

ANNUAL STATEMENT

OF THE

Of

in the state of

to the Insurance Department

of the State of

For the Year Ended

December 31, 2006

2006



ANNUAL STATEMENT

For the Year Ended December 31, 2006
of the Condition and Affairs of the

NAIC Group Code..... , (Current Period) (Prior Period)
 Organized under the Laws of
 Incorporated/Organized.....
 Statutory Home Office
 Main Administrative Office
 Mail Address
 Primary Location of Books and Records
 Internet Website Address
 Statutory Statement Contact
 Policyowner Relations Contact

NAIC Company Code..... 55301
 State of Domicile or Port of Entry
 Commenced Business.....
 Employer's ID Number.....
 Country of Domicile

..... (Street and Number) (City or Town, State and Zip Code)
 (Street and Number) (City or Town, State and Zip Code)
 (Street and Number or P. O. Box) (City or Town, State and Zip Code)
 (Street and Number) (City or Town, State and Zip Code)
 (Name) (Area Code) (Telephone Number) (Extension)
 (E-Mail Address) (Fax Number)
 (Street and Number) (City or Town, State and Zip Code) (Area Code) (Telephone Number) (Extension)

OFFICERS

| 1. | Name | Title | 2. | Name | Title |
|----|------|-------|----|------|-------|
| 3. | | | 4. | | |

OTHER

DIRECTORS OR TRUSTEES

State of.....
 County of.....

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC *Annual Statement Instructions and Accounting Practices and Procedures* manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy of the enclosed statement (except for formatting differences due to electronic filing). The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

| | | |
|----------------------------|----------------------------|----------------------------|
| _____ (Signature) | _____ (Signature) | _____ (Signature) |
| _____ 1. (Printed Name) | _____ 2. (Printed Name) | _____ 3. (Printed Name) |
| _____ (Title) | _____ (Title) | _____ (Title) |

Subscribed and sworn to before me
 This _____ day of _____

a. Is this an original filing? Yes [X] No []
 b. If no 1. State the amendment number _____
 2. Date filed _____
 3. Number of pages attached _____

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)..... | | | 0 | |
| 2. Stocks (Schedule D): | | | | |
| 2.1 Preferred stocks..... | | | 0 | |
| 2.2 Common stocks..... | | | 0 | |
| 3. Mortgage loans on real estate (Schedule B): | | | | |
| 3.1 First liens..... | | | 0 | |
| 3.2 Other than first liens..... | | | 0 | |
| 4. Real estate (Schedule A): | | | | |
| 4.1 Properties occupied by the company (less \$.....0 encumbrances)..... | | | 0 | |
| 4.2 Properties held for the production of income (less \$.....0 encumbrances)..... | | | 0 | |
| 4.3 Properties held for sale (less \$.....0 encumbrances)..... | | | 0 | |
| 5. Cash (\$.....0, Sch. E-Part 1), cash equivalents (\$.....0, Sch. E-Part 2) and short-term investments (\$.....0, Sch. DA) | | | 0 | |
| 6. Contract loans (including \$.....0 premium notes)..... | | | 0 | |
| 7. Other invested assets (Schedule BA)..... | | | 0 | |
| 8. Receivables for securities..... | | | 0 | |
| 9. Aggregate write-ins for invested assets..... | 0 | 0 | 0 | 0 |
| 10. Subtotals, cash and invested assets (Lines 1 to 9)..... | 0 | 0 | 0 | 0 |
| 11. Title plants less \$.....0 charged off (for Title insurers only)..... | | | 0 | |
| 12. Investment income due and accrued..... | | | 0 | |
| 13. Premiums and considerations: | | | | |
| 13.1 Uncollected premiums and agents' balances in course of collection..... | | | 0 | |
| 13.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$.....0 earned but unbilled premiums)..... | | | 0 | |
| 13.3 Accrued retrospective premiums..... | | | 0 | |
| 14. Reinsurance: | | | | |
| 14.1 Amounts recoverable from reinsurers..... | | | 0 | |
| 14.2 Funds held by or deposited with reinsured companies..... | | | 0 | |
| 14.3 Other amounts receivable under reinsurance contracts..... | | | 0 | |
| 15. Amounts receivable relating to uninsured plans..... | | | 0 | |
| 16.1 Current federal and foreign income tax recoverable and interest thereon..... | | | 0 | |
| 16.2 Net deferred tax asset..... | | | 0 | |
| 17. Guaranty funds receivable or on deposit..... | | | 0 | |
| 18. Electronic data processing equipment and software..... | | | 0 | |
| 19. Furniture and equipment, including health care delivery assets (\$.....0)..... | | | 0 | |
| 20. Net adjustment in assets and liabilities due to foreign exchange rates..... | | | 0 | |
| 21. Receivables from parent, subsidiaries and affiliates..... | | | 0 | |
| 22. Health care (\$.....0) and other amounts receivable..... | | | 0 | |
| 23. Aggregate write-ins for other than invested assets..... | 0 | 0 | 0 | 0 |
| 24. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 10 to 23)..... | 0 | 0 | 0 | 0 |
| 25. From Separate Accounts, Segregated Accounts and Protected Cell Accounts..... | | | 0 | |
| 26. TOTALS (Lines 24 and 25)..... | 0 | 0 | 0 | 0 |

