. Summary of Line 13 from	overflow pag	e										
1399. Totals (Lines 1301 thru 13 above)	03 plus 1398	3) (Line 13										
above)	1		1 .					L				
	Or	rdinary		Credit Life and Individ	lual)		Grou	р	ı	ndustrial		Total
DIRECT DEATH	1	2	3	4		5		6	7	8	9	10
BENEFITS AND MATURED	No. of		No. of Ind.Pols.						No. of		No. of	
ENDOWMENTS	Pols. &		& Gr.			No. of			Pols. &		Pols. &	
INCURRED  16. Unpaid December 31, prior	Certifs.	Amount	Certifs.	Amou	nt	Certifs.	А	mount	Certifs.	Amount	Certifs.	Amount
year												
17. Incurred during current year Settled during current year:												
Settled duffild Chiferit Veal												
9												
18.1 By payment in full												
18.1 By payment in full												
18.1 By payment in full												
18.1 By payment in full												
18.1 By payment in full 18.2 By payment on compromised claims						N						
18.1 By payment in full												
18.1 By payment in full			V			No. of						
18.1 By payment in full						No. of Policies						
18.1 By payment in full				(a)	)							
18.1 By payment in full				(a)								
18.1 By payment in full 18.2 By payment on compromised claims 18.3 Totals paid 18.4 Reduction by compromise 18.5 Amount rejected 18.6 Total settlements 19. Unpaid Dec. 31, current year (16+17-18.6)  POLICY EXHIBIT 20. In force December 31, prior year 21. Issued during year 22. Other changes to in force (Net)				(a)								
18.1 By payment in full				(a)(a)								
18.1 By payment in full 18.2 By payment on compromised claims 18.3 Totals paid 18.4 Reduction by compromise 18.5 Amount rejected 18.6 Total settlements 19. Unpaid Dec. 31, current year (16+17-18.6)  POLICY EXHIBIT 20. In force December 31, prior year 21. Issued during year 22. Other changes to in force (Net) 23. In force December 31 of current year (a) Includes Individual Credit Life I	nsurance price	•		(a), (	current y	Policies  /ear \$						
18.1 By payment in full	insurance priurance Loans	s less than or eq	qual to 60 m	(a), (a) onths at iss	current y	Policies  /ear \$ year \$			, Cl	urrent year \$		
18.1 By payment in full	insurance priurance Loans	s less than or eq Γ NOT GREATE	qual to 60 m ER THAN 1:	(a), (a), (a) onths at iss	current y	vear \$			, Cl	urrent year \$		
18.1 By payment in full	insurance priurance Loans	s less than or eq Γ NOT GREATE	qual to 60 m ER THAN 12	(a), (on this at iss 20 MONTHS	current y	/ear \$ ryear \$ year \$		RANCE	, Cl	urrent year \$		
18.1 By payment in full	insurance priurance Loans	s less than or eq Γ NOT GREATE	qual to 60 m ER THAN 12	(a), (a), (a) onths at iss	current y	vear \$		RANCE	, cu	urrent year \$		5
18.1 By payment in full	insurance priurance Loans	s less than or eq Γ NOT GREATE	qual to 60 m ER THAN 12	(a), (on this at iss 20 MONTHS	current y uue, prior S, prior y	Policies  year \$ year \$ year \$ LTH IN	SUI	Policyholde Paid, Re	3 er Dividend	urrent year \$		
18.1 By payment in full	insurance priurance Loans	s less than or eq Γ NOT GREATE	qual to 60 m ER THAN 12	(a) , (on this at iss 20 MONTHS	current y uue, prior S, prior y	year \$ year \$ LTH IN 2	SUI	Policyholde Paid, Re Members	3 er Dividendefunds to or Credited	urrent year \$	s Paid	Direct Losses
18.1 By payment in full	insurance priurance Loans at issue BUT	s less than or eq ΓΝΟΤ GREATE <b>Α</b>	qual to 60 m ER THAN 12	(a), (on this at iss 20 MONTHS	current y uue, prior S, prior y	Policies  year \$ year \$ year \$ LTH IN	SUI	Policyholde Paid, Re Members	3 er Dividend	urrent year \$	s Paid	
18.1 By payment in full	nsurance pridurance Loans at issue BUT	s less than or eq Γ NOT GREATE A	qual to 60 m ER THAN 12	(a) , (on this at iss 20 MONTHS	current y uue, prior S, prior y	year \$ year \$ LTH IN 2	SUI	Policyholde Paid, Re Members	3 er Dividendefunds to or Credited	urrent year \$	s Paid	Direct Losses
18.1 By payment in full	nsurance pricurance Loans at issue BUT	s less than or eq F NOT GREATE A	qual to 60 m ER THAN 12	(a) , (on this at iss 20 MONTHS	current y uue, prior S, prior y	year \$ year \$ LTH IN 2	SUI	Policyholde Paid, Re Members	3 er Dividendefunds to or Credited	urrent year \$	s Paid	Direct Losses
18.1 By payment in full	Insurance pricurance Loans at issue BUT	S less than or eq Γ NOT GREATE  A  an  an  ates (b)	qual to 60 m ER THAN 12	(a) , (on this at iss 20 MONTHS	current y uue, prior S, prior y	year \$ year \$ LTH IN 2	SUI	Policyholde Paid, Re Members	3 er Dividendefunds to or Credited	urrent year \$	s Paid	Direct Losses
18.1 By payment in full	Insurance pricurance Loans at issue BUT	S less than or eq Γ NOT GREATE  A  an  an  ates (b)	qual to 60 m ER THAN 12	(a) , (on this at iss 20 MONTHS	current y uue, prior S, prior y	year \$ year \$ LTH IN 2	SUI	Policyholde Paid, Re Members	3 er Dividendefunds to or Credited	urrent year \$	s Paid	Direct Losses
18.1 By payment in full	nsurance priurance Loans at issue BUT	A A A A A A A A A A A A A A A A A A A	qual to 60 m ER THAN 12	(a) , (on this at iss 20 MONTHS	current y uue, prior S, prior y	year \$ year \$ LTH IN 2	SUI	Policyholde Paid, Re Members	3 er Dividendefunds to or Credited	urrent year \$	s Paid	Direct Losses
18.1 By payment in full	nsurance privarance Loans at issue BUT	A A A A A A A A A A A A A A A A A A A	qual to 60 m ER THAN 12	(a) , (on this at iss 20 MONTHS	current y uue, prior S, prior y	year \$ year \$ LTH IN 2	SUI	Policyholde Paid, Re Members	3 er Dividendefunds to or Credited	urrent year \$	s Paid	Direct Losses
18.1 By payment in full	nsurance pricurance Loans at issue BUT  n Benefits Planal) icies/certificate pt from state	A A A A A A A A A A A A A A A A A A A	qual to 60 m ER THAN 12	(a) , (on this at iss 20 MONTHS	current y uue, prior S, prior y	year \$ year \$ LTH IN 2	SUI	Policyholde Paid, Re Members	3 er Dividendefunds to or Credited	urrent year \$	s Paid	Direct Losses
18.1 By payment in full	nsurance pricurance Loans at issue BUT  n Benefits Plaual) iicies/certifica pt from state  number of the pricuration of the pri	A A A A A A A A A A A A A A A A A A A	qual to 60 m ER THAN 12	(a) , (on this at iss 20 MONTHS 11 remiums	current y uue, prior S, prior y	year \$ year \$ LTH IN 2	SUI	Policyholde Paid, Re Members	3 er Dividendefunds to or Credited	urrent year \$	s Paid	Direct Losses
18.1 By payment in full	nsurance pricurance Loans at issue BUT  Benefits Plaual)  icicies/certificapt from state	A Seless than or equal to the control of the contro	Direct P	(a) , (on this at iss 20 MONTHS 11 remiums	current y uue, prior S, prior y	year \$ year \$ LTH IN 2	SUI	Policyholde Paid, Re Members	3 er Dividendefunds to or Credited	urrent year \$	s Paid	Direct Losses
18.1 By payment in full 18.2 By payment on compromised claims 18.3 Totals paid 18.4 Reduction by compromise 18.5 Amount rejected 18.6 Total settlements 19. Unpaid Dec. 31, current year (16+17-18.6)  POLICY EXHIBIT 20. In force December 31, prior year 21. Issued during year 22. Other changes to in force (Net) 23. In force December 31 of current year (a) Includes Individual Credit Life I Includes Group Credit Life Insu Loans greater than 60 months  24. Group Policies (b) 24.1 Federal Employees Health premium (b) 24.2 Credit (Group and Individu 24.3 Collectively renewable pol 24.4 Medicare Title XVIII exem Other Individual Policies: 25.1 Non-cancelable (b) 25.2 Guaranteed renewable (b) 25.3 Non-renewable for stated 25.4 Other accident only	nsurance pricurance Loans at issue BUT  Benefits Plaual)  icicies/certifica pt from state	A Seless than or equal to the control of the contro	Direct P	(a) , (on this at iss 20 MONTHS 11 remiums	current y uue, prior S, prior y	year \$ year \$ LTH IN 2	SUI	Policyholde Paid, Re Members	3 er Dividendefunds to or Credited	urrent year \$	s Paid	Direct Losses

24.NJ

insured under indemnity only products



DIRECT BUSINESS IN THE STATE OF New Mexico DURING THE YEAR 2020 LIFE INSURANCE NAIC Group Code 3891 NAIC Company Code 15473 3 2 Credit Life (Group **DIRECT PREMIUMS** AND ANNUITY CONSIDERATIONS Ordinary and Individual) Industrial Group Total Life insurance Annuity considerations 3 Deposit-type contract funds XXX XXX 4. Other considerations Totals (Sum of Lines 1 to 4) 5. DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS Life insurance: 6.1 Paid in cash or left on deposit 6.2 Applied to pay renewal premiums .. 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period 64 Other 6.5 Totals (Sum of Lines 6.1 to 6.4) Annuities: Paid in cash or left on deposit 7.1 7.2 Applied to provide paid-up annuities 7.3 Other .. Totals (Sum of Lines 7.1 to 7.3) Grand Totals (Lines 6.5 plus 7.4) 8. DIRECT CLAIMS AND BENEFITS PAID Death benefits . 9. Matured endowments 11 Annuity benefits . Surrender values and withdrawals for life contracts 12. Aggregate write-ins for miscellaneous direct claims 13 and benefits paid 14. All other benefits, except accident and health 15 Totals DETAILS OF WRITE-INS 1301. 1302. 1303 Summary of Line 13 from overflow page 1398. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 1399. above) Credit Life Ordinary (Group and Individual) Industrial Group Total DIRECT DEATH 5 9 10 BENEFITS AND MATURED No. of No. of Pols. & No. of Pols. & Ind.Pols No. of **ENDOWMENTS** & Gr. INCURRED Certifs. Amount Certifs Amount Certifs Amount Certifs. Amount Certifs Amount 16. Unpaid December 31, prior year .....17. Incurred during current year Settled during current year: 18.1 By payment in full 18.2 By payment on compromised claims 18.3 Totals paid 18.4 Reduction by compromise 18.5 Amount rejected 18.6 Total settlements 19. Unpaid Dec. 31. current year (16+17-18.6) **POLICY EXHIBIT** 20. In force December 31, prior year ..... 21. Issued during year (a) 22. Other changes to in force (Net) 23. In force December 31 of current year (a) Includes Individual Credit Life Insurance prior year \$ .. current vear \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$ Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ .., current year \$ **ACCIDENT AND HEALTH INSURANCE** 5 Policyholder Dividends Paid, Refunds to Direct Premiums Members or Credited **Direct Losses** Direct Premiums Ea<u>rned</u> on Direct Business Direct Losses Paid Incurred 24 Group Policies (b) 24.1 Federal Employees Health Benefits Plan premium (b) Credit (Group and Individual) Collectively renewable policies/certificates (b) ...... Medicare Title XVIII exempt from state taxes or fee 24.3 24.4 Other Individual Policies: 25.1 Non-cancelable (b). 25.2 Guaranteed renewable (b) 25.3 Non-renewable for stated reasons only (b) Other accident only .. 25.5 All other (b). 25.6 Totals (sum of Lines 25.1 to 25.5)

and number of persons

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

insured under indemnity only products

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

26.



DIRECT BUSINESS IN THE NAIC Group Code 3891	STATE O	F New York		1	IFF II	NSURA	۵NC	F				YEAR 2020 Code 15473
,			,	1		2			3	4	Company	5 5
DIRECT F AND ANNUITY C	REMIUMS ONSIDERA		Ordi	inary		dit Life (G nd Individu		Gr	oup	Industria	al I	Total
Life insurance												
<ol> <li>Annuity considerations</li> <li>Deposit-type contract fund</li> </ol>			 			XXX				XXX		
Other considerations												
5. Totals (Sum of Lines 1 to	,											
DIRECT DIV POLICYHOLDERS/RI												
Life insurance:												
<ul><li>6.1 Paid in cash or left on dep</li><li>6.2 Applied to pay renewal pre</li></ul>								-				
6.3 Applied to provide paid-up												
endowment or premiu 6.4 Other					T							
6.5 Totals (Sum of Lines 6.1 to												
Annuities:	11											
<ul><li>7.1 Paid in cash or left on dep</li><li>7.2 Applied to provide paid-up</li></ul>												
7.3 Other					$\mathbf{M}$							
<ul><li>7.4 Totals (Sum of Lines 7.1 to</li><li>8. Grand Totals (Lines 6.5 pl</li></ul>	,						\- 					
DIRECT CLAIMS A		ITS PAID					┫					
Death benefits												
Matured endowments     Annuity benefits												
Surrender values and with												
Aggregate write-ins for mis     and benefits paid												
14. All other benefits, except a					İ					İ		
15. Totals												
DETAILS OF WRITE-INS 1301.												
1302.												
1303.												
1398. Summary of Line 13 from 1399. Totals (Lines 1301 thru 13		•						+		<del> </del>		
above)												
		Sandian and		Credit Life			0	_	1	الماسلسان		Tatal
DIRECT DEATH	1	Ordinary 2	(Group	and Individ	luai)	5	Grou	<u>ір</u> 6	7 In	idustrial 8	9	Total 10
BENEFITS AND MATURED	No. of		No. of						No. of		No. of	
ENDOWMENTS	No. of Pols. &		Ind.Pols. & Gr.			No. of			No. of Pols. &		No. of Pols. &	
INCURRED  16. Unpaid December 31, prior	Certifs.	Amount	Certifs.	Amou	nt	Certifs.	Α	Amount	Certifs.	Amount	Certifs.	Amount
year												
<ol> <li>Incurred during current year</li> <li>Settled during current year:</li> </ol>												
18.1 By payment in full												
18.2 By payment on	,											
compromised claims 18.3 Totals paid												
18.4 Reduction by compromise			<b>\</b>									
18.5 Amount rejected 18.6 Total settlements												
19. Unpaid Dec. 31, current												
year (16+17-18.6)			$+\mathbf{v}$			NO of						
POLICY EXHIBIT						Policies						
20. In force December 31, prior year				(a)								
21. Issued during year												
22. Other changes to in force (Net)												
23. In force December 31 of				(-)								
current year (a) Includes Individual Credit Life I	nsurance p	rior year \$		(a), (	current	year \$					1	
Includes Group Credit Life Insu	ırance Loar	is less than or ed	•			•				•		
Loans greater than 60 months	at issue BU	II NOI GREAIL	ER THAN 1	20 MONTHS	S, prior	year \$			, cui	rrent year \$		
			CCIDE	NT AND	HEA		NSU					
			Ì	1		2			3 er Dividends	4		5
					Dis	aat Dramii		Paid, Re	efunds to			Direct Leases
			Direct P	remiums	Dire	ect Premiu Earned	uIIIS		or Credited Business	Direct Losses	s Paid	Direct Losses Incurred
24. Group Policies (b)												
24.1 Federal Employees Health premium (b)					ļ					<u> </u>		
24.2 Credit (Group and Individu	ıal)				<b>_</b>							
<ul><li>24.3 Collectively renewable pol</li><li>24.4 Medicare Title XVIII exemptor</li></ul>												
Other Individual Policies:	, J J. G.	50 51 100			1					***************************************		
25.1 Non-cancelable (b)					<b></b>		\ <u> </u>					
<ul><li>25.2 Guaranteed renewable (b)</li><li>25.3 Non-renewable for stated</li></ul>										-		
25.4 Other accident only												
25.5 All other (b)					<b></b>			-				

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

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



DIRECT BUSINESS IN THE STATE OF North Carolina DURING THE YEAR 2020 LIFE INSURANCE NAIC Group Code 3891 NAIC Company Code 15473 3 2 Credit Life (Group **DIRECT PREMIUMS** AND ANNUITY CONSIDERATIONS Ordinary and Individual) Industrial Group Total Life insurance Annuity considerations 3 Deposit-type contract funds XXX XXX 4. Other considerations Totals (Sum of Lines 1 to 4) 5. DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS Life insurance: 6.1 Paid in cash or left on deposit 6.2 Applied to pay renewal premiums .. Applied to provide paid-up additions or shorten the 6.3 endowment or premium-paying period 64 Other 6.5 Totals (Sum of Lines 6.1 to 6.4) Annuities: Paid in cash or left on deposit 7.1 7.2 Applied to provide paid-up annuities 7.3 Other .. Totals (Sum of Lines 7.1 to 7.3) 8. Grand Totals (Lines 6.5 plus 7.4) DIRECT CLAIMS AND BENEFITS PAID 9. Death benefits 10. Matured endowments 11 Annuity benefits . 12. Surrender values and withdrawals for life contracts Aggregate write-ins for miscellaneous direct claims 13 and benefits paid 14. All other benefits, except accident and health 15 Totals DETAILS OF WRITE-INS 1301. 1302. 1303 Summary of Line 13 from overflow page 1398. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 1399. above) Credit Life Ordinary (Group and Individual) Industrial Group Total DIRECT DEATH 5 9 10 BENEFITS AND MATURED No. of No. of Pols. & No. of Pols. & Ind.Pols No. of **ENDOWMENTS** & Gr. INCURRED Certifs. Amount Certifs Amount Certifs Amount Certifs. Amount Certifs Amount 16. Unpaid December 31, prior year .....17. Incurred during current year Settled during current year: 18.1 By payment in full ..... 18.2 By payment on compromised claims 18.3 Totals paid 18.4 Reduction by compromise 18.5 Amount rejected 18.6 Total settlements 19. Unpaid Dec. 31. current year (16+17-18.6) **POLICY EXHIBIT** 20. In force December 31, prior year (a) 21. Issued during year 22. Other changes to in force (Net) 23. In force December 31 of current year (a) Includes Individual Credit Life Insurance prior year \$ .. current vear \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$ Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ .., current year \$ **ACCIDENT AND HEALTH INSURANCE** 5 Policyholder Dividends Paid, Refunds to Direct Premiums Members or Credited **Direct Losses** Direct Premiums Ea<u>rned</u> on Direct Business Direct Losses Paid Incurred 24 Group Policies (b) 24.1 Federal Employees Health Benefits Plan premium (b) Credit (Group and Individual) Collectively renewable policies/certificates (b) ...... Medicare Title XVIII exempt from state taxes or fee 24.3 24.4 Other Individual Policies: 25.1 Non-cancelable (b). 25.2 Guaranteed renewable (b) 25.3 Non-renewable for stated reasons only (b) Other accident only .. 25.5 All other (b). 25.6 Totals (sum of Lines 25.1 to 25.5)

and number of persons

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

insured under indemnity only products

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

26.



DIRECT BUSINESS IN THE STATE OF North Dakota DURING THE YEAR 2020 LIFE INSURANCE NAIC Group Code 3891 NAIC Company Code 15473 3 2 Credit Life (Group **DIRECT PREMIUMS** AND ANNUITY CONSIDERATIONS Ordinary and Individual) Industrial Group Total Life insurance Annuity considerations 3 Deposit-type contract funds XXX XXX 4. Other considerations Totals (Sum of Lines 1 to 4) 5. DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS Life insurance: 6.1 Paid in cash or left on deposit 6.2 Applied to pay renewal premiums .. Applied to provide paid-up additions or shorten the 6.3 endowment or premium-paying period 64 Other 6.5 Totals (Sum of Lines 6.1 to 6.4) Annuities: Paid in cash or left on deposit 7.1 7.2 Applied to provide paid-up annuities 7.3 Other .. Totals (Sum of Lines 7.1 to 7.3) 8. Grand Totals (Lines 6.5 plus 7.4) DIRECT CLAIMS AND BENEFITS PAID 9. Death benefits Matured endowments 11 Annuity benefits . 12. Surrender values and withdrawals for life contracts Aggregate write-ins for miscellaneous direct claims 13 and benefits paid 14. All other benefits, except accident and health 15 Totals DETAILS OF WRITE-INS 1301. 1302. 1303 Summary of Line 13 from overflow page 1398. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 1399. above) Credit Life Ordinary (Group and Individual) Industrial Group Total DIRECT DEATH 5 9 10 BENEFITS AND MATURED No. of No. of Pols. & No. of Pols. & Ind.Pols No. of **ENDOWMENTS** & Gr. INCURRED Certifs. Amount Certifs Amount Certifs Amount Certifs. Amount Certifs Amount 16. Unpaid December 31, prior year .....17. Incurred during current year Settled during current year: 18.1 By payment in full ..... 18.2 By payment on compromised claims 18.3 Totals paid 18.4 Reduction by compromise 18.5 Amount rejected 18.6 Total settlements 19. Unpaid Dec. 31. current year (16+17-18.6) **POLICY EXHIBIT** 20. In force December 31, prior year (a) 21. Issued during year 22. Other changes to in force (Net) 23. In force December 31 of current year (a) Includes Individual Credit Life Insurance prior year \$ .. current vear \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$ Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ .., current year \$ **ACCIDENT AND HEALTH INSURANCE** 5 Policyholder Dividends Paid, Refunds to Direct Premiums Members or Credited **Direct Losses** Direct Premiums Ea<u>rned</u> on Direct Business Direct Losses Paid Incurred 24 Group Policies (b) 24.1 Federal Employees Health Benefits Plan premium (b) Credit (Group and Individual) Collectively renewable policies/certificates (b) ...... Medicare Title XVIII exempt from state taxes or fee 24.3 24.4 Other Individual Policies: 25.1 Non-cancelable (b). 25.2 Guaranteed renewable (b) 25.3 Non-renewable for stated reasons only (b) Other accident only .. 25.5 All other (b). 25.6 Totals (sum of Lines 25.1 to 25.5)

24.ND

and number of persons

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

insured under indemnity only products

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

26.