DETAILS OF WRITE-INS

| | | | | |
|--|---|---|---|---|
| 0901..... | | | 0 | |
| 0902..... | | | 0 | |
| 0903..... | | | 0 | |
| 0998. Summary of remaining write-ins for Line 9 from overflow page..... | 0 | 0 | 0 | 0 |
| 0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9 above)..... | 0 | 0 | 0 | 0 |
| 2301..... | | | 0 | |
| 2302..... | | | 0 | |
| 2303..... | | | 0 | |
| 2398. Summary of remaining write-ins for Line 23 from overflow page..... | 0 | 0 | 0 | 0 |
| 2399. Totals (Lines 2301 thru 2303 plus 2398) (Line 23 above)..... | 0 | 0 | 0 | 0 |

LIABILITIES, SURPLUS AND OTHER FUNDS

| | 1 Current Year | 2 Prior Year |
|---|-------------------|-----------------|
| 1. Aggregate reserve for life certificates and contracts (Exhibit 5, Line 9999999) (including \$.....0 Modco Reserve)..... | | |
| 2. Aggregate reserve for accident and health contracts (Exhibit 6, Line 16, Col. 1) (including \$.....0 Modco Reserve)..... | | |
| 3. Liability for deposit-type contracts (Exhibit 7, Line 14, Col. 1) (including \$.....0 Modco Reserve)..... | | |
| 4. Contract claims: | | |
| 4.1 Life (Exhibit 8, Part 1, Line 4.4, Column 1 less sum of Columns 9, 10 and 11)..... | | |
| 4.2 Accident and health (Exhibit 8, Part 1, Line 4.4, sum of Columns 9, 10 and 11)..... | | |
| 5. Refunds due and unpaid (Exhibit 4, Line 10)..... | | |
| 6. Provision for refunds payable in following calendar year-estimated amounts: | | |
| 6.1 Apportioned for payment..... | | |
| 6.2 Not yet apportioned..... | | |
| 7. Premiums and annuity considerations for life and accident and health contracts received in advance less \$.....0 discount; including \$.....0 accident and health premiums (Exhibit 1, Part 1, Col. 1, sum of Lines 4 and 14)..... | | |
| 8. Contract liabilities not included elsewhere: | | |
| 8.1 Surrender values on canceled contracts..... | | |
| 8.2 Other amounts payable on reinsurance including \$.....0 assumed and \$.....0 ceded..... | | |
| 8.3 Interest Maintenance Reserve (IMR, Line 6)..... | | |
| 9. Commissions to fieldworkers due or accrued-life and annuity contracts \$.....0 ; accident and health \$.....0 and deposit-type contract funds \$.....0..... | | |
| 10. Commissions and expense allowances payable on reinsurance assumed..... | | |
| 11. General expenses due or accrued (Exhibit 2, Line 12, Col. 7)..... | | |
| 12. Transfers to Separate Accounts due or accrued (net) (including \$.....0 accrued for expense allowances recognized in reserves)..... | | |
| 13. Taxes, licenses and fees due or accrued (Exhibit 3, Line 8, Col. 6)..... | | |
| 14. Unearned investment income..... | | |
| 15. Amounts withheld or retained by Society as agent or trustee..... | | |
| 16. Amounts held for fieldworkers' account, including \$.....0 fieldworkers' credit balances..... | | |
| 17. Remittances and items not allocated..... | | |
| 18. Net adjustment in assets and liabilities due to foreign exchange rates..... | | |
| 19. Liability for benefits for employees and fieldworkers if not included above..... | | |
| 20. Borrowed money \$.....0 and interest thereon \$.....0..... | | |
| 21. Miscellaneous liabilities: | | |
| 21.1 Asset valuation reserve (AVR, Line 16, Col. 7)..... | | |
| 21.2 Reinsurance in unauthorized companies..... | | |
| 21.3 Funds held under reinsurance treaties with unauthorized reinsurers..... | | |
| 21.4 Payable to subsidiaries and affiliates..... | | |
| 21.5 Drafts outstanding..... | | |
| 21.6 Funds held under coinsurance..... | | |
| 21.7 Payable for securities..... | | |
| 22. Aggregate write-ins for liabilities..... | 0 | 0 |
| 23. Total liabilities excluding Separate Accounts business (Lines 1 to 22)..... | 0 | 0 |
| 24. From Separate Accounts statement..... | | |
| 25. Total liabilities (Lines 23 and 24)..... | 0 | 0 |
| 26. Aggregate write-ins for other than liabilities and surplus funds..... | 0 | 0 |
| 27. Surplus notes..... | | |
| 28. Aggregate write-ins for surplus funds..... | 0 | 0 |
| 29. Unassigned funds..... | | |
| 30. Total (Lines 26 through 29) (Page 4, Line 47) (including \$.....0 in Separate Accounts statement)..... | 0 | 0 |
| 31. Totals (Lines 25 + 30) (Page 2, Line 26, Col. 3)..... | 0 | 0 |

DETAILS OF WRITE-INS

| | | |
|--|---|---|
| 2201. | | |
| 2202. | | |
| 2203. | | |
| 2298. Summary of remaining write-ins for Line 22 from overflow page..... | 0 | 0 |
| 2299. Totals (Lines 2201 thru 2203 plus 2298) (Line 22 above)..... | 0 | 0 |
| 2601. | | |
| 2602. | | |
| 2603. | | |
| 2698. Summary of remaining write-ins for Line 26 from overflow page..... | 0 | 0 |
| 2699. Totals (Lines 2601 thru 2603 plus 2698) (Line 26 above)..... | 0 | 0 |
| 2801. | | |
| 2802. | | |
| 2803. | | |
| 2898. Summary of remaining write-ins for Line 28 from overflow page..... | 0 | 0 |
| 2899. Totals (Lines 2801 thru 2803 plus 2898) (Line 28 above)..... | 0 | 0 |



SUMMARY OF OPERATIONS

| | 1 Current Year | 2 Prior Year |
|---|-------------------|-----------------|
| 1. Premiums and annuity considerations for life and accident and health contracts (Exhibit 1, Part 1, Line 20.4, Col. 1)..... | | |
| 2. Considerations for supplementary contracts with life contingencies..... | | |
| 3. Net investment income (Exhibit of Net Investment Income, Line 17)..... | | |
| 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. 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..... | 0 | 0 |
| 9. Totals (Lines 1 to 8.3)..... | 0 | 0 |
| 10. Death benefits..... | | |
| 11. Matured endowments..... | | |
| 12. Annuity and old age benefits..... | | |
| 13. Disability, accident and health benefits, including premiums waived \$.....0..... | | |
| 14. Surrender benefits and withdrawals for life contracts..... | | |
| 15. Interest and adjustments on contract or deposit-type contracts funds..... | | |
| 16. Payments on supplementary contracts with life contingencies..... | | |
| 17. Increase in aggregate reserve for life and accident and health contracts..... | | |
| 18. Totals (Lines 10 to 17)..... | 0 | 0 |
| 19. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only) (Exhibit 1, Part 2, Line 31, Col. 1 less Col. 5)..... | | |
| 20. Commissions and expense allowances on reinsurance assumed (Exhibit 1, Part 2, Line 26.2, Col. 1 less Col. 5)..... | | |
| 21. General insurance expenses and fraternal expenses (Exhibit 2, Line 10, Cols. 1, 2, 3, 4 and 6)..... | | |
| 22. Insurance taxes, licenses and fees (Exhibit 3, Line 6, Cols. 1, 2, 3 and 5)..... | | |
| 23. Increase in loading on deferred and uncollected premiums..... | | |
| 24. Net transfers to or (from) Separate Accounts net of reinsurance..... | | |
| 25. Aggregate write-ins for deductions..... | 0 | 0 |
| 26. Totals (Lines 18 to 25)..... | 0 | 0 |
| 27. Net gain from operations before refunds to members (Line 9 minus Line 26)..... | 0 | 0 |
| 28. Refunds to members (Exhibit 4, Line 17, Cols. 1 + 2)..... | | |
| 29. Net gain from operations after refunds to members and before realized capital gains (losses) (Line 27 minus Line 28)..... | 0 | 0 |
| 30. Net realized capital gains (losses) (excluding \$.....0 transferred to the IMR)..... | | |
| 31. Net income (Lines 29 + 30)..... | 0 | 0 |
| SURPLUS ACCOUNT | | |
| 32. Surplus, December 31, previous year (Page 3, Line 30, Col. 2)..... | 0 | |
| 33. Net income from operations (Line 31)..... | 0 | 0 |
| 34. Change in net unrealized capital gains (losses)..... | | |
| 35. Change in net unrealized foreign exchange capital gain (loss)..... | | |
| 36. Change in nonadmitted assets and related items..... | | |
| 37. Change in liability for reinsurance in unauthorized companies..... | | |
| 38. Change in reserve on account of change in valuation basis, (increase) or decrease (Exhibit 5A, Line 9999999, Col. 4)..... | | |
| 39. Change in asset valuation reserve..... | | |
| 40. Surplus (contributed to) withdrawn from Separate Accounts during period..... | | |
| 41. Other changes in surplus in Separate Accounts statement..... | | |
| 42. Change in surplus notes..... | | |
| 43. Cumulative effect of changes in accounting principles..... | | |
| 44. Change in surplus as a result of reinsurance..... | | |
| 45. Aggregate write-ins for gains and losses in surplus..... | 0 | 0 |
| 46. Net change in surplus for the year (Lines 33 through 45)..... | 0 | 0 |
| 47. Surplus December 31, current year (Lines 32 + 46) (Page 3, Line 30)..... | 0 | 0 |