DIRECT BUSINESS IN THE NAIC Group Code 3891	STATE C	OF Ohio		LI	IFE I	NSUR	ANC	E				EAR 2020 Code 15473
DIRECT F	PREMIUM	s		1	Cre	2 dit Life (G	roup	;	3	4		5
AND ANNUITY C	ONSIDER	RATIONS	Ord	inary		nd Individu		Gr	oup	Industria	al	Total
Life insurance     Annuity considerations												
<ol><li>Deposit-type contract fund</li></ol>	ls					XXX				XXX		
Other considerations  Totals (Cum of Lines 1 to												
5. Totals (Sum of Lines 1 to 4	,	то										
POLICYHOLDERS/RI	EFUNDS 1	TO MEMBERS										
Life insurance: 6.1 Paid in cash or left on dep	nsit											
6.2 Applied to pay renewal pre										İ		
6.3 Applied to provide paid-up												
endowment or premiu 6.4 Other										İ		
6.5 Totals (Sum of Lines 6.1 to												
Annuities: 7.1 Paid in cash or left on dep	ocit											
7.1 Applied to provide paid-up												
7.3 Other						🗚						
<ul><li>7.4 Totals (Sum of Lines 7.1 to</li><li>8. Grand Totals (Lines 6.5 pl</li></ul>							<u> </u>					
DIRECT CLAIMS A		FITS PAID										
9. Death benefits												
Matured endowments     Annuity benefits								<b></b>		<del> </del>		
12. Surrender values and with												
13. Aggregate write-ins for mis												
and benefits paid												
15. Totals												
DETAILS OF WRITE-INS												
1301   1302										†		
1303.												
1398. Summary of Line 13 from 1399. Totals (Lines 1301 thru 13		•										
above)	oo pius 10	590) (Line 13										
				Credit Life								
DIRECT DEATH	1	Ordinary 2	(Group	and Individ	ual)	5	Grou	<u>р</u> 6	7 I	dustrial 8	9	Total 10
BENEFITS AND			No. of	7				O		O		10
MATURED ENDOWMENTS	No. of Pols. &		Ind.Pols. & Gr.			No. of			No. of Pols. &		No. of Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amoui	nt	Certifs.	Α	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior year												
17. Incurred during current year												
Settled during current year: 18.1 By payment in full												
18.2 By payment on	*											
compromised claims												
18.4 Reduction by compromise			V		<b></b>							
18.5 Amount rejected												
18.6 Total settlements 19. Unpaid Dec. 31, current					}		· ·					
year (16+17-18.6)												
						No. of	_					
POLICY EXHIBIT 20. In force December 31, prior						Policies						
year		-		(a)								
<ul><li>21. Issued during year</li><li>22. Other changes to in force</li></ul>		-				<b>†</b>			<del> </del>			
(Net)												
23. In force December 31 of current year				(a)								
(a) Includes Individual Credit Life I				, (		•						•
Includes Group Credit Life Insu Loans greater than 60 months			•			•				•		
									, , , ,			
		F		NT AND	псА	<u> </u>	1301		3	4	I	5
						_		Policyholde	er Dividends			-
					Dir	ect Premi	ums		efunds to or Credited			Direct Losses
04 Crows Delisis (b)			Direct P	remiums		Earned			Business	Direct Losses	s Paid	Incurred
24. Group Policies (b) 24.1 Federal Employees Health			<del> </del>		ļ			†		<del> </del>		
premium (b)					<u> </u>					<u> </u>		
<ul><li>24.2 Credit (Group and Individu</li><li>24.3 Collectively renewable pol</li></ul>					ļ			-		<b></b>		
24.4 Medicare Title XVIII exemp		` '										
Other Individual Policies:									_			
25.1 Non-cancelable (b)			<b>- 1</b>			-17	\ <u></u>					
25.3 Non-renewable for stated						\ \				<u> </u>		
25.4 Other accident only												
25.5 All other (b)					l							
25.6 Totals (sum of Lines 25.1 26. Totals (Lines 24 + 24.1 + 2					ļ			†		†		
		report: Number	-f	noured unde	- DDO	\ manaaaa	d aara i	nradiiata		and		

and number of persons insured under indemnity only products



DIRECT BUSINESS IN THE NAIC Group Code 3891	STATE O	F Oklahoma		L	IFE I	NSURA	ANC	E				YEAR 2020 Code 15473
•	DE14111140			1		2			3	4	Company	5
DIRECT F AND ANNUITY C	PREMIUMS ONSIDER		Ord	inary		dit Life (G nd Individu		Gr	oup	Industria	ıl	Total
Life insurance								-				
<ol> <li>Annuity considerations</li> <li>Deposit-type contract fund</li> </ol>						XXX				XXX		
Other considerations												
5. Totals (Sum of Lines 1 to	,											
DIRECT DIV POLICYHOLDERS/RI												
Life insurance:	LI UNDS I	OWEWBERS										
6.1 Paid in cash or left on dep					ļ							
6.2 Applied to pay renewal pre												
6.3 Applied to provide paid-up endowment or premiu												
6.4 Other												
6.5 Totals (Sum of Lines 6.1 to Annuities:	0 6.4)							-				
7.1 Paid in cash or left on dep	osit											
7.2 Applied to provide paid-up	annuities .											
7.3 Other			<b></b>		- 1							
7.4 Totals (Sum of Lines 7.1 to 8. Grand Totals (Lines 6.5 pl							· ·	.+				
DIRECT CLAIMS A		ITS PAID				-		<b>+ 1</b>			_	
9. Death benefits												
10. Matured endowments								-				
Annuity benefits     Surrender values and with					T							
13. Aggregate write-ins for mis												
and benefits paid												
<ol> <li>All other benefits, except a</li> <li>Totals</li> </ol>	accident and	u neaith						-				
DETAILS OF WRITE-INS												
1301					<b></b>							
1302.												
1303 1398. Summary of Line 13 from	overflow pa	ine										
1399. Totals (Lines 1301 thru 13		•								1		
above)												
				Credit Life			_					
DIRECT DEATH	1	Ordinary 2	(Group	and Individ	lual)	5	Grou	<u>ір</u> 6	7 In	dustrial 8	9	Total 10
BENEFITS AND	'	2	No. of	-		3		U	,	0	9	10
MATURED ENDOWMENTS	No. of Pols. &		Ind.Pols. & Gr.			No. of			No. of Pols. &		No. of Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amou	nt	Certifs.	A	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior												
year17. Incurred during current year											-	
Settled during current year:												
18.1 By payment in full												
18.2 By payment on compromised claims	,											
18.3 Totals paid												
18.4 Reduction by compromise 18.5 Amount rejected			\		•							
18.6 Total settlements												
19. Unpaid Dec. 31, current												
year (16+17-18.6)											<del> </del>	
POLICY EXHIBIT		_				No. of Policies						
20. In force December 31, prior												
year21. Issued during year				(a)								
22. Other changes to in force						+	<b>†</b>					
(Net)												
current year				(a)								
(a) Includes Individual Credit Life I		•		, (		•						
Includes Group Credit Life Insu Loans greater than 60 months			•			•				•		
Loans greater than oo months	at issue be				•	•			, cui	Teπt year ψ		
				NT AND	HEA		NSU		2			
				1		2			3 er Dividends	4		5
								Paid, Re	efunds to			
			Direct P	remiums	Dir	ect Premiu Earned	ums		or Credited t Business	Direct Losses	s Paid	Direct Losses Incurred
24. Group Policies (b)								211 211001		oo		
24.1 Federal Employees Health												
premium (b)24.2 Credit (Group and Individu					1			1		İ		
24.3 Collectively renewable pol	icies/certific	cates (b)										
24.4 Medicare Title XVIII exemp	pt from stat	e taxes or fee	<b>\[</b>		<b></b>					<b></b>		
Other Individual Policies: 25.1 Non-cancelable (b)												
25.1 Non-cancelable (b)							7					
25.3 Non-renewable for stated	reasons on	ly (b)										
25.4 Other accident only					Ī							
25.5 All other (b)					<del> </del>			-		<del> </del>		

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

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



DIRECT BUSINESS IN THE NAIC Group Code 3891	STATEO	r Oregon			FE I	NSUR	ANCE					'EAR 2020 Code 1547:
DIRECT F	PREMIUMS			1		2 dit Life (G			3	4		5
AND ANNUITY Of the control of the co				inary	an	nd Individu	ıal)	Gr	oup	Industria	I	Total
Life insurance     Annuity considerations												
Deposit-type contract func						XXX				XXX		
4. Other considerations												
5. Totals (Sum of Lines 1 to		·O										
POLICYHOLDERS/R		-										
Life insurance:	:4											
<ul><li>6.1 Paid in cash or left on dep</li><li>6.2 Applied to pay renewal pre</li></ul>	OSIT Pmirims											
6.3 Applied to provide paid-up												
endowment or premiu												
6.4 Other												
Annuities:	,											
7.1 Paid in cash or left on dep												
7.2 Applied to provide paid-up 7.3 Other			<b>\</b>									
7.4 Totals (Sum of Lines 7.1 t			<b>1</b>									
8. Grand Totals (Lines 6.5 pl							<i>A</i>					
DIRECT CLAIMS A												
9. Death benefits			······································			<del></del>			<del></del>			
<ol> <li>Matured endowments</li> <li>Annuity benefits</li> </ol>								†				
12. Surrender values and with	drawals for	life contracts										
13. Aggregate write-ins for mi												
and benefits paid												
15. Totals								<u> </u>				
DETAILS OF WRITE-INS												
1301								<del> </del>				
1302 1303												
1398. Summary of Line 13 from	overflow pa	ge										
1399. Totals (Lines 1301 thru 13												
above)								l.				
		Ordinan:		Credit Life	ual)		Crau		ln.	ductrial		Total
DIRECT DEATH	1	Ordinary 2	(Group	and Individ	uaı)	5	Grou	р 6	7	dustrial 8	9	Total 10
BENEFITS AND		-	No. of					Ü		Ü		
MATURED ENDOWMENTS	No. of Pols. &		Ind.Pols. & Gr.			No. of			No. of Pols. &		No. of Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amour	nt	Certifs.	Α	mount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior												
year  17. Incurred during current year												
Settled during current year:												
18.1 By payment in full												
18.2 By payment on compromised claims												
18.3 Totals paid												
18.4 Reduction by compromise												
18.5 Amount rejected18.6 Total settlements			<b>\</b>									
19. Unpaid Dec. 31, current				1		-	<i>A</i>					
year (16+17-18.6)												
DOLICY EXHIBIT		_				No. of						
<b>POLICY EXHIBIT</b> 20. In force December 31, prior						Policies	1					
year				(a)		<b></b>						
<ul><li>21. Issued during year</li><li>22. Other changes to in force</li></ul>				<u> </u>		<b></b>	·····		<del> </del>			
(Net)				ļ		<b></b>						
23. In force December 31 of current year				(a)								
a) Includes Individual Credit Life I	nsurance n	rior year \$	<del></del>	(a)	current	year \$					1	1
Includes Group Credit Life Insu	ırance Loar	ns less than or ed	ual to 60 m	nonths at issu	ue, prio	or year \$			, cur	-		
Loans greater than 60 months	at issue BL	JT NOT GREATE	ER THAN 1	20 MONTHS	S, prior	year \$			, cur	rent year \$		
		<b>A</b>	CCIDE	NT AND	HEA	LTH I	NSUF	RANCE				
				1		2			3 or Dividende	4		5
									er Dividends efunds to			
					Dire	ect Premi	ums	Members	or Credited			Direct Losses
			Direct P	remiums		Earned		on Direct	Business	Direct Losses	Paid	Incurred
24 Group Policies (h)								†				
24. Group Policies (b)					i			<b>_</b>				
24.1 Federal Employees Health premium (b)	Benefits P	lan									I I	
<ul><li>24.1 Federal Employees Health premium (b)</li><li>24.2 Credit (Group and Individual Components)</li></ul>	n Benefits P	lan										
24.1 Federal Employees Health premium (b)	n Benefits P	cates (b)										
<ul> <li>24.1 Federal Employees Health premium (b)</li></ul>	n Benefits P ual)icies/certific pt from state	cates (b)et taxes or fee										
Federal Employees Health premium (b)	n Benefits P ial) icies/certific pt from state	cates (b)et taxes or fee				A						
<ul> <li>24.1 Federal Employees Health premium (b)</li> <li>24.2 Credit (Group and Individue)</li> <li>24.3 Collectively renewable pointer of Medicare Title XVIII exem Other Individual Policies</li> <li>25.1 Non-cancelable (b)</li> <li>25.2 Guaranteed renewable (b)</li> </ul>	n Benefits P  ual) icies/certific pt from state	cates (b)e taxes or fee				N						
<ul> <li>24.1 Federal Employees Health premium (b)</li> <li>24.2 Credit (Group and Individual Collectively renewable polother Individual Policies:</li> <li>25.1 Non-cancelable (b)</li> <li>25.2 Guaranteed renewable (b</li> <li>25.3 Non-renewable for stated</li> </ul>	n Benefits P  ial)  icies/certific pt from state  reasons on	cates (b)e taxes or fee										
<ul> <li>24.1 Federal Employees Health premium (b)</li> <li>24.2 Credit (Group and Individue)</li> <li>24.3 Collectively renewable pointer of Medicare Title XVIII exem Other Individual Policies</li> <li>25.1 Non-cancelable (b)</li> <li>25.2 Guaranteed renewable (b)</li> </ul>	n Benefits P	cates (b)e taxes or fee	V			N						
<ul> <li>24.1 Federal Employees Health premium (b)</li> <li>24.2 Credit (Group and Individue)</li> <li>24.3 Collectively renewable pointer Individual Policies</li> <li>25.1 Non-cancelable (b)</li> <li>25.2 Guaranteed renewable (b</li> <li>25.3 Non-renewable for stated</li> <li>25.4 Other accident only</li> </ul>	n Benefits P	cates (b)e taxes or fee	V			N						
<ul> <li>24.1 Federal Employees Health premium (b)</li> <li>24.2 Credit (Group and Individued)</li> <li>24.3 Collectively renewable pointer Individual Policies</li> <li>25.1 Non-cancelable (b)</li> <li>25.2 Guaranteed renewable (b</li> <li>25.3 Non-renewable for stated</li> <li>25.4 Other accident only</li> <li>25.5 All other (b)</li> </ul>	n Benefits P  ial) icies/certific pt from state  reasons on  to 25.5)  24.2 + 24.3	cates (b)e taxes or fee										

24.OR



DIRECT BUSINESS IN THE NAIC Group Code 3891	STATE O	F Pennsylvan	ıa	LI	IFE I	NSUR/	ANC	E				'EAR 2020 Code 15473
DIRECT F	PREMIUMS		,	1	Cre	2 dit Life (Gr	oup		3	4	İ	5
AND ANNUITY C	ONSIDER	ATIONS		nary	ar	nd Individu	al)		oup	Industria	ıl	Total
Life insurance  Annuity considerations												
Deposit-type contract fund										XXX		
<ol> <li>Other considerations</li> <li>Totals (Sum of Lines 1 to 4)</li> </ol>												
DIRECT DIV	,	О										
POLICYHOLDERS/RI Life insurance:	EFUNDS T	O MEMBERS										
6.1 Paid in cash or left on dep	osit											
6.2 Applied to pay renewal pre												
6.3 Applied to provide paid-up endowment or premiu												
6.4 Other												
6.5 Totals (Sum of Lines 6.1 to	0 6.4)											
Annuities: 7.1 Paid in cash or left on dep	osit											
7.2 Applied to provide paid-up	annuities		<b></b>									
7.3 Other					- 1							
<ul><li>7.4 Totals (Sum of Lines 7.1 to</li><li>8. Grand Totals (Lines 6.5 pl</li></ul>							/ ···					
DIRECT CLAIMS A		ITS PAID								1		
9. Death benefits												
<ul><li>10. Matured endowments</li><li>11. Annuity benefits</li></ul>		i i			l					+	<del> </del>	
Surrender values and with										<u> </u>		
13. Aggregate write-ins for mis	scellaneous	direct claims										
and benefits paid								+				
15. Totals								<u> </u>				
DETAILS OF WRITE-INS												
1301 1302								<del> </del>		+		
1303.										-		
1398. Summary of Line 13 from	overflow pa	ge										
1399. Totals (Lines 1301 thru 13 above)	03 plus 139	98) (Line 13										
4,000				Credit Life								
	(	Ordinary	(Group	and Individ	ual)		Grou	ıp		ndustrial		Total
DIRECT DEATH BENEFITS AND	1	2	3 No. of	4		5		6	7	8	9	10
MATURED	No. of		Ind.Pols.						No. of		No. of	
ENDOWMENTS INCURRED	Pols. &	A t	& Gr.	A	-4	No. of		\ · · · - 4	Pols. &	A	Pols. &	A
16. Unpaid December 31, prior	Certifs.	Amount	Certifs.	Amou	nt	Certifs.	F	Amount	Certifs.	Amount	Certifs.	Amount
year												
17. Incurred during current year Settled during current year:												
18.1 By payment in full												
18.2 By payment on compromised claims												
18.3 Totals paid												
18.4 Reduction by compromise			<b>\</b>									
18.5 Amount rejected			<b>\</b>									
19. Unpaid Dec. 31, current	*						4					
year (16+17-18.6)							┫					
POLICY EXHIBIT		_				No. of Policies		-				
20. In force December 31, prior						. 00.00						
year21. Issued during year				(a)							-	
22. Other changes to in force	1		1			†			†			
(Net)											-	
current year				(a)								
(a) Includes Individual Credit Life I		•				•				rrant A		
Includes Group Credit Life Insu Loans greater than 60 months			•			•				•		
<u>.</u>				NT AND					,			
		<i>P</i>		NI AND	1166	2 2	100		3	4	1	5
								Policyholde	er Dividend			
					Dir	ect Premiu	ıms		efunds to or Credited			Direct Losses
04			Direct P	remiums		Earned			Business	Direct Losses	s Paid	Incurred
<ul><li>24. Group Policies (b)</li><li>24.1 Federal Employees Health</li></ul>			l		ļ			+		+		
premium (b)					ļ							
<ul><li>24.2 Credit (Group and Individu</li><li>24.3 Collectively renewable pol</li></ul>			l		<b> </b>			+		+		
24.4 Medicare Title XVIII exemp		. ,										
Other Individual Policies:					1							
25.1 Non-cancelable (b)			<b></b>			-17	\. <b>.</b>					
<ul><li>25.2 Guaranteed renewable (b)</li><li>25.3 Non-renewable for stated</li></ul>												
25.4 Other accident only												
25.5 All other (b)												
25.6 Totals (sum of Lines 25.1					<b> </b>			<del> </del>		<b>-</b>		
26. Totals (Lines 24 + 24.1 + 2 (b) For health business on indi			of porcens :	neurod und	r DDO	) managad	cara	nroduoto		and	l number of	norsons

24.PA

insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Cape Verity III, Inc. DIRECT BUSINESS IN THE STATE OF Rhode Island DURING THE YEAR 2020 **LIFE INSURANCE** NAIC Group Code 3891 NAIC Company Code 15473 3 2 Credit Life (Group **DIRECT PREMIUMS** AND ANNUITY CONSIDERATIONS Ordinary and Individual) Group Industrial Total Life insurance Annuity considerations 3 Deposit-type contract funds XXX XXX 4. Other considerations Totals (Sum of Lines 1 to 4) 5. DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS Life insurance: 6.1 Paid in cash or left on deposit 6.2 Applied to pay renewal premiums .. 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period 64 Other 6.5 Totals (Sum of Lines 6.1 to 6.4) Annuities: 7.1 Paid in cash or left on deposit 7.2 Applied to provide paid-up annuities 7.3 Other . Totals (Sum of Lines 7.1 to 7.3) 8. Grand Totals (Lines 6.5 plus 7.4) DIRECT CLAIMS AND BENEFITS PAID Death benefits . 9. Matured endowments 11 Annuity benefits . 12. Surrender values and withdrawals for life contracts Aggregate write-ins for miscellaneous direct claims 13. and benefits paid 14. All other benefits, except accident and health 15 Totals DETAILS OF WRITE-INS 1301. 1302. 1303 1398. Summary of Line 13 from overflow page Totals (Lines 1301 thru 1303 plus 1398) (Line 13 1399. above) Credit Life Ordinary (Group and Individual) Industrial Group Total DIRECT DEATH BENEFITS AND MATURED 5 9 10 No. of No. of Pols. & No. of Pols. & Ind.Pols No. of **ENDOWMENTS** & Gr. INCURRED Certifs. Amount Certifs Amount Certifs Amount Certifs. Amount Certifs Amount 16. Unpaid December 31, prior year .....17. Incurred during current year Settled during current year: 18.1 By payment in full ..... 18.2 By payment on compromised claims 18.3 Totals paid 18.4 Reduction by compromise 18.5 Amount rejected 18.6 Total settlements 19. Unpaid Dec. 31. current year (16+17-18.6) **POLICY EXHIBIT** 20. In force December 31, prior

(a)

year ..... 21. Issued during year

(Net)

22. Other changes to in force

23. In force December 31 of

#### ACCIDENT AND HEALTH INSURANCE

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



DIRECT BUSINESS IN THE STATE OF South Carolina DURING THE YEAR 2020 LIFE INSURANCE NAIC Group Code 3891 NAIC Company Code 15473 3 2 Credit Life (Group **DIRECT PREMIUMS** AND ANNUITY CONSIDERATIONS Ordinary and Individual) Industrial Group Total Life insurance Annuity considerations 3 Deposit-type contract funds XXX XXX 4. Other considerations Totals (Sum of Lines 1 to 4) 5. DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS Life insurance: 6.1 Paid in cash or left on deposit 6.2 Applied to pay renewal premiums .. Applied to provide paid-up additions or shorten the 6.3 endowment or premium-paying period 64 Other 6.5 Totals (Sum of Lines 6.1 to 6.4) Annuities: Paid in cash or left on deposit 7.1 7.2 Applied to provide paid-up annuities 7.3 Other .. Totals (Sum of Lines 7.1 to 7.3) 8. Grand Totals (Lines 6.5 plus 7.4) DIRECT CLAIMS AND BENEFITS PAID 9. Death benefits 10. Matured endowments 11 Annuity benefits . 12. Surrender values and withdrawals for life contracts Aggregate write-ins for miscellaneous direct claims 13 and benefits paid 14. All other benefits, except accident and health 15 Totals DETAILS OF WRITE-INS 1301. 1302. 1303 Summary of Line 13 from overflow page 1398. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 1399. above) Credit Life Ordinary (Group and Individual) Industrial Group Total DIRECT DEATH 5 9 10 BENEFITS AND MATURED No. of No. of Pols. & No. of Pols. & Ind.Pols No. of **ENDOWMENTS** & Gr. INCURRED Certifs. Amount Certifs Amount Certifs Amount Certifs. Amount Certifs Amount 16. Unpaid December 31, prior year .....17. Incurred during current year Settled during current year: 18.1 By payment in full ..... 18.2 By payment on compromised claims 18.3 Totals paid 18.4 Reduction by compromise 18.5 Amount rejected 18.6 Total settlements 19. Unpaid Dec. 31. current year (16+17-18.6) **POLICY EXHIBIT** 20. In force December 31, prior year (a) 21. Issued during year 22. Other changes to in force (Net) 23. In force December 31 of current year (a) Includes Individual Credit Life Insurance prior year \$ .. current vear \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$ Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ .., current year \$ **ACCIDENT AND HEALTH INSURANCE** 5 Policyholder Dividends Paid, Refunds to Direct Premiums Members or Credited **Direct Losses** Direct Premiums Ea<u>rned</u> on Direct Business Direct Losses Paid Incurred 24 Group Policies (b) 24.1 Federal Employees Health Benefits Plan premium (b) Credit (Group and Individual) Collectively renewable policies/certificates (b) ...... Medicare Title XVIII exempt from state taxes or fee 24.3 24.4 Other Individual Policies: 25.1 Non-cancelable (b). 25.2 Guaranteed renewable (b) 25.3 Non-renewable for stated reasons only (b) Other accident only .. 25.5 All other (b). 25.6 Totals (sum of Lines 25.1 to 25.5)

24.SC

and number of persons

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

insured under indemnity only products

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

26.



DIRECT BUSINESS IN THE STATE OF South Dakota DURING THE YEAR 2020 LIFE INSURANCE NAIC Group Code 3891 NAIC Company Code 15473

	· · · · · · · · · · · · · · · · · ·	1	1 0		1	T -
	DIRECT PREMIUMS	1	2 Credit Life (Group	3	4	5
	AND ANNUITY CONSIDERATIONS	Ordinary	and Individual)	Group	Industrial	Total
1.	Life insurance					
2.	Annuity considerations					
3.	Deposit-type contract funds		XXX		XXX	
4.	Other considerations					
5.	Totals (Sum of Lines 1 to 4)					
	DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life in	nsurance:					
	Paid in cash or left on deposit					
	Applied to pay renewal premiums					
	Applied to provide paid-up additions or shorten the					
	endowment or premium-paying period					
6.4	Other					
	Totals (Sum of Lines 6.1 to 6.4)					
Annui						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (Sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)					
_	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits					
10.	Matured endowments					
	Annuity benefits					
	Surrender values and withdrawals for life contracts					
13.	Aggregate write-ins for miscellaneous direct claims					
14	and benefits paid All other benefits, except accident and health					
	Totals					
	DETAILS OF WRITE-INS					
1301.						
1302.						
1303.						
1398.	0					
	Totals (Lines 1301 thru 1303 plus 1398) (Line 13					
	above)					

	-	Ordinary		credit Life and Individual)		Group	li li	ndustrial		Total
DIDECT DE ATU				and individual)			_ '			
DIRECT DEATH	1	2	3	4	5	6	7	8	9	10
BENEFITS AND			No. of							
MATURED	No. of		Ind.Pols.				No. of		No. of	
ENDOWMENTS	Pols. &		& Gr.		No. of		Pols. &		Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior										
year										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										
18.2 By payment on										
compromised claims	,		+							
18.3 Totals paid			•							
18.4 Reduction by compromise			<b>\</b>							
18.5 Amount rejected			<b></b>		,		<u> </u>			
18.6 Total settlements			<b>.</b>							
19. Unpaid Dec. 31, current										
year (16+17-18.6)					<b>                                     </b>					
					No. of					
POLICY EXHIBIT					Policies					
20. In force December 31, prior										
year				(a)						
21. Issued during year			<b></b>		<b></b>					
22. Other changes to in force (Net)										
23. In force December 31 of current year				(a)						