| DETAILS OF WRITE-INS | | |
|---|---|---|
| 08.301. | | |
| 08.302. | | |
| 08.303. | | |
| 08.398. Summary of remaining write-ins for Line 8.3 from overflow page..... | 0 | 0 |
| 08.399. Totals (Lines 08.301 thru 08.303 plus 08.398) (Line 8.3 above)..... | 0 | 0 |
| 2501. | | |
| 2502. | | |
| 2503. | | |
| 2598. Summary of remaining write-ins for Line 25 from overflow page..... | 0 | 0 |
| 2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above)..... | 0 | 0 |
| 4501. | | |
| 4502. | | |
| 4503. | | |
| 4598. Summary of remaining write-ins for Line 45 from overflow page..... | 0 | 0 |
| 4599. Totals (Lines 4501 thru 4503 plus 4598) (Line 45 above)..... | 0 | 0 |



CASH FLOW

| | 1 Current Year | 2 Prior Year |
|--|-------------------|-----------------|
| CASH FROM OPERATIONS | | |
| 1. Premiums collected net of reinsurance..... | | |
| 2. Net investment income..... | | |
| 3. Miscellaneous income..... | | |
| 4. Total (Lines 1 through 3)..... | .0 | .0 |
| 5. Benefit and loss related payments..... | | |
| 6. Net transfers to Separate, Segregated Accounts and Protected Cell Accounts..... | | |
| 7. Commissions, expenses paid and aggregate write-ins for deductions..... | | |
| 8. Dividends paid to policyholders..... | | |
| 9. Federal and foreign income taxes paid (recovered) \$.....0 net of tax on capital gains (losses)..... | | |
| 10. Total (Lines 5 through 9)..... | .0 | .0 |
| 11. Net cash from operations (Line 4 minus Line 10)..... | .0 | .0 |
| CASH FROM INVESTMENTS | | |
| 12. Proceeds from investments sold, matured or repaid: | | |
| 12.1 Bonds..... | | |
| 12.2 Stocks..... | | |
| 12.3 Mortgage loans..... | | |
| 12.4 Real estate..... | | |
| 12.5 Other invested assets..... | | |
| 12.6 Net gains or (losses) on cash, cash equivalents and short-term investments..... | | |
| 12.7 Miscellaneous proceeds..... | | |
| 12.8 Total investment proceeds (Lines 12.1 to 12.7)..... | .0 | .0 |
| 13. Cost of investments acquired (long-term only): | | |
| 13.1 Bonds..... | | |
| 13.2 Stocks..... | | |
| 13.3 Mortgage loans..... | | |
| 13.4 Real estate..... | | |
| 13.5 Other invested assets..... | | |
| 13.6 Miscellaneous applications..... | | |
| 13.7 Total investments acquired (Lines 13.1 to 13.6)..... | .0 | .0 |
| 14. Net increase (decrease) in contract loans and premium notes..... | | |
| 15. Net cash from investments (Line 12.8 minus Lines 13.7 and 14)..... | .0 | .0 |
| CASH FROM FINANCING AND MISCELLANEOUS SOURCES | | |
| 16. Cash provided (applied): | | |
| 16.1 Surplus notes, capital notes..... | | |
| 16.2 Capital and paid in surplus, less treasury stock..... | | |
| 16.3 Borrowed funds..... | | |
| 16.4 Net deposits on deposit-type contracts and other insurance liabilities..... | | |
| 16.5 Dividends to stockholders..... | | |
| 16.6 Other cash provided (applied)..... | | |
| 17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)..... | .0 | .0 |
| RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS | | |
| 18. Net change in cash, cash equivalents and short-term investments (Line 11 plus Line 15 plus Line 17)..... | .0 | .0 |
| 19. Cash, cash equivalents and short-term investments: | | |
| 19.1 Beginning of year..... | .0 | |
| 19.2 End of year (Line 18 plus Line 19.1)..... | .0 | .0 |