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

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

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

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



DIRECT BUSINESS IN THE SNAIC Group Code 3891	STATE O	F Tennessee		LI	IFE II	NSUR/	ANC	E				YEAR 2020 Y Code 15473
·	PREMIUMS					2 dit Life (G			3	4	Company	5
AND ANNUITY C	ONSIDERA	ATIONS	Ordi	nary		dit Lile (Gi id Individu		Gro	oup	Industria	ı	Total
Life insurance      Annuity considerations												
Deposit-type contract fund	s					XXX				XXX		
Other considerations      Totals (Sum of Lines 1 to 4)												
DIRECT DIV	VIDENDS T											
POLICYHOLDERS/RE Life insurance:	EFUNDS TO	O MEMBERS										
6.1 Paid in cash or left on dep		F										
<ul><li>6.2 Applied to pay renewal pre</li><li>6.3 Applied to provide paid-up</li></ul>												
endowment or premiu 6.4 Other	m-paying p	eriod			I			T				
6.5 Totals (Sum of Lines 6.1 to												
Annuities: 7.1 Paid in cash or left on dep	ocit											
7.2 Applied to provide paid-up	annuities		<b></b>									
7.3 Other			<b></b>									
8. Grand Totals (Lines 6.5 pl							<i>y</i>					
DIRECT CLAIMS A						\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \						
Death benefits      Matured endowments												
11. Annuity benefits										-		
<ul><li>12. Surrender values and with</li><li>13. Aggregate write-ins for mis</li></ul>	scellaneous	direct claims										
and benefits paid												
15. Totals												
DETAILS OF WRITE-INS 1301.												
1302.												
1303 1398. Summary of Line 13 from (	overflow na											
1399. Totals (Lines 1301 thru 13												
above)	I		•			,						
	C	Ordinary		Credit Life and Individ	ual)		Grou	ıp	Ir	ndustrial		Total
DIRECT DEATH BENEFITS AND	1	2	3 No. of	4		5		6	7	8	9	10
MATURED	No. of		Ind.Pols.						No. of		No. of	
ENDOWMENTS INCURRED	Pols. & Certifs.	Amount	& Gr. Certifs.	Amoui	nt	No. of Certifs.	Δ	Amount	Pols. & Certifs.	Amount	Pols. & Certifs.	Amount
16. Unpaid December 31, prior year												
17. Incurred during current year												
Settled during current year: 18.1 By payment in full												
18.2 By payment on												
compromised claims												
18.4 Reduction by compromise 18.5 Amount rejected			\		•	- \-						
18.6 Total settlements							Ţ.					
19. Unpaid Dec. 31, current year (16+17-18.6)												
						No. of						
POLICY EXHIBIT 20. In force December 31, prior						Policies						
year				(a)								
<ul><li>21. Issued during year</li><li>22. Other changes to in force</li></ul>			†			<b>†</b>			f			
(Net)												
current year	nouse -	rior veer f	•	(a)	A1 1000	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\						
<ul><li>(a) Includes Individual Credit Life I Includes Group Credit Life Insu</li></ul>		•		onths at iss						rrent year \$		
Loans greater than 60 months	at issue BL	JT NOT GREATE	R THAN 12	20 MONTHS	S, prior	year \$			, cu	rrent year \$		
		A	CCIDE	NT AND	HEA		NSU			1		
			•	1		2		Policyholde		4		5
					Dire	ect Premiu	ıms		efunds to or Credited			Direct Losses
OA Oracia Dellate (1)			Direct P	remiums	5	Earned			Business	Direct Losses	Paid	Incurred
24. Group Policies (b)					ļ			†		†		
premium (b)					ļ			-		-		
24.3 Collectively renewable pol	icies/certific	cates (b)										
24.4 Medicare Title XVIII exemp Other Individual Policies:	ot from state	e taxes or fee	<b>\</b>									
25.1 Non-cancelable (b)							<b>.</b>					
25.2 Guaranteed renewable (b) 25.3 Non-renewable for stated			<b></b>									
25.4 Other accident only							<b>T</b>	+				
25.5 All other (b)												
25.6 Totals (sum of Lines 25.1) 26. Totals (Lines 24 + 24.1 + 2	,							†		†		
(b) For health business on indic		,	of persons i	nsured unde	er PPO	managed	d care	products		and	number of	f persons

insured under indemnity only products



NAIC Group Code 3891				L		NSURA	NC	E		NAIC	Company	Code 15473
DIRECT	PREMIUMS		,	1	Cred	2 lit Life (Gro	oup	;	3	4		5
AND ANNUITY Of the life insurance				inary		d Individua		Gr	oup	Industria	al	Total
Annuity considerations												
Deposit-type contract fund     Other considerations						XXX				XXX		
Other considerations     Totals (Sum of Lines 1 to												
DIRECT DI	VIDENDS TO	-										
POLICYHOLDERS/R Life insurance:	EFUNDS TO	MEMBERS										
6.1 Paid in cash or left on dep												
6.2 Applied to pay renewal pr												
6.3 Applied to provide paid-up endowment or premit												
6.4 Other												
6.5 Totals (Sum of Lines 6.1 the Annuities:	10 6.4)											
7.1 Paid in cash or left on deg	oosit											
7.2 Applied to provide paid-up			<b>\</b>									
7.3 Other			<b>-</b>				-					
8. Grand Totals (Lines 6.5 p	lus 7.4)						4					
DIRECT CLAIMS A						•						
Death benefits  10. Matured endowments												
11. Annuity benefits								1				
12. Surrender values and with								<b>-</b>				
<ol> <li>Aggregate write-ins for mi and benefits paid</li> </ol>												
<ol><li>All other benefits, except</li></ol>					ļ			ļ				
15. Totals  DETAILS OF WRITE-INS	<u>.                                    </u>				<u> </u>			-				
1301					ļ							
1302.								ļ				
1303 1398. Summary of Line 13 from												
1399. Totals (Lines 1301 thru 13												
above)												
		. P		Credit Life	1)		<u> </u>			. 4 (2.1		T. (-)
DIRECT DEATH	1	rdinary 2	(Group	and Individ	iuai)	5	Grou	<u>р</u> 6	7	ndustrial 8	9	Total 10
BENEFITS AND			No. of									
MATURED ENDOWMENTS	No. of Pols. &		Ind.Pols. & Gr.			No. of			No. of Pols. &		No. of Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amou	nt	Certifs.	Δ	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior year												
17. Incurred during current year												
Cottlad double												
Settled during current year:										•••••		
18.1 By payment in full												
18.1 By payment in full 18.2 By payment on compromised claims												
18.1 By payment in full												
18.1 By payment in full 18.2 By payment on compromised claims 18.3 Totals paid	·											
18.1 By payment in full						A						
18.1 By payment in full						N						
18.1 By payment in full 18.2 By payment on compromised claims						No. of						
18.1 By payment in full						No. of Policies						
18.1 By payment in full				(a)								
18.1 By payment in full				(a)								
18.1 By payment in full				(a)								
18.1 By payment in full												
18.1 By payment in full				(a)		Policies						
18.1 By payment in full	Insurance pri	•		(a),		Policies  year \$				urrent year \$		
18.1 By payment in full	Insurance pri	s less than or ed	qual to 60 m	(a), (a) onths at iss	ue, prio	Policies  year \$ r year \$			, Cl	urrent year \$		
18.1 By payment in full	Insurance pri	s less than or ed T NOT GREATE	qual to 60 m ER THAN 1:	(a), (a) onths at iss	ue, prio S, prior	year \$ r year \$ year \$			, Cl	•		
18.1 By payment in full	Insurance pri	s less than or ed T NOT GREATE	qual to 60 m ER THAN 12	(a), (a), (a) onths at iss	ue, prio S, prior	year \$ r year \$ year \$		RANCE	, cu	urrent year \$		5
18.1 By payment in full	Insurance pri	s less than or ed T NOT GREATE	qual to 60 m ER THAN 12	(a), (on this at iss 20 MONTHS	ue, prio S, prior	year \$ r year \$ year \$		RANCE Policyholde	, cu	urrent year \$		5
18.1 By payment in full	Insurance pri	s less than or ed T NOT GREATE	qual to 60 m ER THAN 12	(a) nonths at iss 20 MONTHS	HEA	year \$ r year \$ year \$ year \$ year \$ year \$	SUI	Policyholde Paid, Re Members	3 er Dividendefunds to or Credited	urrent year \$	Doi:	Direct Losses
18.1 By payment in full	Insurance pri urance Loans a at issue BU	s less than or ec T NOT GREATE	qual to 60 m ER THAN 12	(a), (on this at iss 20 MONTHS	HEA	year \$ r year \$ year \$ LTH IN 2	SUI	Policyholde Paid, Re Members	3 er Dividend	s 4	s Paid	
18.1 By payment in full	Insurance pri urance Loans s at issue BU <sup>*</sup>	s less than or ec T NOT GREATE A	qual to 60 m ER THAN 12	(a) nonths at iss 20 MONTHS	HEA	year \$ r year \$ year \$ year \$ year \$ year \$	SUI	Policyholde Paid, Re Members	3 er Dividendefunds to or Credited	urrent year \$	s Paid	Direct Losses
18.1 By payment in full	Insurance pri urance Loans at issue BU	s less than or ec T NOT GREATE A	qual to 60 m ER THAN 12	(a) nonths at iss 20 MONTHS	HEA	year \$ r year \$ year \$ year \$ year \$ year \$	SUI	Policyholde Paid, Re Members	3 er Dividendefunds to or Credited	urrent year \$	s Paid	Direct Losses
18.1 By payment in full	Insurance pri urance Loans at issue BUT	s less than or ec T NOT GREATE	qual to 60 m ER THAN 12	(a) nonths at iss 20 MONTHS	HEA	year \$ r year \$ year \$ year \$ year \$ year \$	SUI	Policyholde Paid, Re Members	3 er Dividendefunds to or Credited	urrent year \$	s Paid	Direct Losses
18.1 By payment in full	Insurance pri urance Loans at issue BU <sup>*</sup> th Benefits Planta and insurance in the second sec	s less than or ec T NOT GREATE  A  an  an  ates (b)	qual to 60 m ER THAN 12	(a) nonths at iss 20 MONTHS	HEA	year \$ r year \$ year \$ year \$ year \$ year \$	SUI	Policyholde Paid, Re Members	3 er Dividendefunds to or Credited	urrent year \$	s Paid	Direct Losses
18.1 By payment in full	Insurance pri urance Loans at issue BU <sup>*</sup> The Benefits Plant and the second se	an attacks or fee	qual to 60 m ER THAN 12	(a) nonths at iss 20 MONTHS	HEA	year \$ r year \$ year \$ year \$ year \$ year \$	SUI	Policyholde Paid, Re Members	3 er Dividendefunds to or Credited	urrent year \$	s Paid	Direct Losses
18.1 By payment in full	Insurance pri urance Loans s at issue BU <sup>T</sup> th Benefits Pla  ual)  ual)  ualicies/certifica  pt from state	an attacks or fee	qual to 60 m ER THAN 12	(a) nonths at iss 20 MONTHS	HEA	year \$ r year \$ year \$ year \$ year \$ year \$	SUI	Policyholde Paid, Re Members	3 er Dividendefunds to or Credited	urrent year \$	s Paid	Direct Losses
18.1 By payment in full	Insurance pri urance Loans at issue BU ual)	an attes (b)	qual to 60 m ER THAN 12	(a) nonths at iss 20 MONTHS	HEA	year \$ r year \$ year \$ year \$ year \$ year \$	SUI	Policyholde Paid, Re Members	3 er Dividendefunds to or Credited	urrent year \$	s Paid	Direct Losses
18.1 By payment in full	Insurance pri urance Loans at issue BU ual)	an attes (b)	qual to 60 m ER THAN 12	(a) , (on this at iss 20 MONTHS 11 remiums	HEA	year \$ r year \$ year \$ year \$ year \$ year \$	SUI	Policyholde Paid, Re Members	3 er Dividendefunds to or Credited	urrent year \$	s Paid	Direct Losses
18.1 By payment in full	Insurance pri urance Loans at issue BUT th Benefits Pla ual)	an attes (b) attacks or fee	Direct P	(a) , (on this at iss 20 MONTHS 11 remiums	HEA	year \$ r year \$ year \$ year \$ year \$ year \$	SUI	Policyholde Paid, Re Members	3 er Dividendefunds to or Credited	urrent year \$	s Paid	Direct Losses
18.1 By payment in full	Insurance pri urance Loans at issue BUT  The Benefits Plaual)  Jlicies/certifica pt from state  The state of the state of	an attes (b) attacks or fee	Direct P	(a) , (on this at iss 20 MONTHS 11 remiums	HEA	year \$ r year \$ year \$ year \$ year \$ year \$	SUI	Policyholde Paid, Re Members	3 er Dividendefunds to or Credited	urrent year \$	s Paid	Direct Losses

24.TX

insured under indemnity only products



DIRECT BUSINESS IN THE	STATE O	F Utah		1.1	IFF II	NSURA	ANC	F				YEAR 2020
NAIC Group Code 3891			,	1		2			3	NAIC 4	Company	/ Code 15473 5
DIRECT F AND ANNUITY C	PREMIUMS CONSIDERA		Ordi	inary		dit Life (G nd Individu		Gr	oup	Industria	al	Total
Life insurance												
<ol> <li>Annuity considerations</li> <li>Deposit-type contract fund</li> </ol>						XXX				XXX		
Other considerations												
5. Totals (Sum of Lines 1 to												
DIRECT DI POLICYHOLDERS/RI												
Life insurance:												
<ul><li>6.1 Paid in cash or left on dep</li><li>6.2 Applied to pay renewal pre</li></ul>												
6.3 Applied to provide paid-up												
endowment or premiu 6.4 Other					T							
6.5 Totals (Sum of Lines 6.1 to												
Annuities:												
<ul><li>7.1 Paid in cash or left on dep</li><li>7.2 Applied to provide paid-up</li></ul>												
7.3 Other					$\mathbf{M}$							
<ul><li>7.4 Totals (Sum of Lines 7.1 to</li><li>8. Grand Totals (Lines 6.5 pl</li></ul>	,						\- 					
DIRECT CLAIMS A		ITS PAID					┫					
Death benefits												
Matured endowments     Annuity benefits												
12. Surrender values and with												
Aggregate write-ins for mise     and benefits paid												
14. All other benefits, except a					İ							
15. Totals												
DETAILS OF WRITE-INS 1301.												
1302.												
1303.												
1398. Summary of Line 13 from 1399. Totals (Lines 1301 thru 13		•						+				
above)												
		Sadia a		Credit Life			0	_	1	ا د احدادا		Tatal
DIRECT DEATH	1	Ordinary 2	(Group	and Individ	luai)	5	Grou	<u>ір</u> 6	7 In	idustrial 8	9	Total 10
BENEFITS AND MATURED	No. of		No. of						No. of		No. of	
ENDOWMENTS	No. of Pols. &		Ind.Pols. & Gr.			No. of			No. of Pols. &		No. of Pols. &	
INCURRED  16. Unpaid December 31, prior	Certifs.	Amount	Certifs.	Amou	nt	Certifs.	P	Amount	Certifs.	Amount	Certifs.	Amount
year												
<ol> <li>Incurred during current year</li> <li>Settled during current year:</li> </ol>												
18.1 By payment in full												
18.2 By payment on												
compromised claims 18.3 Totals paid												
18.4 Reduction by compromise			<b>\</b>			<u></u>						
18.5 Amount rejected											-	
19. Unpaid Dec. 31, current												
year (16+17-18.6)			$+\mathbf{v}$			NO of					+	
POLICY EXHIBIT						Policies						
20. In force December 31, prior year				(a)								
21. Issued during year												
22. Other changes to in force (Net)												
23. In force December 31 of				(-)								
current year (a) Includes Individual Credit Life I	Insurance p	rior year \$		(a), (	current	year \$					1	_
Includes Group Credit Life Insu	urance Loar	ns less than or ed	•			•				•		
Loans greater than 60 months	at issue BU	JI NOI GREAT	ER THAN 1	20 MONTHS	S, prior	year \$			, cui	rrent year \$		
			CCIDE	NT AND	HEA		NSU			T		
			ĺ	1		2			3 er Dividends	4		5
					Dis	oot Dromi		Paid, Re	efunds to			Direct League
			Direct P	remiums	Dire	ect Premit Earned	uIIIS		or Credited Business	Direct Losse	s Paid	Direct Losses Incurred
24. Group Policies (b)												
24.1 Federal Employees Health premium (b)					ļ							
24.2 Credit (Group and Individu	ual)				<b>_</b>					-		
<ul><li>24.3 Collectively renewable pol</li><li>24.4 Medicare Title XVIII exem</li></ul>												
Other Individual Policies:					1							
25.1 Non-cancelable (b)					<b>}</b>	17	\. <b>.</b>			-		
<ul><li>25.2 Guaranteed renewable (b)</li><li>25.3 Non-renewable for stated</li></ul>	•									<b>†</b>		
25.4 Other accident only												
25.5 All other (b)					<b></b>			-				

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

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



DIRECT BUSINESS IN THE SNAIC Group Code 3891	STATE O	F Vermont		LI	IFE II	NSURA	ANC	E				EAR 2020 Code 15473
·	PREMIUMS			1		2 dit Life (G			3	4	Company	5
AND ANNUITY C	ONSIDERA		Ordi	nary		nd Individu		Gro	oup	Industria	ı	Total
Life insurance      Annuity considerations												
Deposit-type contract fund	s					XXX				xxx		
Other considerations      Totals (Sum of Lines 1 to 4)								-				
DIRECT DIV	VIDENDS T											
POLICYHOLDERS/RE Life insurance:	EFUNDS TO	O MEMBERS										
6.1 Paid in cash or left on dep												
<ul><li>6.2 Applied to pay renewal pre</li><li>6.3 Applied to provide paid-up</li></ul>								-				
endowment or premiu	m-paying pe	eriod										
6.4 Other												
Annuities:	,											
<ul><li>7.1 Paid in cash or left on dep</li><li>7.2 Applied to provide paid-up</li></ul>												
7.3 Other			<b></b>		7 Y.	,						
7.4 Totals (Sum of Lines 7.1 to 8. Grand Totals (Lines 6.5 pl							<u> </u>					
DIRECT CLAIMS A		ITS PAID					┫	+	_			
9. Death benefits												
Matured endowments      Annuity benefits								1		<u> </u>		
12. Surrender values and with	drawals for	life contracts										
Aggregate write-ins for mis     and benefits paid												
<ol><li>All other benefits, except a</li></ol>												
15. Totals  DETAILS OF WRITE-INS										1		
1301.												
1302.												
1303 1398. Summary of Line 13 from (	overflow pa	ge										
1399. Totals (Lines 1301 thru 13 above)	03 plus 139	8) (Line 13										
above)			1 (	Credit Life								
		Ordinary	(Group	and Individ	ual)		Grou			ndustrial		Total
DIRECT DEATH BENEFITS AND	1	2	3 No. of	4		5		6	7	8	9	10
MATURED	No. of		Ind.Pols.			No. of			No. of		No. of	
ENDOWMENTS INCURRED	Pols. & Certifs.	Amount	& Gr. Certifs.	Amour	nt	No. of Certifs.	F	Amount	Pols. & Certifs.	Amount	Pols. & Certifs.	Amount
16. Unpaid December 31, prior year												
17. Incurred during current year												
Settled during current year: 18.1 By payment in full												
18.2 By payment on												
compromised claims												
18.4 Reduction by compromise			<b>\</b>									
18.5 Amount rejected												
19. Unpaid Dec. 31, current							4					
year (16+17-18.6)			+ 1			No. of						
POLICY EXHIBIT						Policies						
20. In force December 31, prior year				(a)								
21. Issued during year22. Other changes to in force						<b> </b>						
(Net)						ļ						
23. In force December 31 of current year				(a)			L				<u>L</u>	
(a) Includes Individual Credit Life I		•		, c							*	•
Includes Group Credit Life Insu Loans greater than 60 months			•			•				•		
		Δ	CCIDF	NT AND	HΕΔ	LTH I	NSU	RANCE				
				1	<b></b> _	2	.50		3	4		5
								Policyholde Paid, Re	r Dividend: efunds to	3		
			Direct D	remiums	Dire	ect Premiu Earned	ums	Members	or Credited Business	Direct Losses	Daid	Direct Losses Incurred
24. Group Policies (b)			Direct P	remullis	<b></b>	Larried		OII DIFECT	DUSHIESS	DIRECT FOSSES	raiu	mcurred
24.1 Federal Employees Health premium (b)												
24.2 Credit (Group and Individu	ıal)				[			I				
24.3 Collectively renewable pol 24.4 Medicare Title XVIII exemp												
Other Individual Policies:	ot nom state	a.c.s of 166			1				<del></del>	-		
25.1 Non-cancelable (b)						17	\. <u> </u>		<b>I</b>			
<ul><li>25.2 Guaranteed renewable (b)</li><li>25.3 Non-renewable for stated</li></ul>							V					
25.4 Other accident only												
25.5 All other (b)		i i			<b></b>			+				
26. Totals (Lines 24 + 24.1 + 2	,		<u> </u>		L			<u> </u>		<u> </u>		
(b) For health business on indic			of persons i	nsured unde	er PPO	) managed	care	products		and	number of	persons

insured under indemnity only products



DIRECT BUSINESS IN THE S NAIC Group Code 3891	STATE O	F Virginia		LI	IFE II	NSUR/	ANC	E				'EAR 2020 Code 15473
·	DEMILIMO		,	1		2			3	4	Company	5
AND ANNUITY C			Ordi	nary		dit Life (Gı ıd Individu		Gre	oup	Industrial	ı	Total
Life insurance      Annuity considerations												
Deposit-type contract fund	s					XXX						
Other considerations      Totals (Sum of Lines 1 to 4)												
DIRECT DIV	VIDENDS T	-										
POLICYHOLDERS/RE	EFUNDS TO	O MEMBERS										
6.1 Paid in cash or left on depo												
6.2 Applied to pay renewal pre 6.3 Applied to provide paid-up												
endowment or premiu	m-paying pe	eriod										
6.4 Other												
Annuities:	•											
<ul><li>7.1 Paid in cash or left on dependent</li><li>7.2 Applied to provide paid-up</li></ul>	osit annuities											
7.3 Other					7							
7.4 Totals (Sum of Lines 7.1 to 8. Grand Totals (Lines 6.5 pli							<del>-</del>					
DIRECT CLAIMS A		ITS PAID					┫					
9. Death benefits												
Matured endowments     Annuity benefits								T				
12. Surrender values and with	drawals for	life contracts										
Aggregate write-ins for mis     and benefits paid												
14. All other benefits, except a												
15. Totals  DETAILS OF WRITE-INS												
1301.								<b>.</b>				
1302. 1303.												
1398. Summary of Line 13 from (	overflow pa	ge								-		
1399. Totals (Lines 1301 thru 13 above)	03 plus 139	8) (Line 13										
			1 (	Credit Life							· ·	
DIDECT DE ATU		Ordinary	(Group	and Individ	ual)		Grou			ndustrial		Total
DIRECT DEATH BENEFITS AND	1	2	3 No. of	4		5		6	7	8	9	10
MATURED ENDOWMENTS	No. of Pols. &		Ind.Pols. & Gr.			No. of			No. of Pols. &		No. of Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amour	nt	Certifs.	Α	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior year												
17. Incurred during current year Settled during current year:												
18.1 By payment in full												
18.2 By payment on compromised claims												
18.3 Totals paid												
18.4 Reduction by compromise 18.5 Amount rejected						. \						
18.6 Total settlements						<i>     </i>						
19. Unpaid Dec. 31, current year (16+17-18.6)					J							
year (10+17-16.0)						No. of						
POLICY EXHIBIT 20. In force December 31, prior						Policies						
year				(a)								
21. Issued during year 22. Other changes to in force									<del></del>			-
(Net)												
23. In force December 31 of current year				(a)								
(a) Includes Individual Credit Life I		•		, c		•				rront voc- f		-
Includes Group Credit Life Insu Loans greater than 60 months			•			•				•		
		Δ	CCIDE	NT AND	HΕΔ	LTH IN	ISU	RANCE				
				1		2			3	4		5
								Policyholde Paid, Re	er Dividends efunds to	8		
			Direct D	remiums	Dire	ect Premiu Earned	ıms	Members	or Credited Business	Direct Losses	Paid	Direct Losses Incurred
24. Group Policies (b)			Direct P			Lameu		on Direct		Direct LOSSES	ı aıu	IIIGUITEU
24.1 Federal Employees Health premium (b)												
24.2 Credit (Group and Individu	ıal)							Ţ				
24.3 Collectively renewable police 24.4 Medicare Title XVIII exemptions		` '										
Other Individual Policies:					1					+		
25.1 Non-cancelable (b)						17	\. <b>.</b>					
<ul><li>25.2 Guaranteed renewable (b)</li><li>25.3 Non-renewable for stated in</li></ul>							۳	1		1		
25.4 Other accident only												
25.5 All other (b)					<b>.</b>			-				
26. Totals (Lines 24 + 24.1 + 2	,							†·····		+		
(b) For health business on indic		,	of persons i	nsured unde	er PPO	managed	d care	products		and	number of	persons

24.VA

insured under indemnity only products



NAIC Group Code 3891				L	II L II'	ISURA	NCI	E		NAIC	Company	Code 15473
DIRECT	PREMIUMS		,	1	Cred	2 it Life (Gro	up		3	4	İ	5
AND ANNUITY (	CONSIDERA			inary	and	d Individua	l)		oup	Industria	al	Total
Life insurance     Annuity considerations					T							
Deposit-type contract fund										XXX		
<ol> <li>Other considerations</li> <li>Totals (Sum of Lines 1 to</li> </ol>												
	VIDENDS TO	0										
POLICYHOLDERS/R Life insurance:	EFUNDS TO	MEMBERS										
6.1 Paid in cash or left on dep	oosit											
6.2 Applied to pay renewal pr												
6.3 Applied to provide paid-up endowment or premiu												
6.4 Other												
6.5 Totals (Sum of Lines 6.1 t	to 6.4)											
Annuities: 7.1 Paid in cash or left on dep	oosit											
7.2 Applied to provide paid-up	annuities		<b></b>									
7.3 Other												
<ul><li>7.4 Totals (Sum of Lines 7.1 f</li><li>8. Grand Totals (Lines 6.5 p</li></ul>												
DIRECT CLAIMS A		ITS PAID										
9. Death benefits									<b></b>			
Matured endowments     Appuity benefits					<del> </del>			<del> </del>				
<ul><li>11. Annuity benefits</li><li>12. Surrender values and with</li></ul>					İ			İ				
13. Aggregate write-ins for mi	iscellaneous	direct claims										
and benefits paid					ł							
15. Totals					L			<u> </u>				
DETAILS OF WRITE-INS												
1301 1302					<del> </del>			<del> </del>				
1303.												
1398. Summary of Line 13 from	overflow pag	je										
1399. Totals (Lines 1301 thru 13 above)	303 plus 1398	8) (Line 13										
above)			1 .		1				T.	I		
	O	rdinary		Credit Life and Individ	lual)		Grou	р	1	ndustrial		Total
DIRECT DEATH	1	2	3	4	/	5		6	7	8	9	10
BENEFITS AND MATURED	No. of		No. of Ind.Pols.						No. of		No. of	
ENDOWMENTS	Pols. &		& Gr.			No. of			Pols. &		Pols. &	
INCURRED  16. Unpaid December 31, prior	Certifs.	Amount	Certifs.	Amou	nt	Certifs.	А	Mount	Certifs.	Amount	Certifs.	Amount
year												
17. Incurred during current year												
Settled during current year: 18.1 By payment in full											-	
18.1 By payment in full											-	
18.1 By payment in full 18.2 By payment on compromised claims												
18.1 By payment in full	-											
18.1 By payment in full 18.2 By payment on compromised claims 18.3 Totals paid 18.4 Reduction by compromise 18.5 Amount rejected	-											
18.1 By payment in full 18.2 By payment on compromised claims	-					N						
18.1 By payment in full 18.2 By payment on compromised claims 18.3 Totals paid 18.4 Reduction by compromise 18.5 Amount rejected	-											
18.1 By payment in full	-				)	No. of						
18.1 By payment in full	-				)	No. of Policies						
18.1 By payment in full				(a)								
18.1 By payment in full				(a)	)							
18.1 By payment in full				(a)	)							
18.1 By payment in full					)							
18.1 By payment in full 18.2 By payment on compromised claims 18.3 Totals paid 18.4 Reduction by compromise 18.5 Amount rejected 18.6 Total settlements 19. Unpaid Dec. 31, current year (16+17-18.6)  POLICY EXHIBIT 20. In force December 31, prior year 21. Issued during year 22. Other changes to in force (Net) 23. In force December 31 of current year		ior year \$		(a)		Policies						
18.1 By payment in full	Insurance pri	s less than or ed	qual to 60 m	(a), (a) onths at iss	current y	Policies  /ear \$ year \$			, cı	urrent year \$		
18.1 By payment in full	Insurance pri	s less than or ed	qual to 60 m	(a), (a) onths at iss	current y	Policies  /ear \$ year \$			, cı	ırrent year \$		
18.1 By payment in full	Insurance pri	s less than or ed T NOT GREATE	qual to 60 m ER THAN 1:	(a), (a) onths at iss	current y	vear \$			, cı	•		
18.1 By payment in full	Insurance pri	s less than or ed T NOT GREATE	qual to 60 m ER THAN 12	(a), (a), (a) onths at iss	current y	vear \$		RANCE	, cu	urrent year \$		5
18.1 By payment in full	Insurance pri	s less than or ed T NOT GREATE	qual to 60 m ER THAN 12	(a), (on this at iss 20 MONTHS	current y	/ear \$ ryear \$ year \$		RANCE Policyholde	, cu	urrent year \$		5
18.1 By payment in full	Insurance pri	s less than or ed T NOT GREATE	qual to 60 m ER THAN 12	(a) nonths at iss 20 MONTHS	current y ue, prior S, prior y	year \$ year \$ LTH IN 2	SUI	Policyholde Paid, Re Members	3 er Dividend efunds to or Credited	urrent year \$		Direct Losses
18.1 By payment in full	Insurance pri urance Loans at issue BU	s less than or ec T NOT GREATE	qual to 60 m ER THAN 12	(a), (on this at iss 20 MONTHS	current y ue, prior S, prior y	Policies  year \$ year \$ year \$ LTH IN	SUI	Policyholde Paid, Re Members	3 er Dividend	s 4	s Paid	
18.1 By payment in full	Insurance pri urance Loans at issue BU	s less than or ec T NOT GREATE A	qual to 60 m ER THAN 12	(a) nonths at iss 20 MONTHS	current y ue, prior S, prior y	year \$ year \$ LTH IN 2	SUI	Policyholde Paid, Re Members	3 er Dividend efunds to or Credited	urrent year \$	s Paid	Direct Losses
18.1 By payment in full	Insurance pri urance Loans at issue BU	s less than or ec T NOT GREATE A	qual to 60 m ER THAN 12	(a) nonths at iss 20 MONTHS	current y ue, prior S, prior y	year \$ year \$ LTH IN 2	SUI	Policyholde Paid, Re Members	3 er Dividend efunds to or Credited	urrent year \$	s Paid	Direct Losses
18.1 By payment in full	Insurance pri urance Loans at issue BUT	s less than or ec T NOT GREATE	qual to 60 m ER THAN 12	(a) nonths at iss 20 MONTHS	current y ue, prior S, prior y	year \$ year \$ LTH IN 2	SUI	Policyholde Paid, Re Members	3 er Dividend efunds to or Credited	urrent year \$	s Paid	Direct Losses
18.1 By payment in full	Insurance pri urance Loans at issue BUT	s less than or ec T NOT GREATE  A  an  aneses (b)	qual to 60 m ER THAN 12	(a) nonths at iss 20 MONTHS	current y ue, prior S, prior y	year \$ year \$ LTH IN 2	SUI	Policyholde Paid, Re Members	3 er Dividend efunds to or Credited	urrent year \$	s Paid	Direct Losses
18.1 By payment in full	Insurance pri urance Loans at issue BU <sup>*</sup> h Benefits Plaual)  ual)  uicies/certifica	an attacks or fee	qual to 60 m ER THAN 12	(a) nonths at iss 20 MONTHS	current y ue, prior S, prior y	year \$ year \$ LTH IN 2	SUI	Policyholde Paid, Re Members	3 er Dividend efunds to or Credited	urrent year \$	s Paid	Direct Losses
18.1 By payment in full	Insurance pri urance Loans at issue BU <sup>T</sup> h Benefits Pla ual)	an attes (b)	qual to 60 m ER THAN 12	(a) nonths at iss 20 MONTHS	current y ue, prior S, prior y	year \$ year \$ LTH IN 2	SUI	Policyholde Paid, Re Members	3 er Dividend efunds to or Credited	urrent year \$	s Paid	Direct Losses
18.1 By payment in full	Insurance pri urance Loans at issue BU <sup>*</sup> The Benefits Planta is at issue BU <sup>*</sup> Insurance pri urance Loans at issue BU <sup>*</sup> The Benefits Planta is at issue BU <sup>*</sup> Insurance pri urance Loans at issue BU <sup>*</sup> Insurance pri urance pri urance Loans at issue BU <sup>*</sup> Insurance pri urance Loans at issue BU <sup>*</sup> Insurance pri urance Loans at issue BU <sup>*</sup> Insurance pri urance Loans at issue BU <sup>*</sup> Insurance pri urance Loans at issue BU <sup>*</sup> Insurance pri urance Loans at issue BU <sup>*</sup> Insurance Loans at issue BU <sup>*</sup> Insurance Loans at issue BU <sup>*</sup> Insurance Loans at issue BU <sup>*</sup> Insurance Loans at issue BU <sup>*</sup> Insurance Loans at issue BU <sup>*</sup> Insurance Loans at issue BU <sup>*</sup> Insurance Loans at issue BU <sup>*</sup> Insurance Loans at issue BU <sup>*</sup> Insurance Loans at issue BU <sup>*</sup> Insurance Loans at issue BU <sup>*</sup> Insurance Loans at issue BU <sup>*</sup> Insurance Loans at issue BU <sup>*</sup> Insurance Loans at issue BU <sup>*</sup> Insurance Loans at issue BU <sup>*</sup> Insurance Loans at issue BU <sup>*</sup> Insurance Loans at issue BU <sup>*</sup> Insurance Loans at issue BU <sup>*</sup> Insurance Loans at issue BU <sup>*</sup> Insurance Loans at issue BU <sup>*</sup> Insurance Loans at issue BU <sup>*</sup> Insurance Loans at issue BU <sup>*</sup> Insurance Loans at issue BU <sup>*</sup> Insurance Loans at issue BU <sup>*</sup> Insurance Loans at issue BU <sup>*</sup> Insurance Loans at issue BU <sup>*</sup> Insurance Loans at issue BU <sup>*</sup> Insurance Loans at issue BU <sup>*</sup> Insurance Loans at issue BU <sup>*</sup> Insurance Loans at issue BU <sup>*</sup> Insurance Loans at issue BU <sup>*</sup> Insurance Loans at issue BU <sup>*</sup> Insurance Loans at issue BU <sup>*</sup> Insurance Loans at issue BU <sup>*</sup> Insurance Loans at issue BU <sup>*</sup> Insurance Loans at issue BU <sup>*</sup> Insurance Loans at issue BU <sup>*</sup> Insurance Loans at issue BU <sup>*</sup> Insurance Loans at issue BU <sup>*</sup> Insurance Loans at issue BU <sup>*</sup> Insurance Loans at issue BU <sup>*</sup> Insurance Loans at issue BU <sup>*</sup> Insurance Loans at issue BU <sup>*</sup> Insurance Loans at issue BU <sup>*</sup> Insurance Loans at issue BU <sup>*</sup> Insurance Loans at issue BU <sup>*</sup> Insurance Loans at issue BU <sup>*</sup> Insurance Loans at issue BU <sup>*</sup> Insurance Loans at issue BU <sup>*</sup> Insurance Loans at issue BU <sup>*</sup> In	an attes (b)	qual to 60 m ER THAN 12	(a) nonths at iss 20 MONTHS	current y ue, prior S, prior y	year \$ year \$ LTH IN 2	SUI	Policyholde Paid, Re Members	3 er Dividend efunds to or Credited	urrent year \$	s Paid	Direct Losses
18.1 By payment in full	Insurance pri urance Loans at issue BU  h Benefits Pla ual) licies/certifica pt from state  reasons only	an etes (b) taxes or fee	qual to 60 m ER THAN 12	(a) , (on this at iss 20 MONTHS 11 remiums	current y ue, prior S, prior y	year \$ year \$ LTH IN 2	SUI	Policyholde Paid, Re Members	3 er Dividend efunds to or Credited	urrent year \$	s Paid	Direct Losses
18.1 By payment in full	Insurance pri urance Loans at issue BUT h Benefits Plaual)	an attes (b) attacks or fee	Direct P	(a) , (on this at iss 20 MONTHS 11 remiums	current y ue, prior S, prior y	year \$ year \$ LTH IN 2	SUI	Policyholde Paid, Re Members	3 er Dividend efunds to or Credited	urrent year \$	s Paid	Direct Losses
18.1 By payment in full	h Benefits Plaual)licies/certifica	an ates (b) taxes or fee	Direct P	(a) , (on this at iss 20 MONTHS 11 remiums	current y ue, prior S, prior y	year \$ year \$ LTH IN 2	SUI	Policyholde Paid, Re Members	3 er Dividendefunds to or Credited	urrent year \$	s Paid	Direct Losses

24.WA

insured under indemnity only products



NAIC Group Code 3891	OTATE OF	vvcst viigiii	ia	LI	FE I	NSUR	ANC	E				Code 15473
DIRECT	PREMIUMS		•	1	Cre	2 dit Life (G	roun	;	3	4		5
AND ANNUITY C	ONSIDERA		Ordi	nary		nd Individu		Gr	oup	Industria	ı	Total
Life insurance      Annuity considerations												
Deposit-type contract fund						XXX						
Other considerations												
5. Totals (Sum of Lines 1 to 4	,	0										
POLICYHOLDERS/RI												
Life insurance:	aait											
6.1 Paid in cash or left on dep 6.2 Applied to pay renewal pre										+		
6.3 Applied to provide paid-up	additions o	r shorten the										
endowment or premiu	ım-paying pe	eriod								+		
6.5 Totals (Sum of Lines 6.1 to												
Annuities:												
7.1 Paid in cash or left on dep 7.2 Applied to provide paid-up												
7.3 Other			<b>\</b>									
7.4 Totals (Sum of Lines 7.1 to							\					
8. Grand Totals (Lines 6.5 pl		ITS PAID	<b>— 1</b>		J-	+						
Death benefits												
10. Matured endowments												
<ul><li>11. Annuity benefits</li><li>12. Surrender values and with</li></ul>		ľ										
13. Aggregate write-ins for mis												
and benefits paid												
<ul><li>14. All other benefits, except a</li><li>15. Totals</li></ul>	accident and	ı 116alul						<u> </u>			<del> </del>	
DETAILS OF WRITE-INS												
1301.								<del> </del>				
1302. 1303.										-		
1398. Summary of Line 13 from												
1399. Totals (Lines 1301 thru 13 above)	03 plus 139	8) (Line 13										
above)	1			2				II.	1			
	С	Ordinary		Credit Life and Individ	ual)		Grou	ıp	li	ndustrial		Total
DIRECT DEATH	1	2	3	4		5		6	7	8	9	10
BENEFITS AND MATURED	No. of		No. of Ind.Pols.						No. of		No. of	
ENDOWMENTS INCURRED	Pols. &	A t	& Gr.	A	-4	No. of	١,		Pols. &	A	Pols. &	A
16. Unpaid December 31, prior	Certifs.	Amount	Certifs.	Amour	nt	Certifs.	F	Amount	Certifs.	Amount	Certifs.	Amount
year												
17. Incurred during current year Settled during current year:												
18.1 By payment in full												
18.2 By payment on compromised claims												
18.3 Totals paid												
18.4 Reduction by compromise			<b>\</b>									
18.5 Amount rejected			<b>\</b>									
19. Unpaid Dec. 31, current	*					1	7					
year (16+17-18.6)												
POLICY EXHIBIT		_ <del>_</del>				No. of Policies						
20. In force December 31, prior				(0)								
year21. Issued during year				(a)		1						
22. Other changes to in force		***************************************										
(Net)						+						
current year		dan		(a)								
(a) Includes Individual Credit Life I Includes Group Credit Life Insu										rrent vear \$		
Loans greater than 60 months						•				-		
		A	CCIDE	NT AND	HEA	LTH IN	NSU	RANCE				
				1		2			3	4		5
								Policyholde Paid, Re	er Dividend efunds to	S		
			Di C	no no le	Dire	ect Premiu	ums	Members	or Credited		Doid	Direct Losses
24. Group Policies (b)			DIFECT P	remiums		Earned		on Direct	Business	Direct Losses	raid	Incurred
24.1 Federal Employees Health	n Benefits Pl	lan										
premium (b)								<u> </u>		1		
24.3 Collectively renewable pol	icies/certific	ates (b)										
24.4 Medicare Title XVIII exemp	pt from state	e taxes or fee	<b>\</b>		<b>9</b>	<b></b>						
Other Individual Policies: 25.1 Non-cancelable (b)												
25.2 Guaranteed renewable (b)	)						V					
25.3 Non-renewable for stated			<b></b>			<u>.</u>				-		
25.4 Other accident only			<u></u>				<del>-</del>	<del></del>				
25.6 Totals (sum of Lines 25.1		i i										
26. Totals (Lines 24 + 24.1 + 2	24.2 + 24.3	+ 24.4 + 25.6)										
(b) For health business on indi-	cated lines r	report: Number of	of persons i	nsured unde	r PPO	) managed	d care	products		and	number of	persons

24.WV

insured under indemnity only products



NAIC Group Code 3891				L	IFE II	NSURA	NCI	E		NAIC	Company	Code 15473
DIRECT	PREMIUMS		,	1	Crec	2 lit Life (Gro	up		3	4	İ	5
AND ANNUITY O	CONSIDERA			inary	and	d Individua	l)	Gr	oup	Industria	al	Total
Life insurance     Annuity considerations					T							
Deposit-type contract fund										xxx		
Other considerations     Totals (Sum of Lines 1 to												
` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `	VIDENDS TO	0										
POLICYHOLDERS/R Life insurance:	EFUNDS TO	MEMBERS										
6.1 Paid in cash or left on dep	osit											
6.2 Applied to pay renewal pro												
6.3 Applied to provide paid-up endowment or premit												
6.4 Other												
6.5 Totals (Sum of Lines 6.1 t	to 6.4)											
Annuities: 7.1 Paid in cash or left on dep	oosit			_								
7.2 Applied to provide paid-up	annuities											
7.3 Other 7.4 Totals (Sum of Lines 7.1 t					- 1							
8. Grand Totals (Lines 6.5 p												
DIRECT CLAIMS A		ITS PAID										
9. Death benefits						<b></b>						
<ul><li>10. Matured endowments</li><li>11. Annuity benefits</li></ul>					<del> </del>			<del> </del>				
<ol><li>Surrender values and with</li></ol>	ndrawals for l	life contracts						1				
13. Aggregate write-ins for mi												
and benefits paid					<b></b>			<b>†</b>				
15. Totals												
DETAILS OF WRITE-INS												
1301 1302												
1303.												
1398. Summary of Line 13 from												
1399. Totals (Lines 1301 thru 13 above)	303 pius 139	8) (Line 13										
			Ι (	Credit Life						•		
		rdinary	(Group	and Individ	lual)		Grou			ndustrial		Total
DIRECT DEATH BENEFITS AND	1	2	3 No. of	4		5		6	7	8	9	10
MATURED	No. of		Ind.Pols.						No. of		No. of	
ENDOWMENTS INCURRED	Pols. & Certifs.	Amount	& Gr. Certifs.	Amou	nt	No. of Certifs.	Δ	Amount	Pols. & Certifs.	Amount	Pols. & Certifs.	Amount
16. Unpaid December 31, prior	Certiis.	Amount	Certiis.	Amou	111	Certiis.		anount	Certiis.	Amount	Certiis.	Amount
year17. Incurred during current year												
Settled during current year:				•								
18.1 By payment in full											-	
18.2 By payment on	-											
18.2 By payment on compromised claims												
18.2 By payment on compromised claims	-											
18.2 By payment on compromised claims	-					N						
18.2 By payment on compromised claims	-					N						
18.2 By payment on compromised claims	-				)							
18.2 By payment on compromised claims	-				)	No. of Policies						
18.2 By payment on compromised claims				(a)	)							
18.2 By payment on compromised claims			V	(a)	)							
18.2 By payment on compromised claims				(a)								
18.2 By payment on compromised claims				(a)								
18.2 By payment on compromised claims				(a)	)	Policies						
18.2 By payment on compromised claims	Insurance pr	•		(a),		Policies  year \$				urrent year \$		
18.2 By payment on compromised claims	Insurance prurance Loan	s less than or ed	jual to 60 m	(a), (a) onths at iss	ue, prio	Policies  year \$ r year \$			, Cl	urrent year \$		
18.2 By payment on compromised claims	Insurance prurance Loan	s less than or ed T NOT GREATE	qual to 60 m	(a), (a), (a) onths at iss	ue, prio S, prior	year \$ r year \$ year \$			, Cl	•		
18.2 By payment on compromised claims	Insurance prurance Loan	s less than or ed T NOT GREATE	qual to 60 m ER THAN 12	(a), (a) onths at iss	ue, prio S, prior	year \$ r year \$ year \$		RANCE	, cu	urrent year \$		5
18.2 By payment on compromised claims	Insurance prurance Loan	s less than or ed T NOT GREATE	qual to 60 m ER THAN 12	(a), (on this at iss 20 MONTHS	ue, prio S, prior	year \$ r year \$ year \$ tyear \$		RANCE Policyholde	, cu	urrent year \$		5
18.2 By payment on compromised claims	Insurance prurance Loan	s less than or ed T NOT GREATE	qual to 60 m ER THAN 12	(a) nonths at iss 20 MONTHS	HEA	year \$ r year \$ year \$ LTH IN 2	SUI	Policyholde Paid, Re Members	3 er Dividendefunds to or Credited	urrent year \$		Direct Losses
18.2 By payment on compromised claims	Insurance pr urance Loan: at issue BU	s less than or ec T NOT GREATE	qual to 60 m ER THAN 12	(a), (on this at iss 20 MONTHS	HEA	policies  year \$ r year \$ year \$ LTH IN 2	SUI	Policyholde Paid, Re Members	3 er Dividend	s 4	s Paid	
18.2 By payment on compromised claims	Insurance prurance Loanatissue BU	s less than or ec T NOT GREATE A	qual to 60 m ER THAN 12	(a) nonths at iss 20 MONTHS	HEA	year \$ r year \$ year \$ LTH IN 2	SUI	Policyholde Paid, Re Members	3 er Dividendefunds to or Credited	urrent year \$	s Paid	Direct Losses
18.2 By payment on compromised claims	Insurance prurance Loan: at issue BU	s less than or ec T NOT GREATE A	qual to 60 m ER THAN 12	(a) nonths at iss 20 MONTHS	HEA	year \$ r year \$ year \$ LTH IN 2	SUI	Policyholde Paid, Re Members	3 er Dividendefunds to or Credited	urrent year \$	s Paid	Direct Losses
18.2 By payment on compromised claims	Insurance prurance Loan: at issue BU	s less than or ec T NOT GREATE	qual to 60 m ER THAN 12	(a) nonths at iss 20 MONTHS	HEA	year \$ r year \$ year \$ LTH IN 2	SUI	Policyholde Paid, Re Members	3 er Dividendefunds to or Credited	urrent year \$	s Paid	Direct Losses
18.2 By payment on compromised claims	Insurance prurance Loans at issue BU	s less than or ec T NOT GREATE  A  an  ates (b)	qual to 60 m ER THAN 12	(a) nonths at iss 20 MONTHS	HEA	year \$ r year \$ year \$ LTH IN 2	SUI	Policyholde Paid, Re Members	3 er Dividendefunds to or Credited	urrent year \$	s Paid	Direct Losses
18.2 By payment on compromised claims	Insurance prurance Loan: at issue BU  h Benefits Plual) licies/certific. pt from state	s less than or ec T NOT GREATE  A  an  ates (b) taxes or fee	qual to 60 m ER THAN 12	(a) nonths at iss 20 MONTHS	HEA	year \$ r year \$ year \$ LTH IN 2	SUI	Policyholde Paid, Re Members	3 er Dividendefunds to or Credited	urrent year \$	s Paid	Direct Losses
18.2 By payment on compromised claims	Insurance prurance Loan: at issue BU'  h Benefits Plual) licies/certifici	an attes (b)et taxes or fee	qual to 60 m ER THAN 12	(a) nonths at iss 20 MONTHS	HEA	year \$ r year \$ year \$ LTH IN 2	SUI	Policyholde Paid, Re Members	3 er Dividendefunds to or Credited	urrent year \$	s Paid	Direct Losses
18.2 By payment on compromised claims	Insurance prurance Loan: at issue BU  h Benefits Plual) licies/certific: pt from state	an ates (b)	qual to 60 m ER THAN 12	(a) nonths at iss 20 MONTHS	HEA	year \$ r year \$ year \$ LTH IN 2	SUI	Policyholde Paid, Re Members	3 er Dividendefunds to or Credited	urrent year \$	s Paid	Direct Losses
18.2 By payment on compromised claims	Insurance prurance Loan: at issue BU  h Benefits Plual) licies/certific: pt from state  ) reasons only	an an ates (b) ataxes or fee	qual to 60 m ER THAN 12	(a) , (on this at iss 20 MONTHS 11 remiums	HEA	year \$ r year \$ year \$ LTH IN 2	SUI	Policyholde Paid, Re Members	3 er Dividendefunds to or Credited	urrent year \$	s Paid	Direct Losses
18.2 By payment on compromised claims	h Benefits Plual)licies/certificapt from state	an an ates (b) taxes or fee	pual to 60 m ER THAN 1:	(a) , (on this at iss 20 MONTHS 11 remiums	HEA	year \$ r year \$ year \$ LTH IN 2	SUI	Policyholde Paid, Re Members	3 er Dividendefunds to or Credited	urrent year \$	s Paid	Direct Losses
18.2 By payment on compromised claims	h Benefits Plual)licies/certificapt from state	an an ates (b) taxes or fee	pual to 60 m ER THAN 1:	(a) , (on this at iss 20 MONTHS 11 remiums	HEA	year \$ r year \$ year \$ LTH IN 2	SUI	Policyholde Paid, Re Members	3 er Dividendefunds to or Credited	urrent year \$	s Paid	Direct Losses

24.WI

insured under indemnity only products



DIRECT BUSINESS IN THE NAIC Group Code 3891	STATE O	F Wyoming		LI	IFE II	NSURA	ANC	E				EAR 2020 Code 15473
·	PREMIUMS		,	1		2 dit Life (G			3	4		5
AND ANNUITY C	ONSIDERA		Ordi	nary		nd Individu		Gro	oup	Industrial		Total
Life insurance      Annuity considerations												
Deposit-type contract fund	ls					XXX				XXX		
Other considerations      Totals (Sum of Lines 1 to 4)												
DIRECT DIV	VIDENDS T											
POLICYHOLDERS/RI Life insurance:	EFUNDS TO	O MEMBERS										
6.1 Paid in cash or left on dep	osit											
6.2 Applied to pay renewal pre												
6.3 Applied to provide paid-up endowment or premiu												
6.4 Other												
6.5 Totals (Sum of Lines 6.1 to Annuities:	0 6.4)											
7.1 Paid in cash or left on dep												
7.2 Applied to provide paid-up 7.3 Other			<b>\</b>		•							
7.4 Totals (Sum of Lines 7.1 to	o 7.3)											
8. Grand Totals (Lines 6.5 pl		ITS DAID										
Death benefits												
10. Matured endowments												
<ul><li>11. Annuity benefits</li><li>12. Surrender values and with</li></ul>		ľ										
13. Aggregate write-ins for mis	scellaneous	direct claims										
and benefits paid								<u> </u>				
15. Totals												
DETAILS OF WRITE-INS 1301.												
1302.												
1303.												
1398. Summary of Line 13 from 1399. Totals (Lines 1301 thru 13								<del></del>				
above)												
		Ordinary		Credit Life and Individu	ual)		Grou	ın	le	ndustrial		Total
DIRECT DEATH	1	2	3	4	uai)	5	GIOU	<del>ір</del> 6	7	8	9	10
BENEFITS AND MATURED	No. of		No. of Ind.Pols.						No. of		No. of	
ENDOWMENTS	Pols. &		& Gr.			No. of			Pols. &		Pols. &	
INCURRED  16. Unpaid December 31, prior	Certifs.	Amount	Certifs.	Amour	nt	Certifs.	- /	Amount	Certifs.	Amount	Certifs.	Amount
year17. Incurred during current year												
Settled during current year:												
18.1 By payment in full												
18.2 By payment on compromised claims						ļ						
18.3 Totals paid												
18.5 Amount rejected			<b>\</b>		7							
18.6 Total settlements												
19. Unpaid Dec. 31, current year (16+17-18.6)							Ò					
DOLLOW EXCURIT						No. of	•					
POLICY EXHIBIT 20. In force December 31, prior						Policies						
year21. Issued during year				(a)		<b></b>						
22. Other changes to in force						<b>†</b>						
(Net)												
current year				(a)		<u> </u>						
<ul><li>(a) Includes Individual Credit Life I Includes Group Credit Life Insu</li></ul>		•		onths at issu						rrent vear \$		
Loans greater than 60 months			•			•				•		
		A	CCIDE	NT AND	HEA	LTH IN	NSU	RANCE				
				1		2		Policyholde	3 er Dividende	4		5
								Paid, Re	efunds to			
			Direct P	remiums	Dire	ect Premiu Earned	ums		or Credited Business	Direct Losses	Paid	Direct Losses Incurred
24. Group Policies (b)			55(1					22000				
24.1 Federal Employees Health premium (b)												
24.2 Credit (Group and Individu	ıal)											
<ul><li>24.3 Collectively renewable pol</li><li>24.4 Medicare Title XVIII exemptor</li></ul>												
Other Individual Policies:					1				_			
25.1 Non-cancelable (b)						-17	\. <b>.</b>		<b>I</b>			
25.3 Non-renewable for stated												
25.4 Other accident only												
25.5 All other (b)		i i						-				
26. Totals (Lines 24 + 24.1 + 2	24.2 + 24.3	+ 24.4 + 25.6)										
(b) For health business on indi-			of persons i	nsured unde	er PPO	manageo	d care	products		and	number of	persons

insured under indemnity only products



NAIC Group Code 3891	STATE OF	American S	amoa	LI	IFE II	NSUR/	ANCI	E				Code 15473
·			1			2			3	4		5
AND ANNUITY C	PREMIUMS ONSIDERA	TIONS	Ordi	nary		dit Life (Gı nd Individu		Gre	oup	Industria	ı	Total
Life insurance												
2. Annuity considerations												
Deposit-type contract fund     Other considerations						XXX						
5. Totals (Sum of Lines 1 to												
DIRECT DIV		0										
POLICYHOLDERS/RI	EFUNDS TO	MEMBERS										
Life insurance:	a a it											
6.1 Paid in cash or left on dep 6.2 Applied to pay renewal pre		i i								-		
6.3 Applied to provide paid-up												
endowment or premiu												
6.4 Other												
6.5 Totals (Sum of Lines 6.1 to Annuities:	0 6.4)											
7.1 Paid in cash or left on dep	osit											
7.2 Applied to provide paid-up	annuities		<b>\</b>									
7.3 Other			<b></b>									
7.4 Totals (Sum of Lines 7.1 to	,						<u>.</u>					
8. Grand Totals (Lines 6.5 pl		ITO DAID	- 14			$\blacksquare$						
9. Death benefits		_										
9. Death benefits  10. Matured endowments										+		
11. Annuity benefits		ĺ						İ		1	<u> </u>	
12. Surrender values and with	drawals for	life contracts										
13. Aggregate write-ins for mis												
and benefits paid										+		
15. Totals	accident and	uid1						+		†		
DETAILS OF WRITE-INS										1		
1301.										4		
1302.												
1303.												
1398. Summary of Line 13 from 1399. Totals (Lines 1301 thru 13												
above)	oo pius 109	o) (Line 13										
				Credit Life								
	C	Ordinary		and Individ	ual)		Grou	р	li li	ndustrial		Total
DIRECT DEATH	1	2	3	4		5		6	7	8	9	10
BENEFITS AND MATURED	No of		No. of Ind.Pols.						No of		No of	
ENDOWMENTS	No. of Pols. &		& Gr.			No. of			No. of Pols. &		No. of Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amour	nt	Certifs.	А	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior												
year												
Settled during current year:												
18.1 By payment in full												
18.2 By payment on												
compromised claims											-	
18.4 Reduction by compromise			\						•••••			
18.5 Amount rejected			<b>\</b>									
18.6 Total settlements							<u>.</u>					
19. Unpaid Dec. 31, current												
year (16+17-18.6)							┫					
POLICY EXHIBIT		_				No. of Policies						
20. In force December 31, prior						2.33						
year				(a)		ļ						
21. Issued during year						<del> </del>					-	-
22. Other changes to in force (Net)												
23. In force December 31 of												
current year		iorus A	•	(a)							<del>                                     </del>	
<ul><li>(a) Includes Individual Credit Life I Includes Group Credit Life Insu</li></ul>		•	l to 60 m	,						rrent vear ¢		
Loans greater than 60 months			•			•				-		
J						•			, 50	<b>3</b> · • • · · · · · · · · · · · · · · · ·		
		A	CCIDE		HEA		งอับโ		n		ı	
			1	ı		2		Policyholde	3 er Dividend	4 s		5
								Paid, Re	efunds to			
			D:		Dire	ect Premiu	ıms	Members			Detail	Direct Losses
24. Group Policies (b)			Direct Pr	emiums		Earned		on Direct	Business	Direct Losses	raid	Incurred
24.1 Federal Employees Health					·····			<b>†</b>		-†		
premium (b)					ļ			<b></b>				
24.2 Credit (Group and Individu	,				<b> </b>			<b>+</b>				
24.3 Collectively renewable pol		. ,						-				
24.4 Medicare Title XVIII exemple Other Individual Policies:	pt แบบ รเส <b>เ</b>	taxes of ree	<b>\</b>		1			+				
25.1 Non-cancelable (b)												
25.2 Guaranteed renewable (b)	)						<u> </u>					
25.3 Non-renewable for stated	reasons onl	y (b)					<b>V</b>	<b>       </b>				
25.4 Other accident only												
								T				
25.5 All other (b)												
25.6 Totals (sum of Lines 25.1	to 25.5)											
	to 25.5) 24.2 + 24.3	+ 24.4 + 25.6)										

24.AS

insured under indemnity only products



DIRECT BUSINESS IN THE NAIC Group Code 3891	STATE O	F Guam		LI	IFE II	NSUR/	ANC	E				'EAR 2020 Code 15473
	PREMIUMS			1		2 dit Life (G			3	4	Company	5
AND ANNUITY O	CONSIDERA	ATIONS	Ordi	nary		all Life (Gi nd Individu		Gre	oup	Industrial	ı	Total
Life insurance      Annuity considerations												
Deposit-type contract fund	ds					XXX						
Other considerations     Totals (Sum of Lines 1 to												
DIRECT DI	VIDENDS T	-										
POLICYHOLDERS/R Life insurance:	EFUNDS TO	O MEMBERS										
6.1 Paid in cash or left on dep												
6.2 Applied to pay renewal pro										<del> </del>		
endowment or premit	ım-paying p	eriod										
6.4 Other												
Annuities:	•											
7.1 Paid in cash or left on dep 7.2 Applied to provide paid-up	osit annuities											
7.3 Other					7 /				·····			
7.4 Totals (Sum of Lines 7.1 t 8. Grand Totals (Lines 6.5 p							<del>-</del>					
DIRECT CLAIMS A		ITS PAID										
9. Death benefits												
Matured endowments     Annuity benefits								T				
12. Surrender values and with												
13. Aggregate write-ins for mi and benefits paid												
14. All other benefits, except a	accident and	d health								<b>_</b>		
DETAILS OF WRITE-INS	<b>3</b>									1		
1301. 1302.								<b>-</b>		<del> </del>		
1303.												
1398. Summary of Line 13 from	overflow pa	ge										
1399. Totals (Lines 1301 thru 13 above)	303 plus 139	98) (Line 13										
				Credit Life								
DIRECT DEATH	1	Ordinary 2	(Group	and Individ	ual)	5	Grou	ір 6	lr 7	idustrial 8	9	Total 10
BENEFITS AND		2	No. of	7		3		U		O		10
MATURED ENDOWMENTS	No. of Pols. &		Ind.Pols. & Gr.			No. of			No. of Pols. &		No. of Pols. &	
INCURRED  16. Unpaid December 31, prior	Certifs.	Amount	Certifs.	Amour	nt	Certifs.	Α	Amount	Certifs.	Amount	Certifs.	Amount
year												
17. Incurred during current year Settled during current year:												
18.1 By payment in full												
18.2 By payment on compromised claims												
18.3 Totals paid			·									
18.4 Reduction by compromise 18.5 Amount rejected												
18.6 Total settlements							<u>.</u>					
19. Unpaid Dec. 31, current year (16+17-18.6)												
POLICY EXHIBIT						No. of Policies						
20. In force December 31, prior						Folicies						
year21. Issued during year				(a)								-
22. Other changes to in force												
(Net)						+						
current year (a) Includes Individual Credit Life	Insurance n	rior vear \$		(a), c	current	vear ¢						
Includes Group Credit Life Inst	urance Loar	is less than or ed	qual to 60 m	onths at issu	ue, pric	or year \$				rrent year \$		
Loans greater than 60 months	at issue BU				•				, cu	rrent year \$		
Г		Α		NT AND	HEA	LTH IN	ISU		3	<b>I</b> 4	<u> </u>	5
						4		Policyholde	er Dividends	-		J
					Dire	ect Premiu	ıms		efunds to or Credited			Direct Losses
24 Group Policies (h)			Direct P	remiums		Earned			Business	Direct Losses	Paid	Incurred
24. Group Policies (b)	h Benefits P	lan			·····			†		<b>†</b>		
premium (b)					L			+				
24.3 Collectively renewable po	licies/certific	ates (b)										
24.4 Medicare Title XVIII exem Other Individual Policies:	pt from state	e taxes or fee	<b>\ </b>				∭		<del></del>	<u> </u>		
25.1 Non-cancelable (b)							<b></b>					
25.2 Guaranteed renewable (b 25.3 Non-renewable for stated	)						<b>\</b>			<u> </u>		
25.4 Other accident only												
25.5 All other (b)												
25.6 Totals (sum of Lines 25.1 26. Totals (Lines 24 + 24.1 +	,							†		<del> </del>		
(b) For health business on indi		•	of persons i	nsured unde	er PPO	managed	l care	products		and	number of	persons

24.GU

insured under indemnity only products



DIRECT BUSINESS IN THE STATE OF Puerto Rico DURING THE YEAR 2020 LIFE INSURANCE NAIC Group Code 3891 NAIC Company Code 15473 3 2 Credit Life (Group **DIRECT PREMIUMS** AND ANNUITY CONSIDERATIONS Ordinary and Individual) Industrial Group Total Life insurance Annuity considerations 3 Deposit-type contract funds XXX XXX 4. Other considerations Totals (Sum of Lines 1 to 4) 5. DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS Life insurance: 6.1 Paid in cash or left on deposit 6.2 Applied to pay renewal premiums .. Applied to provide paid-up additions or shorten the 6.3 endowment or premium-paying period 64 Other 6.5 Totals (Sum of Lines 6.1 to 6.4) Annuities: Paid in cash or left on deposit 7.1 7.2 Applied to provide paid-up annuities 7.3 Other .. Totals (Sum of Lines 7.1 to 7.3) 8. Grand Totals (Lines 6.5 plus 7.4) DIRECT CLAIMS AND BENEFITS PAID 9. Death benefits Matured endowments 11 Annuity benefits . 12. Surrender values and withdrawals for life contracts Aggregate write-ins for miscellaneous direct claims 13 and benefits paid 14. All other benefits, except accident and health 15 Totals DETAILS OF WRITE-INS 1301. 1302. 1303 1398. Summary of Line 13 from overflow page Totals (Lines 1301 thru 1303 plus 1398) (Line 13 1399. above) Credit Life Ordinary (Group and Individual) Industrial Group Total DIRECT DEATH 5 9 10 BENEFITS AND MATURED No. of No. of Pols. & No. of Pols. & Ind.Pols No. of **ENDOWMENTS** & Gr. INCURRED Certifs. Amount Certifs Amount Certifs Amount Certifs. Amount Certifs Amount 16. Unpaid December 31, prior year .....17. Incurred during current year Settled during current year: 18.1 By payment in full ..... 18.2 By payment on compromised claims 18.3 Totals paid 18.4 Reduction by compromise 18.5 Amount rejected 18.6 Total settlements 19. Unpaid Dec. 31. current year (16+17-18.6) **POLICY EXHIBIT** 20. In force December 31, prior year (a) 21. Issued during year 22. Other changes to in force (Net) 23. In force December 31 of current year (a) Includes Individual Credit Life Insurance prior year \$ .. current vear \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$ Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ .., current year \$ **ACCIDENT AND HEALTH INSURANCE** 5 Policyholder Dividends Paid, Refunds to Direct Premiums Members or Credited **Direct Losses** Direct Premiums Ea<u>rned</u> on Direct Business Direct Losses Paid Incurred 24 Group Policies (b) 24.1 Federal Employees Health Benefits Plan premium (b) Credit (Group and Individual) Collectively renewable policies/certificates (b) ...... Medicare Title XVIII exempt from state taxes or fee 24.3 24.4 Other Individual Policies: 25.1 Non-cancelable (b). 25.2 Guaranteed renewable (b) 25.3 Non-renewable for stated reasons only (b) Other accident only .. 25.5 All other (b). 25.6 Totals (sum of Lines 25.1 to 25.5) Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) 26.

24.PR

and number of persons

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

insured under indemnity only products



DIRECT BUSINESS IN THE STATE OF U.S. Virgin Islands DURING THE YEAR 2020 LIFE INSURANCE NAIC Group Code 3891 NAIC Company Code 15473 3 2 Credit Life (Group **DIRECT PREMIUMS** AND ANNUITY CONSIDERATIONS Ordinary and Individual) Industrial Group Total Life insurance Annuity considerations 3 Deposit-type contract funds XXX XXX 4. Other considerations Totals (Sum of Lines 1 to 4) 5. DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS Life insurance: 6.1 Paid in cash or left on deposit 6.2 Applied to pay renewal premiums .. Applied to provide paid-up additions or shorten the 6.3 endowment or premium-paying period 64 Other 6.5 Totals (Sum of Lines 6.1 to 6.4) Annuities: Paid in cash or left on deposit 7.1 7.2 Applied to provide paid-up annuities 7.3 Other .. Totals (Sum of Lines 7.1 to 7.3) 8. Grand Totals (Lines 6.5 plus 7.4) DIRECT CLAIMS AND BENEFITS PAID 9. Death benefits Matured endowments 11 Annuity benefits . 12. Surrender values and withdrawals for life contracts Aggregate write-ins for miscellaneous direct claims 13 and benefits paid 14. All other benefits, except accident and health 15 Totals DETAILS OF WRITE-INS 1301. 1302. 1303 Summary of Line 13 from overflow page 1398. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 1399. above) Credit Life Ordinary (Group and Individual) Industrial Group Total DIRECT DEATH 5 9 10 BENEFITS AND MATURED No. of No. of Pols. & No. of Pols. & Ind.Pols No. of **ENDOWMENTS** & Gr. INCURRED Certifs. Amount Certifs Amount Certifs Amount Certifs. Amount Certifs Amount 16. Unpaid December 31, prior year ......17. Incurred during current year Settled during current year: 18.1 By payment in full 18.2 By payment on compromised claims 18.3 Totals paid 18.4 Reduction by compromise 18.5 Amount rejected 18.6 Total settlements 19. Unpaid Dec. 31. current year (16+17-18.6) **POLICY EXHIBIT** 20. In force December 31, prior year (a) 21. Issued during year 22. Other changes to in force (Net) 23. In force December 31 of current year (a) Includes Individual Credit Life Insurance prior year \$ .. current vear \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$ Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ .., current year \$ **ACCIDENT AND HEALTH INSURANCE** 5 Policyholder Dividends Paid, Refunds to Direct Premiums Members or Credited **Direct Losses** Direct Premiums Ea<u>rned</u> on Direct Business Direct Losses Paid Incurred 24 Group Policies (b) 24.1 Federal Employees Health Benefits Plan premium (b) Credit (Group and Individual) Collectively renewable policies/certificates (b) ...... Medicare Title XVIII exempt from state taxes or fee 24.3 24.4 Other Individual Policies: 25.1 Non-cancelable (b). 25.2 Guaranteed renewable (b) 25.3 Non-renewable for stated reasons only (b) Other accident only .. 25.5 All other (b). 25.6 Totals (sum of Lines 25.1 to 25.5) Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) 26.

24.VI

and number of persons

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

insured under indemnity only products



DIRECT BUSINESS IN THE STATE OF Northern Mariana Islands DURING THE YEAR 2020 LIFE INSURANCE NAIC Group Code 3891 NAIC Company Code 15473 3 2 Credit Life (Group DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS Ordinary and Individual) Group Industrial Total Life insurance Annuity considerations 3. Deposit-type contract funds XXX XXX. 4. Other considerations Totals (Sum of Lines 1 to 4) 5. DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS Life insurance: 6.1 Paid in cash or left on deposit. 6.2 Applied to pay renewal premiums ... 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period. 6.4 Other 6.5 Totals (Sum of Lines 6.1 to 6.4) Annuities: 7.1 Paid in cash or left on deposit 7.2 Applied to provide paid-up annuities 7.3 Other . Totals (Sum of Lines 7.1 to 7.3) 8. Grand Totals (Lines 6.5 plus 7.4) DIRECT CLAIMS AND BENEFITS PAID 9. Death benefits . Matured endowments 11. Annuity benefits . Surrender values and withdrawals for life contracts 12. 13. Aggregate write-ins for miscellaneous direct claims and benefits paid 14. All other benefits, except accident and health

15

1301. 1302. 1303

1399.

Totals

DETAILS OF WRITE-INS

1398. Summary of Line 13 from overflow page

Totals (Lines 1301 thru 1303 plus 1398) (Line 13

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

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

				redit Life		_				
	0	rdinary	(Group	and Individual)		Group	l l	ndustrial		Total
DIRECT DEATH BENEFITS AND	1	2	3 No. of	4	5	6	7	8	9	10
MATURED ENDOWMENTS INCURRED	No. of Pols. & Certifs.	Amount	Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior										
year17. Incurred during current year Settled during current year:										
18.1 By payment in full										
18.2 By payment on compromised claims	,									
18.4 Reduction by compromise										
8.5 Amount rejected										
18.6 Total settlements			<b></b>							
19. Unpaid Dec. 31, current year (16+17-18.6)										
POLICY EXHIBIT 20. In force December 31, prior		-			No. of Policies					
year			(	a)						
21. Issued during year										
22. Other changes to in force (Net)										
23. In force December 31 of current year				(a)						

**ACCIDENT AND HEALTH INSURANCE** 

....., current year \$

..., current year \$

	<i>r</i>	ACCIDEIN AND	IILALIII II130I	MAITOL		
		1	2	3	4	5
				Policyholder Dividends		
				Paid, Refunds to		
			Direct Premiums	Members or Credited		Direct Losses
		Direct Premiums	Earned	on Direct Business	Direct Losses Paid	Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Plan premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively renewable policies/certificates (b)					
	Medicare Title XVIII exempt from state taxes or fee					
	Other Individual Policies:					
25.1	Non-cancelable (b)					
	Guaranteed renewable (b)					
	Non-renewable for stated reasons only (b)					
	Other accident only					
				***************************************		
			•			•
				†		
	All other (b)					

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



DIRECT PREBILIDA AND ANALYT CONSIDERATIONS Collinery And Industrial List for countered AND ANALYT CONSIDERATIONS Collinery Analytic consideration Analytic consi	DIRECT BUSINESS IN THE NAIC Group Code 3891	STATE OF	- Canada		LI	IFE II	NSUR/	ANC	E				'EAR 2020 Code 15473
AND ANNUTY CONSIDERATIONS  Displace of the control fund of the con	DIRECT	PREMILIMS		,			2			3			
2. Amuly constroatedness  Depared special control for the control of the control	AND ANNUITY O	CONSIDERA	ATIONS						Gr	oup	Industria	ı	Total
3. Depart Hope Contract Annie													
5. Totals (Sam of Lines 1 to 4)  POLYMOLDERS REPUISO TO MEMBERS  6.1 Paid in cast or tell on degreed  8.2 Applied to give revised permittens  8.4 Applied to give revised permittens  8.4 Applied to give revised permittens  8.5 Totals (Sum of Line 6 to 6.4)  8.6 Totals (Sum of Line 6 to 6.4)  8.7 Totals (Sum of Line 6 to 6.4)  8.7 Totals (Sum of Line 6 to 6.4)  8.8 Totals (Sum of Line 6 to 6.4)  8.9 DIRECT CLAMS AND BENETIS PAID  9.0							XXX				XXX		
PRINCE TOURISHORS TO MEMBERS 6.1 Paid in cash or left on deposed. 6.2 Applied to provide gold-up-additions or shorten the control to the cont													
Life insurance:  10.1 Padi in cash o left on deposit  10.2 Applied to pay merced premise applied and the second of the end of the part of the end of the e	•	,	0										
6.1 Paid in cash or left on deposit. 6.2 Applied to provide paid-up anothers or shortnin the 6.3 Applied to provide paid-up anothers or shortnin the 6.5 Totals (Sum of Lines 5 to 8.4) Amount Carties (Sum of Lines 5 to 8.4) Amount Carties (Sum of Lines 7 to 7.3) Deposit (Sum of Lines 7		EFUNDS TO	O MEMBERS										
8.3 Applied to provide pall-up additions or shorten to applied. Other Common or promise provide particular provides particular provides and up an applied to the particular provides (Start of Lines 6.1 to 0.4).  8.6 Totals (Start of Lines 6.1 to 0.4).  7.1 Pall in cesh or left on deposit.  7.1 Pall in cesh or left on deposit.  7.2 Operation provides pall-up annuallies.  7.3 Operation provides pall-up annuallies.  7.3 Operation provides pall-up annuallies.  7.4 Operation provides pall-up annuallies.  7.5 Operation provides pall-up annuallies.  7.6 Operation provides pall-up annuallies.  7.7 Operation provides pall-up annuallies.  7.7 Operation provides pall-up annuallies.  7.8 Operation provides pall-up annuallies.  7.9 Operation provides pall-up annuallies.  7.9 Operation provides pall-up annuallies.  7.0 Operation provides pall-up annuallies.  7.1 Pall-up annuallies.  7.2 Operation provides pall-up annuallies.  7.3 Operation provides pall-up annuallies.  7.4 Applied to provide pall-up annuallies.  7.5 Operation provides pall-up annuallies.  7.6 Operation provides pall-up annuallies.  7.7 Operation provides pall-up annuallies.  7.8 Operation provides pall-up annuallies.  7.9 Operation provide		osit											
6.6 Order Control Cont													
6.4 Ofber 6.5 Totals (Sum of Lines 6.1 to 6.4)  Amounts 7.3 Ofber 7.4 Totals (Sum of Lines 7.1 to 7.3) 8. Grand Totals (Lines 5.9 to 7.3) 9. Dealth secrification (Lines 5.9 to 7.3) 9. Dealth secrification (Lines 5.9 to 7.3) 9. Dealth secrification (Lines 5.9 to 7.3) 9. Dealth secrification (Lines 5.9 to 7.3) 9. Dealth secrification (Lines 5.9 to 7.3) 9. Dealth secrification (Lines 5.9 to 7.3) 9. Dealth secrification (Lines 5.9 to 7.3) 9. Dealth secrification (Lines 5.9 to 7.3) 9. Dealth secrification (Lines 5.9 to 7.3) 9. Dealth secrification (Lines 5.9 to 7.3) 9. Dealth secrification (Lines 5.1 to 7.3) 9. Dealth secrification (Lines 5.3 to 7.3 to													
Annutes. 7.1 Pad in cash of reft on deposit. 7.2 Applied to provide paid-up annuties. 7.3 Other Cash Support of Paid Support o	6.4 Other												
7.1 Paid in cash or left on deposit and opposit paid-up annuables of lone	•	to 6.4)											
7.2 Applied to provide paid-up annutiles 7.3 Other 7.4 Total Source I time 1, 16 or 7 o. 9 8. DEFACT CLAMPS AND BENEFITS PAID 9. Death benefits 1. Annuty bronfits 1.	7.1 Paid in cash or left on dep	osit											
7.4 Totals (Sum of Lines 7, 16 7.3)  6. Grand Totals (Lines 6, plan 74)  7. DIRECT CLAMS AND BENEFITS PAID  9. Manuard and comments  9. Manuard and comments  19. Manuard and comments  19. Agreement of the contracts  19. Ag	7.2 Applied to provide paid-up	annuities		<b>\</b>									
8. Grand Totals (Lines 6.5 plus 7.4)  DIRECT CLAIMS AND BENEFITS PAID  9. Death benefits  1. Amount enrowments												T	
9. Death benefits 11. Annuly benefits 11. Annuly benefits 11. Annuly benefits 12. Surrender volues and withdrawast for life contracts 13. Aggregate write ins for inscellaneous direct claims 14. All other benefits, except accident and health 15. Totals 1	8. Grand Totals (Lines 6.5 pl	lus 7.4)						<i>A</i>					
10. Matured endrowments 12. Surrender values and withdrawals for life contracts 13. Aggregate within sin for micelanous direct claims 4 and benefits paid 4 and benefits paid 5 and benefits paid 5 and benefits paid 6 and benefits paid 7 and benefits paid 6 and benefits paid 7 and benefits paid 7 and benefits paid 8 and benefits paid 9 and benefits paid 9 and benefits paid 9 and benefits paid 9 and benefits paid 9 and benefits paid 10 and benefits			_				•						
11. Annuly benefits 12. Surrendor values and withdrawals for life contracts 13. Aggregate write-ins for miscellaneous direct claims 24. All other benefits, accords accident and health 25. DETAILS OF WRITE-INS 26.  27. DETAILS OF WRITE-INS 27.  28. Summary of Line 13 from overflow page 28.  28. Summary of Line 13 from overflow page 29.  29.  29.  29.  20.  20.  20.  20.													
13. Agrogate write-ins for miscellaneous direct claims and benefits paid  14. All other benefits, except accident and health 15. Totals  101. 1302. 1303. 13	11. Annuity benefits												
and benefits paid  15. Totals  DETAILS OF WRITE-INS  1301.  1302.  1308.  Summary of Line 13 from overflow page.  1399. Totals (Lines 1301 thru 1303 plus 1388) (Line 13 showe).  DIRECT DEATH BENEFITS AND MANURED BENEFITS AND MANURED Pots. 8. Gir. Amount Certifs.  15. Unpaid December 31, prior Lines 130 plus 1389. Certification of Line											<u> </u>		
14. All other benefits, except accident and health.  15. Totals  DETAILS OF WRITE-INS  1301. 1302. 1308. Summary of Line 13 from overflow page	and benefits paid												
DETAILS OF WRITE-INS 1301 1302 1303 1308. Summary of Line 13 from overflow page 1309. Totals (Lines 1301 thru 1303 plus 1389) (Line 13 1309. Totals (Lines 1301 thru 1303 plus 1389) (Line 13 1309. Totals (Lines 1301 thru 1303 plus 1389) (Line 13 1309. Totals (Lines 1301 thru 1303 plus 1389) (Line 13 1309. Totals (Lines 1301 thru 1303 plus 1389) (Line 13 1309. Totals (Lines 1301 thru 1303 plus 1389) (Line 13 1309. Totals (Lines 1301 thru 1303 plus 1389) (Line 13 1309. Totals (Lines 1301 thru 1303 plus 1389) (Line 13 1309. Totals (Lines 1301 thru 1303 plus 1389) (Line 13 1500. Totals (Lines 1301 thru 1303 plus 1389) (Line 13 1500. Total Lines (Lines 1301 thru 1303 plus 1389) (Line 13 1500. Total Lines (Lines 1301 thru 1303 plus 1389) (Line 13 1500. Totals (Lines 1301 thru 1303 plus 1389) (Line 13 1500. Totals (Lines 1301 thru 1303 plus 1389) (Line 13 1500. Total selding current year 18.3 Totals plad 18.4 Reduction by compromise 19. Unpaid Dec. 31, current 19. Unpaid Dec. 31, curren	<ol><li>All other benefits, except a</li></ol>										<b>.</b>		
1301		3							1			-	
1302. 1308. Summary of Line 13 from overflow page 1309. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 1309. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 1309. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 1309. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 1309. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 1309. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 1309. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 1309. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 1309. Total 1 1	1301.								<u> </u>		<u> </u>		
1398. Summary of Line 13 from overflow page	1302										<u> </u>		
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)  DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS   1											•		
DIRECT DEATH BENEFITS AND ENDOWMENTS INCURRED POLS & Certifs Amount Certifs Amount Certifs Amount Certifs Amount Certifs Amount Certifs Certif	1399. Totals (Lines 1301 thru 13		~										
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED Certifs Amount Certifs Amou	above)												
DIRECT DEATH BENEFITS AND MATURED Plots A No. of No			)rdinary			ual)		Grou	ın	In	dustrial		Total
MATURED Pols. & Gr. Pols. & Gr. No. of No. o				3		uu.,	5	0.00				9	
ENDOWMENTS INCURRED Certifs. Amount Certifs. A		No of								No of		No of	
16. Unpaid December 31, prior year 17. Incurred during current year 18.1 By payment in full 18.2 By payment on compromised claims 18.3 Totalis paid 18.4 Reduction by compromise 18.5 Amount rejected 18.6 Total settlements 19. Unpaid Dec. 31, current year (18-17-18.6)  POLICY EXHIBIT 20. In force December 31, prior year 21. Issued during year 22. Other changes to in force (Net) 23. In force December 31 of current year (a)  10. Includes Individual Credit Life Insurance prior year \$ includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior y		Pols. &		& Gr.						Pols. &		Pols. &	
year Settled during current year Settled during current year Settled during current year Settled during current year Settled during current year Settled during current year Settled during current year Settled during current year Settled during current year Settled during current year Settled during year S		Certifs.	Amount	Certifs.	Amoui	nt	Certifs.		Amount	Certifs.	Amount	Certifs.	Amount
Settled during current year:  18.1 By payment in full  18.2 By payment in full  18.2 By payment on compromised claims  18.3 Totals paid  18.4 Reduction by compromise  18.5 Amount rejected  18.6 Total settlements  19. Unpaid Dec. 31, current year (16417-18.6)  POLICY EXHIBIT  20. In force December 31, prior year  21. Issued during year  22. Other changes to in force  (Net)  23. In force December 31 of  current year (16417-18.6)  24. In force December 31 of  current year (16417-18.6)  ACCIDENT AND HEALTH INSURANCE  1 2 Policy or year \$  current year \$  c	year												
18.1 By payment in full  18.2 By payment on compromise claims  18.3 Totals paid  18.5 A Reduction by compromise  18.5 Amount rejected  18.5 Total settlements  19. Unpaid Dec. 31, current year tyear (16+17-18.6)  POLICY EXHIBIT  20. In force December 31, prior year  21. Issued during year  22. Other changes to in force (Net)  23. In force December 31 of current year for year \$  10. Includes Individual Credit Life Insurance prior year \$  11. Current year \$  23. In force December 31 of current year \$  24. Carcy Credit Life Insurance prior year \$  25. Current year \$  26. Current year \$  27. Current year \$  28. Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$  29. Current year \$  20. Direct Premiums  20. Direct Premiums  21. Carcy Credit Life Insurance prior year \$  24. Group Policies (b)  24. Group Policies (b)  24. Group Policies (b)  24. Carcy Credit Group and Individual)  24. Carcy Credit Group and Individual  24. Carcy Credit (Group and Individual)  24. Carcy Credit (Group and Individual)  24. Medicare Title XVIII exempt from state taxes or fee  24. Medicare Title XVIII exempt from state taxes or fee  25. Non-cancelable (b)  26. Non-cancelable (c)  27. Non-cancelable (c)  28. Non-cancelable (c)  29. Non-cancelable (c)	• •												
compromised claims 18.3 Totals paid 18.4 Reduction by compromise 18.5 Amount rejected 18.5 Amount rejected 18.6 Total settlements 19. Unpaid Dec. 31, current year (16+17-18.6)  POLICY EXHIBIT 20. In force December 31, prior year 21. Issued during year 22. Other changes to in force (Net) 23. In force December 31 of current year    a)	18.1 By payment in full												
18.3 Totals paid 18.4 Reduction by compromise 18.5 Amount rejected 18.6 Total settlements 19. Unpaid Diec. 31, current year (16+17-18.6)  POLICY EXHIBIT 20. In force December 31, prior year 21. Issued during year 22. Other changes to in force (Net) 23. In force December 31 of current year (a) (a) (a) (a) (a) (a) (a) (a) (a) (a)													
18.5 Amount rejected 18.6 Total settlements 19. Unpaid Dec. 31, current year (16+17-18.6)  POLICY EXHIBIT 20. In force December 31, prior year 21. Issued during year 22. Other changes to in force (Net) 23. In force December 31 of current year s Includes Individual Credit Life Insurance prior year \$ Includes Group Policies (b)  ACCIDENT AND HEALTH INSURANCE  1 2 Policy Service Ser	18.3 Totals paid												
18.6 Total settlements 19. Unpaid Dec. 31, current year (16+17-18.6)  POLICY EXHIBIT 20. In force December 31, prior year 21. Issued during year 22. Other changes to in force (Net) (Net) (a) Includes Individual Credit Life Insurance prior year \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ Includes Group Credit Life Insurance				\		•	- \						
year (16+17-18.6)  POLICY EXHIBIT 20. In force December 31, prior year 21. Issued during year 22. Other changes to in force (Net) 23. In force December 31 of current year (a) 21. In force December 31 of current year (a) 22. Other changes to in force (Net) (Net) 23. In force December 31 of current year (a) Includes Individual Credit Life Insurance prior year \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ Current year \$  ACCIDENT AND HEALTH INSURANCE  1 2 Policyholder Dividends Paid, Refunds to Direct Premiums Direct Premiums Direct Premiums Direct Business Direct Losses Paid Direct Losses Incurred  24. Group Policies (b) 24.1 Federal Employees Health Benefits Plan premium (b) 24.2 Credit (Group and Individual) 24.3 Collectively renewable policies/certificates (b) 24.4 Medicare Title XVIII exempt from state taxes or fee Other Individual Policies: 25.1 Non-cancelable (b)	-												
POLICY EXHIBIT  20. In force December 31, prior year 21. Issued during year 22. Other changes to in force (Net). 23. In force December 31 of current year \$ Includes Individual Credit Life Insurance prior year \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ ACCIDENT AND HEALTH INSURANCE  1 2 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business  24. Group Policies (b). 24.1 Federal Employees Health Benefits Plan premium (b). 24.2 Credit (Group and Individual). 24.3 Collectively renewable policies/certificates (b). 24.4 Medicare Title XVIII exempt from state taxes or fee Other Individual Policies: 25.1 Non-cancelable (b).	•							7					
POLICY EXHIBIT 20. In force December 31, prior year 21. Issued during year 22. Other changes to in force (Net) 23. In force December 31 of current year (a) Includes Individual Credit Life Insurance prior year \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$  ACCIDENT AND HEALTH INSURANCE  1 2 Policy Paid, Refunds to Members or Credited on Direct Business Direct Losses Paid Direct Losses Paid 24. Group Policies (b) 24.1 Federal Employees Health Benefits Plan premium (b) 24.2 Credit (Group and Individual) 24.3 Collectively renewable policies/certificates (b) 24.4 Medicare Title XVIII exempt from state taxes or fed Other Individual Policies: 25.1 Non-cancelable (b)	year (16+17-18.6)			-			No of	<b>T</b>					
year													
21. Issued during year 22. Other changes to in force (Net) 23. In force December 31 of current year (Includes Group Credit Life Insurance prior year \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ CUIDENT AND HEALTH INSURANCE  1 2 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Premiums Direct Premiums Direct Premium (b)  24. Group Policies (b) 24.1 Federal Employees Health Benefits Plan premium (b) 24.2 Credit (Group and Individual) 24.3 Collectively renewable policies/certificates (b) 24.4 Medicare Title XVIII exempt from state taxes or fee Other Individual Policies: 25.1 Non-cancelable (b)	· •				(a)								
(Net)	21. Issued during year						I						
23. In force December 31 of current year (a) Includes Individual Credit Life Insurance prior year \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ current year \$ Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year													
(a) Includes Individual Credit Life Insurance prior year \$ current year \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ current year \$ Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$ ACCIDENT AND HEALTH INSURANCE  1 2 Policyholdar Dividends Paid, Refunds to Members or Credited on Direct Business Direct Losses Paid Incurred  24. Group Policies (b) Direct Premiums Earned Direct Business Direct Losses Paid Incurred  24.1 Federal Employees Health Benefits Plan premium (b) Premium (b) Premium (b) Premium (b) Premium (b) Premium (control of the Individual) Premium (control of the Individual Policies) Premium (control of the Individual Policies) Premium (control of the Individual Policies) Premium (control of the Individual Policies) Premium (control of the Individual Policies) Premium (control of the Individual Policies) Premium (control of the Individual Policies) Premium (control of the Individual Policies) Premium (control of the Individual Policies) Premium (control of the Individual Policies) Premium (control of the Individual Policies) Premium (control of the Individual Policies) Premium (control of the Individual Policies) Premium (control of the Individual Policies) Premium (control of the Individual Policies) Premium (control of the Individual Policies) Premium (control of the Individual Premium (control of the Individual Premium (control of the Individual Premium (control of the Individual Premium (control of the Individual Premium (control of the Individual Premium (control of the Individual Premium (control of the Individual Premium (control of the Individual Premium (control of the Individual Premium (control of the Individual Premium (control of the Individual Premium (control of the Individual Premium (control of the Individual Premium (control of the Individual Premium (control of the Individual Premium (control of the Individual Premium (control of the Individual Premium (control of the Individual P	23. In force December 31 of												
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$  ACCIDENT AND HEALTH INSURANCE  1 2 3 4 5  Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business Direct Losses Paid  24. Group Policies (b) Direct Premium (b) Direct (Group and Individual) Direct (Group and Individual) Direct (Group and Individual) Direct (Group and Individual Policies) Direct (Direct Premium Search (Di		Insurance o	rior year \$	1	\-/-	current	vear \$					1	1
ACCIDENT AND HEALTH INSURANCE  1 2 3 4 5 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business Direct Losses Paid Direct Losses Paid Incurred  24. Group Policies (b)	Includes Group Credit Life Inst	urance Loan	is less than or eq	qual to 60 m	onths at iss	ue, prio	or year \$				rent year \$		
1 2 3 4 5 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Losses Paid Uncurred  24. Group Policies (b)	Loans greater than 60 months	at issue BU	T NOT GREATE	ER THAN 12	20 MONTHS	S, prior	year \$			, cui	rent year \$		
24. Group Policies (b)			Δ			HEA		<u>ISU</u>					
24. Group Policies (b)					1		2						5
24. Group Policies (b) 24.1 Federal Employees Health Benefits Plan premium (b) 24.2 Credit (Group and Individual) 24.3 Collectively renewable policies/certificates (b) 24.4 Medicare Title XVIII exempt from state taxes or fee Other Individual Policies: 25.1 Non-cancelable (b)									Páid, Re	efunds to			
24. Group Policies (b)  24.1 Federal Employees Health Benefits Plan premium (b)  24.2 Credit (Group and Individual)  24.3 Collectively renewable policies/certificates (b)  24.4 Medicare Title XVIII exempt from state taxes or fee Other Individual Policies:  25.1 Non-cancelable (b)				Direct P	remiums	Dire		ıms			Direct Losses	s Paid	
premium (b)				200(1					J D.1001				
24.2 Credit (Group and Individual)													
24.3 Collectively renewable policies/certificates (b)	24.2 Credit (Group and Individu	ual)									<b></b>		
Other Individual Policies: 25.1 Non-cancelable (b)	24.3 Collectively renewable po	licies/certific	ates (b)			L	<b></b>						
25.1 Non-cancelable (b)		ıpı irom state	e laxes or fee	<b>\</b>		<b>1</b>					<b></b>		
	25.1 Non-cancelable (b)			<b></b>									
25.2 Guaranteed renewable (b)	•	•							. <b></b>		<b></b>		
25.3 Non-renewable for stated reasons only (b)				<b>T</b>			<u>'</u>	1	1		<u> </u>		
25.5 All other (b)	25.5 All other (b)												
25.6 Totals (sum of Lines 25.1 to 25.5)				l 		<b> </b>			+		<b> </b>		
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	20. I Ulais (Lilles 24 + 24.   +					l			ı		1		

24.CN

insured under indemnity only products



DIRECT BUSINESS IN THE NAIC Group Code 3891	STATE O	F Other Alien	S	L	IFE II	NSURA	ANC	E				YEAR 2020 / Code 15473
•			,	1		2			3	4	Company	5
DIRECT F AND ANNUITY C	REMIUMS ONSIDERA		Ordi	inary		dit Life (G nd Individu		Gr	oup	Industria	al	Total
Life insurance  Appuits considerations												
<ol> <li>Annuity considerations</li> <li>Deposit-type contract fund</li> </ol>						XXX				XXX		
4. Other considerations												
5. Totals (Sum of Lines 1 to 4  DIRECT DIV	,	'n										
POLICYHOLDERS/RI												
Life insurance: 6.1 Paid in cash or left on dep	oeit											
6.2 Applied to pay renewal pre												
6.3 Applied to provide paid-up												
endowment or premiu 6.4 Other					T							
6.5 Totals (Sum of Lines 6.1 to	6.4)											
Annuities: 7.1 Paid in cash or left on dep	osit											
7.2 Applied to provide paid-up			<b></b>									
7.3 Other			<b></b>		- 1							
<ul><li>7.4 Totals (Sum of Lines 7.1 to</li><li>8. Grand Totals (Lines 6.5 pl</li></ul>	,						<i>A</i>					
DIRECT CLAIMS A	ND BENEF	-				<b>- 1</b>						
Death benefits  10. Matured endowments						<del></del>						
11. Annuity benefits								<u> </u>				
12. Surrender values and with												
<ol> <li>Aggregate write-ins for mis and benefits paid</li> </ol>												
<ol><li>All other benefits, except a</li></ol>												
15. Totals  DETAILS OF WRITE-INS												
1301												
1302.												
1303 1398. Summary of Line 13 from												
1399. Totals (Lines 1301 thru 13		•										
above)			L									
		Ordinary		Credit Life and Individ	lual)		Grou	ın	In	dustrial		Total
DIRECT DEATH	1	2	3	4	iddi)	5	0.00	6	7	8	9	10
BENEFITS AND MATURED	No. of		No. of Ind.Pols.						No. of		No. of	
ENDOWMENTS	Pols. &		& Gr.			No. of			Pols. &		Pols. &	
INCURRED  16. Unpaid December 31, prior	Certifs.	Amount	Certifs.	Amou	nt	Certifs.	F	Amount	Certifs.	Amount	Certifs.	Amount
year												
<ol> <li>Incurred during current year</li> <li>Settled during current year:</li> </ol>												
18.1 By payment in full												
18.2 By payment on compromised claims	,											
18.3 Totals paid												
18.4 Reduction by compromise 18.5 Amount rejected			<b>A</b>		7							
18.6 Total settlements												
19. Unpaid Dec. 31, current year (16+17-18.6)							М					
year (10+17-10.0)			+ 🕶			No. of						
POLICY EXHIBIT 20. In force December 31, prior						Policies						
year				(a)								
<ul><li>21. Issued during year</li><li>22. Other changes to in force</li></ul>												
(Net)												
23. In force December 31 of current year				(a)								
(a) Includes Individual Credit Life I	nsurance p	rior year \$		, (	current	year \$					+	<del>- !</del>
Includes Group Credit Life Insu Loans greater than 60 months			•			•				•		
Loans greater than oo months	at issue DC				•	•			, Cu	i eiit yeai φ		
		Α	CCIDE	NT AND	HEA	<u> </u>	งรบ		3	4		5
						2		Policyholde	er Dividends	1		3
					Din	ect Premiu	ıms		efunds to or Credited			Direct Losses
			Direct P	remiums	יווכ	Earned			t Business	Direct Losse	s Paid	Incurred
24. Group Policies (b)												
premium (b)					ļ							
<ul><li>24.2 Credit (Group and Individu</li><li>24.3 Collectively renewable pol</li></ul>					<b></b>			-		<u> </u>		
24.4 Medicare Title XVIII exemp			<b></b>									
Other Individual Policies:									_			
25.1 Non-cancelable (b)						-17	\ <u>.</u>					
25.3 Non-renewable for stated	reasons onl	y (b)										
25.4 Other accident only					Ī							
25.5 All other (b)					<b></b>							

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

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



NAIC Group Code 3891				L		ISURA	NCI	Ε		NAIC	Company	Code 15473
DIRECT	PREMIUMS		,	1	Cred	2 it Life (Gro	up		3	4	İ	5
AND ANNUITY O	ONSIDERA			inary	and	d Individua	l)	Gr	oup	Industria	al	Total
<ol> <li>Life insurance</li> <li>Annuity considerations</li> </ol>					T							
Deposit-type contract fund										XXX.		
<ol> <li>Other considerations</li> <li>Totals (Sum of Lines 1 to</li> </ol>								<b>†</b>				
DIRECT DI	VIDENDS TO											
POLICYHOLDERS/Ri Life insurance:	EFUNDS TO	MEMBERS										
6.1 Paid in cash or left on dep	osit											
6.2 Applied to pay renewal pre												
<ol> <li>6.3 Applied to provide paid-up endowment or premiu</li> </ol>												
6.4 Other												
6.5 Totals (Sum of Lines 6.1 t Annuities:	0 6.4)											
7.1 Paid in cash or left on dep	osit											
7.2 Applied to provide paid-up			<b>\</b>						<u> </u>			
7.3 Other			<b>-</b>					ł	<del></del>		T	
8. Grand Totals (Lines 6.5 pl	lus 7.4)											
DIRECT CLAIMS A		-										
Death benefits      Matured endowments												
11. Annuity benefits					İ			1				
12. Surrender values and with	ndrawals for li	ife contracts										
<ol> <li>Aggregate write-ins for mis and benefits paid</li> </ol>												
<ol><li>All other benefits, except a</li></ol>												
15. Totals  DETAILS OF WRITE-INS								1				
1301												
1302.								ļ				
1303 1398. Summary of Line 13 from												
1399. Totals (Lines 1301 thru 13								<del> </del>				
above)												
		. P		Credit Life	- 10		<u> </u>					T. (-)
DIRECT DEATH	1	rdinary 2	(Group	and Individ	uai)	5	Grou	<u>р</u> 6	7	ndustrial 8	9	Total 10
BENEFITS AND			No. of							-		
MATURED ENDOWMENTS	No. of Pols. &		Ind.Pols. & Gr.			No. of			No. of Pols. &		No. of Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amou	nt	Certifs.	А	mount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior year												
17. Incurred during current year												
Settled during current year:												
9												
18.1 By payment in full												
18.1 By payment in full												
18.1 By payment in full												
18.1 By payment in full												
18.1 By payment in full												
18.1 By payment in full												
18.1 By payment in full					)	No. of						
18.1 By payment in full			V			No. of Policies						
18.1 By payment in full				(a)								
18.1 By payment in full				(a)								
18.1 By payment in full				(a)								
18.1 By payment in full												
18.1 By payment in full 18.2 By payment on compromised claims 18.3 Totals paid 18.4 Reduction by compromise 18.5 Amount rejected 18.6 Total settlements 19. Unpaid Dec. 31, current year (16+17-18.6)  POLICY EXHIBIT 20. In force December 31, prior year 21. Issued during year 22. Other changes to in force (Net) 23. In force December 31 of current year		Of Near &		(a)		Policies						
18.1 By payment in full	Insurance pri	•		(a), (	current	Policies  /ear \$				urrent year \$		
18.1 By payment in full 18.2 By payment on compromised claims 18.3 Totals paid 18.4 Reduction by compromise 18.5 Amount rejected 18.6 Total settlements 19. Unpaid Dec. 31, current year (16+17-18.6)  POLICY EXHIBIT 20. In force December 31, prior year 21. Issued during year 22. Other changes to in force (Net) 23. In force December 31 of current year (a) Includes Individual Credit Life I	Insurance priurance Loans	s less than or ed	jual to 60 m	(a), (a) onths at iss	current y	Policies  year \$ r year \$			, Cl	urrent year \$		
18.1 By payment in full	Insurance priurance Loans	s less than or ed T NOT GREATE	qual to 60 m	(a), (a) onths at iss	current y ue, prior	Policies  year \$ r year \$ year \$			, Cl	•		
18.1 By payment in full	Insurance priurance Loans	s less than or ed T NOT GREATE	qual to 60 m ER THAN 12	(a), (a), (a) onths at iss	current y ue, prior	Policies  year \$ r year \$ year \$		RANCE	, cu	urrent year \$		5
18.1 By payment in full	Insurance priurance Loans	s less than or ed T NOT GREATE	qual to 60 m ER THAN 12	(a), (on this at iss 20 MONTHS	current y ue, prior S, prior y	Policies  year \$ r year \$ year \$ LTH IN 2	SUI	Policyholde Paid, Re	3 er Dividend	urrent year \$		
18.1 By payment in full	Insurance priurance Loans	s less than or ed T NOT GREATE	qual to 60 m ER THAN 12	(a) , (on this at iss 20 MONTHS	current y ue, prior S, prior y	year \$ r year \$ LTH IN 2	SUI	Policyholde Paid, Re Members	3 er Dividendefunds to or Credited	urrent year \$	o Paid	Direct Losses
18.1 By payment in full	Insurance priurance Loans	S less than or ec	qual to 60 m ER THAN 12	(a), (on this at iss 20 MONTHS	current y ue, prior S, prior y	Policies  year \$ r year \$ year \$ LTH IN 2	SUI	Policyholde Paid, Re Members	3 er Dividend	urrent year \$	s Paid	
18.1 By payment in full	Insurance priurance Loans at issue BUT	s less than or ec T NOT GREATE A	qual to 60 m ER THAN 12	(a) , (on this at iss 20 MONTHS	current y ue, prior S, prior y	year \$ r year \$ LTH IN 2	SUI	Policyholde Paid, Re Members	3 er Dividendefunds to or Credited	urrent year \$	s Paid	Direct Losses
18.1 By payment in full	Insurance priurance Loans at issue BUT	s less than or ec T NOT GREATE A	qual to 60 m ER THAN 12	(a) , (on this at iss 20 MONTHS	current y ue, prior S, prior y	year \$ r year \$ LTH IN 2	SUI	Policyholde Paid, Re Members	3 er Dividendefunds to or Credited	urrent year \$	s Paid	Direct Losses
18.1 By payment in full	Insurance priurance Loans at issue BUT	an areas (b)	qual to 60 m ER THAN 12	(a) , (on this at iss 20 MONTHS	current y ue, prior S, prior y	year \$ r year \$ LTH IN 2	SUI	Policyholde Paid, Re Members	3 er Dividendefunds to or Credited	urrent year \$	s Paid	Direct Losses
18.1 By payment in full	Insurance priurance Loans at issue BUT	an areas (b)	qual to 60 m ER THAN 12	(a) , (on this at iss 20 MONTHS	current y ue, prior S, prior y	year \$ r year \$ LTH IN 2	SUI	Policyholde Paid, Re Members	3 er Dividendefunds to or Credited	urrent year \$	s Paid	Direct Losses
18.1 By payment in full	Insurance privarance Loans at issue BUT	A s less than or ect NOT GREATE	qual to 60 m ER THAN 12	(a) , (on this at iss 20 MONTHS	current y ue, prior S, prior y	year \$ r year \$ LTH IN 2	SUI	Policyholde Paid, Re Members	3 er Dividendefunds to or Credited	urrent year \$	s Paid	Direct Losses
18.1 By payment in full	insurance pri- urance Loans at issue BUT  n Benefits Pla ual) licies/certifica pt from state	an ates (b)taxes or fee	qual to 60 m ER THAN 12	(a) , (on this at iss 20 MONTHS	current y ue, prior S, prior y	year \$ r year \$ LTH IN 2	SUI	Policyholde Paid, Re Members	3 er Dividendefunds to or Credited	urrent year \$	s Paid	Direct Losses
18.1 By payment in full	Insurance priurance Loans at issue BUT  In Benefits Pla  Jal)  Jicies/certifica pt from state	an attes (b)taxes or fee	qual to 60 m ER THAN 12	(a) , (on this at iss 20 MONTHS	current y ue, prior S, prior y	year \$ r year \$ LTH IN 2	SUI	Policyholde Paid, Re Members	3 er Dividendefunds to or Credited	urrent year \$	s Paid	Direct Losses
18.1 By payment in full 18.2 By payment on compromised claims 18.3 Totals paid 18.4 Reduction by compromise 18.5 Amount rejected 18.6 Total settlements 19. Unpaid Dec. 31, current year (16+17-18.6)  POLICY EXHIBIT 20. In force December 31, prior year 21. Issued during year 22. Other changes to in force (Net) 23. In force December 31 of current year (a) Includes Individual Credit Life Includes Group Credit Life Insu Loans greater than 60 months  24. Group Policies (b) 24.1 Federal Employees Health premium (b) 24.2 Credit (Group and Individu 24.3 Collectively renewable pol 24.4 Medicare Title XVIII exem Other Individual Policies: 25.1 Non-cancelable (b) 25.2 Guaranteed renewable (b 25.3 Non-renewable for stated 25.4 Other accident only	Insurance priurance Loans at issue BUT  In Benefits Pla  Jual J.	an attes (b)taxes or fee	qual to 60 m ER THAN 12	(a) , (on this at iss 20 MONTHS 11 remiums	current y ue, prior S, prior y	year \$ r year \$ LTH IN 2	SUI	Policyholde Paid, Re Members	3 er Dividendefunds to or Credited	urrent year \$	s Paid	Direct Losses
18.1 By payment in full	Insurance priurance Loans at issue BUT  n Benefits Pla  ual) licies/certifica pt from state  )	an attes (b) attacks or fee	pual to 60 m ER THAN 1:	(a) , (on this at iss 20 MONTHS 11 remiums	current y ue, prior S, prior y	year \$ r year \$ LTH IN 2	SUI	Policyholde Paid, Re Members	3 er Dividendefunds to or Credited	urrent year \$	s Paid	Direct Losses
18.1 By payment in full 18.2 By payment on compromised claims 18.3 Totals paid 18.4 Reduction by compromise 18.5 Amount rejected 18.6 Total settlements 19. Unpaid Dec. 31, current year (16+17-18.6)  POLICY EXHIBIT 20. In force December 31, prior year 21. Issued during year 22. Other changes to in force (Net) 23. In force December 31 of current year (a) Includes Individual Credit Life Includes Group Credit Life Includes Group Credit Life Insu Loans greater than 60 months  24. Group Policies (b) 24.1 Federal Employees Health premium (b) 24.2 Credit (Group and Individu 24.3 Collectively renewable pol 24.4 Medicare Title XVIII exem Other Individual Policies: 25.1 Non-cancelable (b) 25.2 Guaranteed renewable (b 25.3 Non-renewable for stated 25.4 Other accident only	n Benefits Pla  Jal)  Jicies/certifica pt from state  10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	an attes (b) attacks or fee	pual to 60 m ER THAN 1:	(a) , (on this at iss 20 MONTHS 11 remiums	current y ue, prior S, prior y	year \$ r year \$ LTH IN 2	SUI	Policyholde Paid, Re Members	3 er Dividendefunds to or Credited	urrent year \$	s Paid	Direct Losses

24.GT

insured under indemnity only products

#### FORM FOR CALCULATING THE INTEREST MAINTENANCE RESERVE

#### INTEREST MAINTENANCE RESERVE

		1 Amount
1.	Reserve as of December 31, Prior Year	12,014,389
2.	Current year's realized pre-tax capital gains/(losses) of \$	16,077,627
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)	28,092,016
5.	Current year's amortization released to Summary of Operations (Amortization, Line 1, Column 4)	1,008,040
6.	Reserve as of December 31, current year (Line 4 minus Line 5)	27,083,976

#### **AMORTIZATION**

	7411	1	2	3	4
	Year of Amortization	Reserve as of December 31, Prior Year	Current Year's Realized Capital Gains/(Losses) Transferred into the Reserve Net of Taxes	Adjustment for Current Year's Liability Gains/(Losses) Released From the Reserve	Balance Before Reduction for Current Year's Amortization (Cols. 1 + 2 + 3)
1.	2020	704,950	303,090		1,008,040
2.	2021	693,663	631,973		1,325,636
3.	2022	673,821	643,898		1,317,719
4.	2023	660,074	644,618		1,304,692
5.	2024	646,476	651,387		1,297,863
6.	2025	640,320	645,055		1,285,375
7.	2026	631,675	648,346		1,280,021
8.	2027	625,838	652,547		1,278,385
9.	2028	610,819	656,521		1,267,341
10.	2029	602,029	654,295		1,256,324
11.	2030	584,824	661,116		1,245,941
12.	2031	574,365	669,377		1,243,742
13.	2032	565,250	669 , 193		1,234,443
14.	2033	554 , 182	680,760		1,234,942
15.	2034	532,114	677,347		1,209,461
16.	2035	492,333	694,622		1, 186, 954
17.	2036		682,219		1,123,039
18.	2037	384,944	663,490		1,048,434
19.	2038	312,883	653,019		965,902
20.	2039	250,605	632,734		883,340
21.	2040		611,174		816,110
22.	2041	161,073	561,829		722,902
23.	2042	120,889	500,217		621,106
24.	2043	88,646	413,552		502, 198
25.	2044	74,111	342,082		416, 193
26.	2045	66,025	262,400		328,425
27.	2046	51,074	201,205		252,279
28.	2047	36 , 104	160 , 143		196,246
29.	2048	21,767	114,974		136,741
30.	2049	7,781	69,806		77,586
31.	2050 and Later		24,638		24,638
32.	Total (Lines 1 to 31)	12,014,389	16,077,627		28,092,016

### ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Cape Verity III, Inc. ASSET VALUATION RESERVE

		Default Component			Equity Component		
	1	2	3	4	Equity Component 5	6	7
	Other Than Mortgage Loans	Mortgage Loans	Total (Cols. 1 + 2)	Common Stock	Real Estate and Other Invested Assets	Total (Cols. 4 + 5)	Total Amount (Cols. 3 + 6)
Reserve as of December 31, prior year	344,695		344,695				344,695
Realized capital gains/(losses) net of taxes - General Account	186,326		186,326				186,326
Realized capital gains/(losses) net of taxes - Separate Accounts							
Unrealized capital gains/(losses) net of deferred taxes - General Account							
Unrealized capital gains/(losses) net of deferred taxes - Separate Accounts							
Capital gains credited/(losses charged) to contract benefits, payments or reserves							
7. Basic contribution	216,852		216,852				216,852
8. Accumulated balances (Lines 1 through 5 - 6 + 7)	747,873		747,873				747,873
9. Maximum reserve	1,145,227		1,145,227				1,145,227
10. Reserve objective	665,854		665,854				665,854
11. 20% of (Line 10 - Line 8)	(16,404)		(16,404)				(16,404)
12. Balance before transfers (Lines 8 + 11)	731,469		731,469				731,469
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)	731,469		731,469				731,469

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

	DEFACE CONFORM           1         2         3         4         Basic Contribution         Reserve Objective         Maximum Reserve           Balance for         5         6         7         8         9         10												
			1	2	3	4		Contribution	Reserv	e Objective			
							5	6	7	8	9	10	
	NAIC			Reclassify		AVR Reserve							
1 -	Desig-	5	Book/Adjusted	Related Party	Add Third Party	Calculations		Amount	_	Amount		Amount	
ber	nation	Description	Carrying Value	Encumbrances	Encumbrances	(Cols. 1 + 2 + 3)	Factor	(Cols.4 x 5)	Factor	(Cols. 4 x 7)	Factor	(Cols. 4 x 9)	
		LONG-TERM BONDS											
1.		Exempt Obligations		XXX	XXX		0.0000		0.000		0.0000		
2.1	1	NAIC Designation Category 1.A	2,473,276	XXX	XXX	2,473,276	0.005	1,237	0.0016	3,957	0.0033	8, 162	
2.2	1	NAIC Designation Category 1.B	4,954,461	XXX	XXX	4,954,461	0.005	2,477	0.0016	7,927	0.0033	16,350	
2.3	1	NAIC Designation Category 1.C	12,217,202	XXX	XXX	12,217,202	0.005	6, 109	0.0016	19,548	0.0033	40,317	
2.4	1	NAIC Designation Category 1.D	7,699,275	XXX	XXX	7,699,275	0.005	3,850	0.0016	12,319	0.0033	25,408	
2.5	1	NAIC Designation Category 1.E	4,587,467	XXX	XXX	4,587,467	0.005	2,294	0.0016	7,340	0.0033	15 , 139	
2.6	1	NAIC Designation Category 1.F	12,169,575	XXX	XXX	12,169,575	0.0005	6,085	0.0016	19,471	0.0033	40 , 160	
2.7	1	NAIC Designation Category 1.G	21, 139, 471	XXX	XXX	21, 139, 471	0.005	10,570	0.0016	33,823	0.0033	69,760	
2.8		Subtotal NAIC 1 (2.1+2.2+2.3+2.4+2.5+2.6+2.7)	65,240,728	XXX	XXX	65,240,728	XXX	32,620	XXX	104,385	XXX	215,294	
3.1	2	NAIC Designation Category 2.A	42,587,936	XXX	XXX	42,587,936	0.0021	89,435	0.0064	272,563	0.0106	451,432	
3.2	2	NAIC Designation Category 2.B	38,429,968	XXX	XXX	38,429,968	0.0021	80,703	0.0064	245,952	0.0106	407,358	
3.3	2	NAIC Designation Category 2.C	6,711,581	XXX	XXX	6,711,581	0.0021	14,094	0.0064	42,954	0.0106	71,143	
3.4		Subtotal NAIC 2 (3.1+3.2+3.3)	87,729,485	XXX	XXX	87,729,485	XXX	184,232	XXX	561,469	XXX	929,933	
4.1	3	NAIC Designation Category 3.A		XXX	XXX		0.0099		0.0263		0.0376		
4.2	3	NAIC Designation Category 3.B		XXX	XXX		0.0099		0.0263		0.0376		
4.3	3	NAIC Designation Category 3.C		XXX	XXX		0.0099		0.0263		0.0376		
4.4		Subtotal NAIC 3 (4.1+4.2+4.3)		XXX	XXX		XXX		XXX		XXX		
5.1	4	NAIC Designation Category 4.A		XXX	XXX		0.0245		0.0572		0.0817		
5.2	4	NAIC Designation Category 4.B		XXX	XXX		0.0245		.0.0572		0.0817		
5.3	4	NAIC Designation Category 4.C		XXX	XXX		0.0245		0.0572		0.0817		
5.4		Subtotal NAIC 4 (5.1+5.2+5.3)		XXX	XXX		XXX		XXX		XXX		
6.1	5	NAIC Designation Category 5.A		XXX	XXX		0.0630		0.1128		0.1880		
6.2	5	NAIC Designation Category 5.B		XXX	XXX		0.0630		0.1128		0.1880		
6.3	5	NAIC Designation Category 5.C		XXX	XXX		0.0630		0.1128		0.1880		
6.4		Subtotal NAIC 5 (6.1+6.2+6.3)		XXX	XXX		XXX		XXX		XXX		
7.	6	NAIC 6		XXX	XXX		0.0000		0.2370		0.2370		
8.		Total Unrated Multi-class Securities Acquired by Conversion		XXX	XXX		XXX		XXX		XXX		
9.		Total Long-Term Bonds (1+2.8+3.4+4.4+5.4+6.4+7+8)	152.970.213	XXX	XXX	152.970.213	XXX	216.852	XXX	665.854	XXX	1,145,227	
		PREFERRED STOCKS	,	7001	7001	10=,011,=10	7001	,	7001	,	7001	.,,==:	
10.	1	Highest Quality		XXX	XXX		0.0005		0.0016		0.0033		
11.	2	High Quality		XXX	XXX		0.0021		0.0064		0.0106		
12.	3	Medium Quality		XXX	XXX		0.0099		0.0263		0.0376		
13.	4	Low Quality		XXX	XXX		0.0245		0.0572		0.0817		
14.	5	Lower Quality		XXX	XXX		0.0630		0.1128		0.1880		
15.	6	In or Near Default		XXX	XXX		0.0000		0.2370		0.2370		
16.	-	Affiliated Life with AVR		XXX	XXX		0.0000		0.0000		0.0000		
17.		Total Preferred Stocks (Sum of Lines 10 through 16)		XXX	XXX		XXX		XXX		XXX		
		1 Can 1 Country Country Lines 10 through 10)		/VV\	/VV\	l l	///\		////		/VV\		

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

	1 2 3 4 Basic Contribution Reserve Objective Maximum Reserve  Balance for 5 6 7 8 9 10													
			1	2	3	4	Basic (	Contribution	Reserv	e Objective	Maximu	ım Reserve		
						Balance for	5	6	7	8	9	10		
Line	NAIC			Reclassify		AVR Reserve								
	Desig-	5	Book/Adjusted	Related Party	Add Third Party	Calculations		Amount		Amount		Amount		
ber	nation	Description	Carrying Value	Encumbrances	Encumbrances	(Cols. 1 + 2 + 3)	Factor	(Cols.4 x 5)	Factor	(Cols. 4 x 7)	Factor	(Cols. 4 x 9)		
		SHORT-TERM BONDS												
18.		Exempt Obligations	18,840,796	XXX	XXX	18,840,796	0.0000		0.0000		0.0000			
19.1	1	NAIC Designation Category 1.A		XXX	XXX		0.0005		0.0016		0.0033			
19.2	1	NAIC Designation Category 1.B		XXX	XXX		0.0005		0.0016		0.0033			
19.3	1	NAIC Designation Category 1.C		XXX	XXX		0.0005		0.0016		0.0033			
19.4	1	NAIC Designation Category 1.D		XXX	XXX		0.005		0.0016		0.0033			
19.5	1	NAIC Designation Category 1.E		XXX	XXX		0.005		0.0016		0.0033			
19.6	1	NAIC Designation Category 1.F		XXX	XXX		0.005		0.0016		0.0033			
19.7	1	NAIC Designation Category 1.G		XXX	XXX		0.0005		0.0016		0.0033			
19.8		Subtotal NAIC 1 (19.1+19.2+19.3+19.4+19.5+19.6+19.7)		XXX	XXX		XXX		XXX		XXX			
20.1	2	NAIC Designation Category 2.A		XXX	XXX		0.0021		0.0064		0.0106			
20.2	2	NAIC Designation Category 2.B		XXX	XXX		0.0021		0.0064		0.0106			
20.3	2	NAIC Designation Category 2.C		XXX	XXX		0.0021		0.0064		0.0106			
20.4		Subtotal NAIC 2 (20.1+20.2+20.3)		XXX	XXX		XXX		XXX		XXX			
21.1	3	NAIC Designation Category 3.A		XXX	XXX		0.0099		0.0263		0.0376			
21.2	3	NAIC Designation Category 3.B		XXX	XXX		0.0099		0.0263		0.0376			
21.3	3	NAIC Designation Category 3.C		XXX	XXX		0.0099		0.0263		0.0376			
21.4		Subtotal NAIC 3 (21.1+21.2+21.3)		XXX	XXX		XXX		XXX		XXX			
22.1	4	NAIC Designation Category 4.A		XXX	XXX		0.0245		0.0572		0.0817			
22.2	4	NAIC Designation Category 4.B		XXX	XXX		0.0245		0.0572		0.0817			
22.3	4	NAIC Designation Category 4.C		XXX	XXX		0.0245		0.0572		0.0817			
22.4	•	Subtotal NAIC 4 (22.1+22.2+22.3)		XXX	XXX		XXX		XXX		XXX			
23.1	5	NAIC Designation Category 5.A		XXX	XXX		0.0630		0.1128		0.1880			
23.2	5	NAIC Designation Category 5.A		XXX	XXX		0.0630		0.1128		0.1880			
23.3	5	NAIC Designation Category 5.D		XXX	XXX		0.0630		0.1128		0.1880			
23.4	3	Subtotal NAIC 5 (23.1+23.2+23.3)		XXX	XXX		XXX		XXX		XXX			
24.	6	NAIC 6		XXX	XXX		0.0000		0.2370		0.2370			
2 <del>4</del> . 25.	O	Total Short-Term Bonds (18+19.8+20.4+21.4+22.4+23.4+24)	18.840.796	XXX	XXX	18.840.796	XXX		XXX		XXX			
25.			10,040,790	***	***	10,040,790	XXX		XXX		XXX			
		DERIVATIVE INSTRUMENTS		XXX	XXX		0.0005		0.0016		0.0033			
26.		Exchange Traded												
27.	7	Highest Quality		XXX	XXX		0.0005		0.0016 0.0064		0.0033			
28.	2	High Quality		XXX	XXX		0.0021 0.0099		0.0263		0.0106 0.0376			
29.	3	Medium Quality		XXX	XXX		0.0245		0.0263		0.0376			
30.	4	Low Quality		XXX	XXX									
31.	5	Lower Quality		XXX	XXX		0.0630		0.1128 0.2370		0.1880 0.2370			
32.	б	In or Near Default		XXX	XXX						-			
33.		Total Derivative Instruments	·= · · · · · · · ·	XXX	XXX	171 011	XXX	0.45	XXX	207	XXX			
34.		Total (Lines 9 + 17 + 25 + 33)	171,811,009	XXX	XXX	171,811,009	XXX	216,852	XXX	665,854	XXX	1,145,227		

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

1		4		_	OWN CIVELY			D	Obiective	Marrian	n Reserve
		1	2	3	Balance for	5 Basic Co	ontribution 6	Reserve	Objective	9 Waximun	10
Line NA Num- Des ber nati	ig-	Book/Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	AVR Reserve Calculations	Factor	Amount (Cols.4 x 5)	Factor	Amount		Amount
Dei Hali		Carrying value	Eliculibrances	Efficilibratices	(Cols. 1 + 2 + 3)	Factor	(COIS.4 X 5)	Factor	(Cols. 4 x 7)	Factor	(Cols. 4 x 9)
	MORTGAGE LOANS										
	In Good Standing:			2007		0.0011		0.0057		0.0074	
35.	Farm Mortgages - CM1 - Highest Quality			XXX		0.0040		0.0057		0.0149	
36.	Farm Mortgages - CM2 - High Quality			XXX		0.0069		0.0200		0.0257	
37.	Farm Mortgages - CM3 - Medium Quality				·	0.0120		0.0343		0.0428	
38.	Farm Mortgages - CM4 - Low Medium Quality			XXX		0.0183		0.0486		0.0628	
39.	Farm Mortgages - CM5 - Low Quality			XXX XXX		0.0003		0.0007		0.0011	
0.	Residential Mortgages - Insured or Guaranteed				·	0.0015		0.0034		0.0046	
11.	Residential Mortgages - All Other			XXX		0.0003		0.0007		0.0011	
12.	Commercial Mortgages - Insured or Guaranteed			XXX XXX		0.0011		0.0057		0.0074	
3.	Commercial Mortgages - All Other - CM1 - Highest Quality					0.0040		0.0057		0.0074	
4.	Commercial Mortgages - All Other - CM2 - High Quality			XXX		0.0069		0.0200		0.0257	
5.	Commercial Mortgages - All Other - CM3 - Medium Quality			XXX		0.0069		0.0200		0.0257	
16.	Commercial Mortgages - All Other - CM4 - Low Medium Quality			XXX		0.0120		0.0343		0.0428	
17.	Commercial Mortgages - All Other - CM5 - Low Quality			XXX		0.0183		0.0486		0.0628	
	Overdue, Not in Process:										
8.	Farm Mortgages			XXX		0.0480		0.0868		0.1371	
9.	Residential Mortgages - Insured or Guaranteed			XXX		0.0006		0.0014		0.0023	
0.	Residential Mortgages - All Other		***************************************	XXX		0.0029		0.0066		0.0103	
1.	Commercial Mortgages - Insured or Guaranteed			XXX		0.0006		0.0014		0.0023	
2.	Commercial Mortgages - All Other			XXX		0.0480		0.0868		0.1371	
	In Process of Foreclosure:										
i3.	Farm Mortgages			XXX		0.000		0.1942		0.1942	
4.	Residential Mortgages - Insured or Guaranteed			XXX		0.0000		0.0046		0.0046	
5.	Residential Mortgages - All Other			XXX		0.0000		0.0149		0.0149	
6.	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 DA Mortgages			XXX		0.0034		0.0114		0.0149	
60.	Total Mortgage Loans on Real Estate (Lines 58 + 59)			XXX		XXX		XXX		XXX	

### Asset Valuation Reserve - Equity Component

### NONE

Asset Valuation Reserve - Replications (Synthetic) Assets

NONE

Schedule F - Claims

NONE

Schedule H - Part 1 - Analysis of Underwriting Operations

NONE

Schedule H - Part 2 - Reserves and Liabilities

NONE

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

NONE

Schedule H - Part 4 - Reinsurance

NONE

Schedule H - Part 5 - Health Claims

NONE

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

Reinsurance Assumed Life Insurance, Annuities, Deposit Funds and Other Liabilities Without Life or Disability Contingencies, and Related Benefits Listed by Reinsured Company as of December 31, Current Year

	2 3 4 4 5 1 5 1 6 1 7 1 8 9 1 10 1 1 1 1 2 1 13													
1	2	3	4	5	6	7	8	9	10	11	12	13		
NAIC					Type of	Type of				Reinsurance Payable	Modified			
Company	ID	Effective		Domiciliary	Reinsurance	Business	Amount of In Force at			on Paid and	Coinsurance	Funds Withheld		
Code	Number	Date	Name of Reinsured	Jurisdiction	Assumed	Assumed	End of Year	Reserve	Premiums	Unpaid Losses	Reserve	Under Coinsurance		
62200	95-2496321	10/01/2013	Accordia Life and Annuity Company	IA	COFWH/I	XXXL	15,985,282,825	4,343,296,687	98,402,239			3,355,799,637		
0199999. G	eneral Accour	t - U.S. Affilia	tes - Captive				15,985,282,825	4,343,296,687	98,402,239			3,355,799,637		
0399999. To	otal General A	ccount - U.S.	Affiliates				15,985,282,825	4,343,296,687	98,402,239			3,355,799,637		
0699999. To	otal General A	ccount - Non-	U.S. Affiliates											
0799999. To	otal General A	ccount - Affilia	ates				15,985,282,825	4,343,296,687	98,402,239			3,355,799,637		
1099999. To	otal General A	ccount - Non-	Affiliates											
1199999. To	otal General A	ccount					15,985,282,825	4,343,296,687	98,402,239			3,355,799,637		
1499999. To	otal Separate	Accounts - U.	S. Affiliates											
1799999. To	otal Separate	Accounts - No	n-U.S. Affiliates											
1899999. To	otal Separate	Accounts - Aff	iliates											
2199999. To	otal Separate	Accounts - No	n-Affiliates											
2299999. To	otal Separate	Accounts												
2399999. To	otal U.S. (Sum	of 0399999, (	0899999, 1499999 and 1999999)				15,985,282,825	4,343,296,687	98,402,239			3,355,799,637		
2499999. To	otal Non-U.S.	(Sum of 06999	999, 0999999, 1799999 and 2099999)											
							ļ			ļ				
9999999 - T	otals						15,985,282,825	4,343,296,687	98,402,239			3,355,799,637		

Schedule S - Part 1 - Section 2

#### NONE

Schedule S - Part 2

NONE

Schedule S - Part 3 - Section 1

NONE

Schedule S - Part 3 - Section 2

NONE

Schedule S - Part 4

NONE

Schedule S - Part 4 - Bank Footnote

NONE

Schedule S - Part 5

NONE

Schedule S - Part 5 - Bank Footnote

NONE

Schedule S - Part 6

NONE

Schedule S - Part 7

NONE

#### **SCHEDULE T - PART 2**

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

Allocated by States and Territories Direct Business Only 2 3 5 6 Disability Income Long-Term Care Life Annuities (Group and Individual) Deposit-Type (Group and (Group and (Group and States, Etc. Individual) Individual) Individual) Contracts Totals 1. Alabama ..... Alaska .... 3. ΑZ 4. AR 5. California CA 6 Colorado CO CT 7. Connecticut 8. ..... DE Delaware ..... 9. 10. ..... FL 11. Georgia ...... GA Hawaii ...... HI 12. .....ID 13. Idaho ..... Illinois ..... 14. .....IL Indiana ..... .... IN 15 16. lowa ..... IA ..... KS 17. Kansas ... 18. Kentucky ..... .....KY 19. Louisiana ...... .....LA 20. Maine ..... ..... ME 21. ..... MD Maryland .... 22. Massachusetts. MA 23. Michigan ... MI 24. Minnesota MN 25. Mississippi ...... MS ..... MO 26. Missouri ..... MT 27. Montana ..... 28. Nebraska ..... 29. Nevada ..... 31. New Jersey ..... 32. New Mexico ...... NM 33. New York ..... ..... NC 34. North Carolina ...... ..... ND 35. North Dakota .... 36. Ohio ..... .... ОН 37. Oklahoma ...... OK 38. .....OR Oregon ..... 39. Pennsylvania .... 40. .....RI 41. South Carolina ... ..... SC South Dakota ... ..... SD 42. 43 Tennessee ...... TN 44 Texas TX Utah ...... UT 45. Vermont ...... VT 46. 47. Virginia ...... VA 48. Washington ...... WA 49. West Virginia ..... WV 50. Wisconsin ..... WI 51. Wyoming ...... WY 52. American Samoa ...... AS 53 Guam ..... GU ..... PR 54. Puerto Rico 56. Northern Mariana Islands ..... MP 57. Canada ...... CAN 58. Aggregate Other Alien ...... OT 59. Total

#### SCHEDULE Y

#### PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

	PARI 1A - DEIAIL OF INS								JOLL	ING COMPANT	<b>SISIEI</b>				
1	2	3	4	5	6	7	8	9	10	11	12 Type of Control (Ownership,	13 If Control is	14	15 Is an	16
Group		NAIC Company	ID	Federal		Name of Securities Exchange if Publicly Traded (U.S. or	Names of Parent, Subsidiaries	Domi- ciliary Loca-	Relation- ship to Reporting	Directly Controlled by	Board, Management, Attorney-in-Fact, Influence,	Owner- ship Provide Percen-	Ultimate Controlling	SCA Filing Re- quired?	
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Y/N)	*
			00 0004040				011 1 441 4: 5: 11116 1: 14	DUIL				00.000	Global Atlantic Financial Group Limited		
			. 80-0891249				Global Atlantic Financial Life Limited	BMU	NIA	Global Atlantic Financial Group Limited	Ownership	99.000	Global Atlantic Financial Group Limited		
			. 80-0891249				Global Atlantic Financial Life Limited	BMU	NIA	LAMC LP	Owner ship	1.000	Global Atlantic Financial Group Limited		
			. 90-0928452				Global Atlantic Financial Company	DE	NIA	Global Atlantic (Fin) Company	Ownership	100.000			
			. 38-3898658				Global Atlantic (Fin) Company	DE	NIA	Global Atlantic Financial Limited	Ownership.	100.000	Global Atlantic Financial Group Limited		
			. 98-1090868						NIA		·	100.000	Global Atlantic Financial Group Limited		
			. 90-1090000				Global Atlantic Financial Limited	BMU	NIA	Global Atlantic Financial Life Limited	Ownership	100.000	Global Atlantic Financial Group Limited		
			. 98-1090854				Global Atlantic Re Limited	BMU	IA	Global Atlantic Financial Limited	Ownership	75.000	Global Atlantic Financial Group Limited		
			. 98-1090854				Global Atlantic Re Limited	BMU	IA	GA Re US HoldCo, LP	Ownership	25.000			
			61-1704043				Ariel Re (Holdings) Limited	BMU	NIA	Global Atlantic Financial Group Limited	Ownership	100.000	Global Atlantic Financial Group Limited		
			. 13–3896700				Global Atlantic Risk Advisors, L.P.	DE	NIA	Global Atlantic (Fin) Company	Ownership.	100.000	Global Atlantic Financial Group Limited		
													Global Atlantic Financial Group Limited		
			. 38–3898658				Global Atlantic Insurance Network, LLC	DE	NIA	Global Atlantic (Fin) Company	Ownership	100.000	Global Atlantic Financial Group Limited		
			. 13-3896487				GA Risk Advisors, Inc.	DE	NIA	Global Atlantic (Fin) Company	Ownership.	100.000			
			98-1529928				Global Atlantic Financial Company Bermuda Limited	BMU	NIA	Global Atlantic Financial Life Limited	Ownership.	100.000	Global Atlantic Financial Group Limited		
			. 98-1089764	4520225			Global Atlantic Financial Group Limited	BMU	NIA	The Goldman Sachs Group, Inc.	Ownership.	22.000	The Goldman Sachs Group, Inc.		
			. 98–1089764	4520225	-		Global Atlantic Financial Group Limited	BMU	NIA	Third Party Investors	Ownership	78.000	Third Party Investors		
3891	Goldman Sachs Grp	69140	. 04-1867050	2578101	793699		First Allmerica Financial Life Insurance Company	MA	IA	Commonwealth Annuity and Life Insurance	Ownership.	100.000	Global Atlantic Financial Group Limited		
	·	04004					Commonwealth Annuity and Life Insurance		1.4	Olahal Aklankia (Fin) Onnana	0hi	100,000	Global Atlantic Financial Group Limited		
3891	Goldman Sachs Grp	84824	. 04–6145677	3958278	. 1086664		Company	MA	IA	Global Atlantic (Fin) Company Commonwealth Annuity and Life Insurance	Ownership	100.000	Global Atlantic Financial Group Limited		
3891	Goldman Sachs Grp	62200	95-2496321		-		Accordia Life and Annuity Company	IA	IA	Company	Ownership	100.000	Global Atlantic Financial Group Limited		
			46-3694412				Gotham Issuer, LLC	DE	IA	Global Atlantic (Fin) Company	Ownership	10.000	Global Atlantic Financial Group Limited		
			46-3694412				Gotham Issuer, LLC	DE.	IA.	Accordia Life and Annuity Company	Ownership.	90.000	Global Atlantic Financial Group Limited		
										, , ,	·		Global Atlantic Financial Group Limited		
			. 95–2496321		-		DBE Solar Holdco LLC	DE	NIA	Accordia Life and Annuity Company	Ownership	100.000	Global Atlantic Financial Group Limited		
3891	Goldman Sachs Grp	15333	. 46–3455515				Gotham Re, Inc.	VT	IA	Accordia Life and Annuity Company	Ownership	100.000	Global Atlantic Financial Group Limited	<del>-</del>	
			. 95–2496321		-		Tapioca View, LLC	DE	IA	Accordia Life and Annuity Company	. Ownership	100.000	Global Atlantic Financial Group Limited		
3891	Goldman Sachs Grp	15475	. 46-3465867				Cape Verity I, Inc.	IA	IA	Accordia Life and Annuity Company	Ownership	100.000			
3891	Goldman Sachs Grp	15473	. 46-3485456				Cape Verity III, Inc.	IA	RE	Accordia Life and Annuity Company	. Ownership	100.000	Global Atlantic Financial Group Limited	<u>-</u>	
			. 35-1960899				Global Atlantic Investment Advisors, LLC	IN	IA	Global Atlantic (Fin) Company	Ownership	100.000	Global Atlantic Financial Group Limited		
			. 20-3944031				Global Atlantic Distributors, LLC	DE	IA.	Global Atlantic (Fin) Company	Ownership	100.000	Global Atlantic Financial Group Limited		
													Global Atlantic Financial Group Limited		
			. 35–1815415				ForeLife Agency, Inc	IN	IA	Global Atlantic (Fin) Company Commonwealth Annuity and Life Insurance	Ownership	100.000	Global Atlantic Financial Group Limited		
3891	Goldman Sachs Grp	91642	. 06-1016329				Forethought Life Insurance Company	IN	IA	Company	Ownership	100.000			

#### **SCHEDULE Y**

#### PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
											Type	If			
											of Control	Control			
											(Ownership,	is		Is an	
						Name of Securities			Relation-		Board,	Owner-		SCA	
						Exchange		Domi-	ship		Management,	ship		Filing	
		NAIC				if Publicly Traded	Names of	ciliary	to		Attorney-in-Fact,	Provide		Re-	
Group		Company	ID	Federal		(U.Ś. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence,	Percen-	Ultimate Controlling	quired?	
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Y/N)	*
									•				Global Atlantic Financial Group Limite	ed	
			81-3323212				Global Atlantic Equipment Management, LLC	DE	NI A	Global Atlantic (Fin) Company	Owner ship	100.000			
													Global Atlantic Financial Group Limite	ed	
			98-1452583				Global Atlantic Assurance Limited	BMU	IA	Global Atlantic Financial Limited	Ownership	100.000	011 1 111 11 51 110 1111		
			98-1451597				GA Re Bermuda HoldCo Limited	BMU	NIA	Global Atlantic Financial Limited	Ownership.	100.000	Global Atlantic Financial Group Limite	ea	
			90-1401097				da ne bermuda noroco Limited	DIVIU	NIA	GIODAT ATTAINTIC FINANCIAT LIMITED	owner snrp		Global Atlantic Financial Group Limite		
			83-2239712				GA Re US HoldCo. LP	DE	NIA	Global Atlantic Financial Limited	Ownership	99.000	drobat Attairtie i maneral droup Elimite	Ju	
			00 22007 12				an no so notass, El			drobat Attailero i maiorat Etimicoa	omor on p		Global Atlantic Financial Group Limite	ed	
			83-2239712				GA Re US HoldCo, LP	DE	NIA	GA Re Bermuda HoldCo Limited	Owner ship.	1.000			
							·						Global Atlantic Financial Group Limite	ed	
			98-1090854				EXL Solar HoldCo, LLC	DE	NIA	Global Atlantic Re Limited	Ownership	100.000			
		1					L			Commonwealth Annuity and Life Insurance			Global Atlantic Financial Group Limite	ed	
			04-6145677				Nav Solar Holdco LLC	DE	NIA	Company	Ownership	100.000			

Asterisk			Ex	a n	
	1		1		

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

1	2	3	4	5	6	7 Income/	8	9	10	11	12	13
						(Disbursements)						
					Purchases, Sales	Incurred in						Reinsurance
					or Exchanges of	Connection with		Income/		Any Other Material		Recoverable/
					Loans, Securities,	Guarantees or		(Disbursements)		Activity Not in the		(Payable) on
NAIC					Real Estate,	Undertakings for	Management	Incurred Under		Ordinary Course of		Losses and/or
Company	, ID	Names of Insurers and Parent,	Shareholder	Capital	Mortgage Loans or	the Benefit of any	Agreements and	Reinsurance	*	the Insurer's	<b>-</b>	Reserve Credit
Code	Number	Subsidiaries or Affiliates	Dividends	Contributions	Other Investments	Affiliate(s)	Service Contracts	Agreements	*	Business	Totals	Taken/(Liability)
		Global Atlantic (Fin) Company		(340,000,000)			(809, 118)			160,000,000	(180,809,118)	
		Commonwealth Re Midco Limited					(202,280)				(202,280)	
84824	04-6145677	.Commonwealth Annuity & Life Insurance										
		Company	250,000,000	90,000,000	3,352,973		96, 134, 894	108,125,782			547,613,649	
		Global Atlantic Re Limited					(22,114,111)	(141,411,601)		(110,000,000)	(273,525,712)	
69140	04-1867050	First Allmerica Financial Life Insurance										
		Company	(100,000,000)		3,235,001		(15,947,581)	(51,700,578)			(164,413,158)	
62200	95-2496321	Accordia Life and Annuity Company		130,000,000	(3,395,986)		(191,708,142)	217,404,176		(50,000,000)	102,300,048	
	90-0928452	Global Atlantic Financial Company					451,003,084				451,003,084	
15333	46-3455515	Gotham Re, Inc.			(3,235,001)		(177,439)	(11,818,003)			(15,230,443)	
15475	46-3465867	Cape Verity I, Inc.			(2,529,703)		` ' '	3,311,903	_		782,200	
		Cape Verity III, Inc.		120.000.000	(3,673,611)			(172,313,179)	-		(55,986,790)	
	35-1960899	Global Atlantic Investment Advisors, LLC					(4,667,427)				(4,667,427)	
91642		Global Atlantic Distributors, LLC					(38,646,662)				(38,646,662)	
91642		Forethought Life Insurance Company	(150,000,000)		6.246.327		(240,451,250)	48,401,500	_		(335,803,423)	
01042		Goldman Sachs Asset Management, L.P.	(100,000,000)				(240,401,200)				(000,000,420)	
	. 10 007 0000	(GSAM fees)					14,325,870		_		14.325.870	
	81-3323212	Global Atlantic Equipment Management, LLC					14,020,070				14,020,070	
	. 0 1-0020212	drobal Attaintic Equipment Management, LLC					(34, 105, 056)		_		(34 . 105 . 056)	
	98-1529928	Global Atlantic Assurance Limited					(34, 105,056)				(34, 105,056)	
		1					(12,430,800)				(12,430,800)	
		Global Atlantic Financial Company Bermuda					(400,007)				(400,007)	
		Limited					(198,927)				(198,927)	
										<del> </del>		
9999999 Co	ntrol Totals								XXX			

#### SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

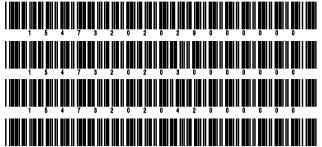
The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of WAIVED to the specific interrogatory will be accepted in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

		Responses
1.	MARCH FILING  Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	YES
2.	Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?	SEE EXPLANATION
3.	Will the confidential Risk-based Capital Report be filed with the state of domicile, if required, by March 1?	YES
4.	Will an actuarial opinion be filed by March 1?	YES
5.	APRIL FILING  Will Management's Discussion and Analysis be filed by April 1?	YES
6.	Will the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit be filed with the state of domicile and the NAIC by April 1? (Not applicable to fraternal benefit societies)	WAIVED
7.	Will the Adjustments to the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit (if required) be filed with the state of domicile and the NAIC by April 1? (Not applicable to fraternal benefit societies)	WAIVED
8.	Will the Supplemental Investment Risks Interrogatories be filed by April 1?	YES
9.	JUNE FILING Will an audited financial report be filed by June 1?	YES
10.	Will Accountant's Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	SEE EXPLANATION
11.		YES
suppler specific	owing supplemental reports are required to be filed as part of your annual statement filing if your company is engaged in the type of busines ment. However, in the event that your company does not transact the type of business for which the special report must be filed, your response interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company whatever reason enter SEE EXPLANATION and provide an explanation following in interrogatory questions.	onse of NO to the
12.	MARCH FILING  Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1? (Not applicable to fraternal benefit societies)	NO
13.	Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	NO
14.	Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?	NO
15.	Will the actuarial opinion on participating and non-participating policies as required in Interrogatories 1 and 2 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1?	NO
16.	Will the actuarial opinion on non-guaranteed elements as required in interrogatory #3 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1?	SEE EXPLANATION
17.	Will the actuarial opinion on X-Factors be filed with the state of domicile and electronically with the NAIC by March 1?	SEE EXPLANATION
18.	Will the actuarial opinion on Separate Accounts Funding Guaranteed Minimum Benefit be filed with the state of domicile and electronically with the NAIC by March 1?	NO
19.	Will the actuarial opinion on Synthetic Guaranteed Investment Contracts be filed with the state of domicile and electronically with the NAIC by March 1?	NO
20.	Will the Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1?	NO
21.	Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1?	NO
22.	Will the Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI be filed with the state of domicile and electronically with the NAIC by March 1?	NO
23.	Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Average Market Value) be filed with the state of domicile and electronically with the NAIC by March 1?	NO
24.	Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value) be filed with the state of domicile and electronically with the NAIC by March 1?	SEE EXPLANATION
25.	Will the C-3 RBC Certifications required under C-3 Phase I be filed with the state of domicile and electronically with the NAIC by March 1?	NO
26.	Will the C-3 RBC Certifications required under C-3 Phase II be filed with the state of domicile and electronically with the NAIC by March 1?	NO

#### SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

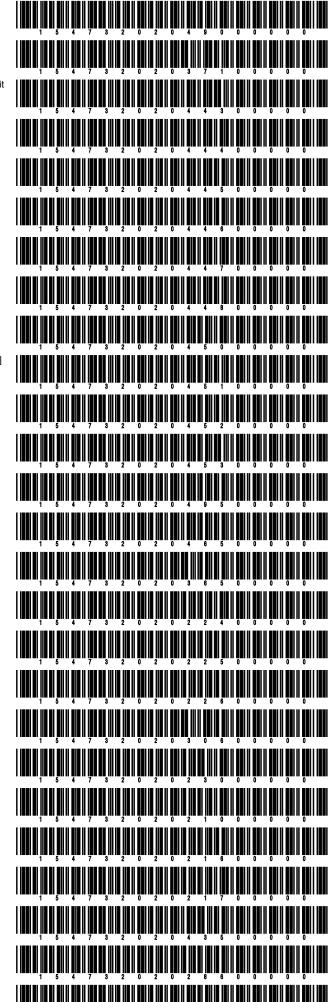
07	Will the Astronial Continue Deleted to Associte Newforthiston Consultance for Facility Indianal Assocition by Fledwith the state of description						
27.	Will the Actuarial Certifications Related to Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities be filed with the state of domicile and electronically with the NAIC by March 1?	NO					
28.	Will the actuarial opinion required by the Modified Guaranteed Annuity Model Regulation be filed with the state of domicile and electronically with the NAIC by March 1?						
<del>29.</del>	Will the Actuarial Certifications Related to Hedging required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?						
<del>30.</del>	Will the Financial Officer Certification Related to Clearly Defined Hedging Strategy required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?						
31.	Will the Management Certification That the Valuation Reflects Management's Intent required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?						
<del>32.</del>	Will the Actuarial Certification Related to the Reserves required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?						
33.	Will the Actuarial Certification regarding the use of 2001 Preferred Class Tables required by the Model Regulation Permitting the Recognition of Preferred Mortality Tables for Use in Determining Minimum Reserve Liabilities be filed with the state of domicile and electronically with the NAIC by March 1?	SEE EXPLANATION					
34.	Will the Worker's Compensation Carve-Out Supplement be filed by March 1? (Not applicable to fraternal benefit societies)	NO					
35.	Will Supplemental Schedule O be filed with the state of domicile and the NAIC by March 1?	NO					
36.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	NO					
37.	Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1?	NO					
38.	electronically with the NAIC by March 1?						
39.	Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?	NO					
40.	Will the VM-20 Reserves Supplement be filed with the state of domicile and the NAIC by March 1?	SEE EXPLANATION					
44	APRIL FILING  Will the confidential Degulatory Asset Adequate Legisla by the Valuation Manual he filed with the state of demisils by						
41.	Will the confidential Regulatory Asset Adequacy Issues Summary (RAAIS) required by the Valuation Manual be filed with the state of domicile by April 1?	YES					
42.	Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?	NO NO					
43.	Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1? (Not applicable to fraternal benefit societies)	NO NO					
44. 45.	Will the Accident and Health Policy Experience Exhibit be filed by April 1?  Will the Supplemental Health Care Exhibit /Parts 1, 2 and 3) be filed with the state of demicile and the NAIC by April 12.	NO NO					
46.							
	April 1?	NO NO					
47. 48.	Will the confidential Actuarial Memorandum required by Actuarial Guideline XXXVIII 8D be filed with the state of domicile by April 30?	NO SEE EXPLANATION					
	Will the Supplemental Term and Universal Life Insurance Reinsurance Exhibit be filed with the state of domicile and the NAIC by April 1?	NO NO					
49. 50.	Will the confidential Executive Summary of the PBR Actuarial Report be filed with the state of domicile by April 1?	YES					
51.	Will the confidential Like Summary of the PBR Actuarial Report be filed with the state of domicile by April 1?  Will the confidential Life Summary of the PBR Actuarial Report be filed with the state of domicile by April 1?	YES					
51. 52.	Will the confidential Variable Annuities Summary of the PBR Actuarial Report be filed with the state of domicile by April 1?	NO					
52.	AUGUST FILING	NO					
53.	Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	YES					
2	Explanations:						
2. 10.	The Company is not required to file with the NAIC The Company is not required to file with the NAIC						
	The Company has only one shareholder						
13. 14.	The Company has no Medicare Supplement Insurance Business The Company has no trusteed surplus						
15.	The Company has no participating business						
16. 17.	The Company will file with the State but is not required to file with the NAIC  The Company will file with the State but is not required to file with the NAIC						
18.	The Company has no Separate Accounts Funding Guaranteed Minimum Benefit						
19.	The Company has no Synthetic GTIC contracts The Recognitions and Consistency of Assumption Codificate will be filed.						
20. 21.	The Reasonableness and Consistency of Assumption Certificate will be filed The Company has no indexed annuity contracts						
22.	The Reasonableness and Consistency of Assumption Certificate (updated Market Value) will be filed						
23. 24.	The Reasonableness and Consistency of Assumption Certificate (updated Market Value) will be filed The Company will file with the State but is not required to file with the NAIC						
25.	The Company is not required to file this form						
26. 27.	The Company is not required to file this form The Company has no participating business						
28.	The Company has no Modified Guarantee Annuities						
33. 34.	The Company will file with the State but is not required to file with the NAIC The Company has no Workers Compensation business						
35.	The Company has no Accident and Health business						
36.	The Company has no Medicare Part D coverage business						
37. 38.	Audit partner has not exceeded five years  There are no employees currently in cooling off periods						
39.	The Company is not seeking relief from these requirements						
40. 42.	The Company will file with the State but is not required to file with the NAIC The Company has no Long-Term business						
43.	The Company has no Accident and Health business						
44. 45	The Company has no annuity business The Company has no health business						
45. 46.	The Company has no health business The Company has no health business						
47.	The Company is exempt from the requirements of Section 8D of AG38						
48. 49.	The Company will file with the State but is not required to file with the NAIC						
52.	We don't have variable annuities						
6.	Bar Codes: Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit [Document Identifier 290]						

- Adjustments to the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit [Document Identifier 300]
- 12. SIS Stockholder Information Supplement [Document Identifier 420]
- 13. Medicare Supplement Insurance Experience Exhibit [Document Identifier 360]



#### SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

- 14. Trusteed Surplus Statement [Document Identifier 490]
- 15. Participating Opinion for Exhibit 5 [Document Identifier 371]
- Actuarial Opinion on Separate Accounts Funding Guaranteed Minimum Benefit [Document Identifier 443]
- 19. Actuarial Opinion on Synthetic Guaranteed Investment Contracts [Document Identifier 444]
- Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV [Document Identifier 445]
- Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXV [Document Identifier 446]
- Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI [Document Identifier 447]
- Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI [Document Identifier 448]
- 25. C-3 RBC Certifications Required Under C-3 Phase I [Document Identifier 450]
- 26. C-3 RBC Certifications Required Under C-3 Phase II [Document Identifier 451]
- Actuarial Certifications Related to Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities [Document Identifier 452]
- 28. Modified Guaranteed Annuity Model Regulation [Document Identifier 453]
- 34. Workers' Compensation Carve-Out Supplement [Document Identifier 495]
- 35. Supplemental Schedule O [Document Identifier 465]
- 36. Medicare Part D Coverage Supplement [Document Identifier 365]
- 37. Relief from the five-year rotation requirement for lead audit partner [Document Identifier 224]
- Relief from the one-year cooling off period for independent CPA [Document Identifier 225]
- 39. Relief from the Requirements for Audit Committees [Document Identifier 226]
- 42. Long-Term Care Experience Reporting Forms [Document Identifier 306]
- 43. Credit Insurance Experience Exhibit [Document Identifier 230]
- 44. Accident and Health Policy Experience Exhibit [Document Identifier 210]
- 45. Supplemental Health Care Exhibit (Parts 1, 2 and 3) [Document Identifier 216]
- 46. Supplemental Health Care Exhibit's Expense Allocation Report [Document Identifier 217]
- Actuarial Memorandum Required by Actuarial Guideline XXXVIII 8D [Document Identifier 435]
- 49. Variable Annuities Supplement [Document Identifier 286]
- Variable Annuities Summary of the PBR Actuarial Report [Document Identifier 459]



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