Note: Supplemental disclosures of cash flow information for non-cash transactions:

| | | | |
|---------|--|--|--|
| 20.0001 | | | |
|---------|--|--|--|



ANALYSIS OF OPERATIONS BY LINES OF BUSINESS

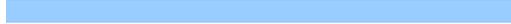
| | 1 | Insurance | | | | | 7 Total (Columns 2 through 6) | 8 | 9 |
|--|---|------------------------|------------------------------|---------------------------------|-----------------------------|---|--|---|---|
| | | 2 Life Insurance | 3 Individual Annuities | 4 Supplementary Contracts | 5 Accident and Health | 6 Aggregate of All Other Lines of Business |  |  |  | Fraternal | Expense |
| 1. Premiums and annuity considerations for life and accident and health contracts..... | 0 | | | | | | 0 | | |
| 2. Considerations for supplementary contracts with life contingencies..... | 0 | | | | | | 0 | | |
| 3. Net investment income..... | 0 | | | | | | 0 | | |
| 4. Amortization of interest maintenance reserve (IMR)..... | 0 | | | | | | 0 | | |
| 5. Separate Accounts net gain from operations excluding unrealized gains or losses..... | 0 | | | | | | 0 | | |
| 6. Commissions and expense allowances on reinsurance ceded..... | 0 | | | | | | 0 | | |
| 7. Reserve adjustments on reinsurance ceded..... | 0 | | | | | | 0 | | |
| 8. Miscellaneous Income: | | | | | | | | | |
| 8.1 Fees associated with income from investment management, administration and contract guarantees from Separate Accounts..... | 0 | | | | | | 0 | | |
| 8.2 Charges and fees for deposit-type contracts..... | 0 | | | | | | 0 | | |
| 8.3 Aggregate write-ins for miscellaneous income..... | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 9. Totals (Lines 1 to 8.3)..... | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 10. Death benefits..... | 0 | | | | | | 0 | | |
| 11. Matured endowments..... | 0 | | | | | | 0 | | |
| 12. Annuity and old age benefits..... | 0 | | | | | | 0 | | |
| 13. Disability, accident and health benefits, including premiums waived \$.....0..... | 0 | | | | | | 0 | | |
| 14. Surrender benefits and withdrawals for life contracts..... | 0 | | | | | | 0 | | |
| 15. Interest and adjustments on contract or deposit-type contract funds..... | 0 | | | | | | 0 | | |
| 16. Payments on supplementary contracts with life contingencies..... | 0 | | | | | | 0 | | |
| 17. Increase in aggregate reserve for life and accident and health certificates and contracts..... | 0 | | | | | | 0 | | |
| 18. Totals (Lines 10 to 17)..... | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 19. Commissions on premiums and annuity considerations and deposit-type funds (direct business only)..... | 0 | | | | | | 0 | | |
| 20. Commissions and expense allowances on reinsurance assumed..... | 0 | | | | | | 0 | | |
| 21. General insurance expenses and fraternal expenses..... | 0 | | | | | | 0 | | |
| 22. Insurance taxes, licenses and fees..... | 0 | | | | | | 0 | | |
| 23. Increase in loading on deferred and uncollected premiums..... | 0 | | | | | | 0 | | |
| 24. Net transfers to or (from) Separate Accounts net of reinsurance..... | 0 | | | | | | 0 | | |
| 25. Aggregate write-ins for deductions..... | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 26. Totals (Lines 18 to 25)..... | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 27. Net gain from operations before refunds to members (Line 9 minus Line 26)..... | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 28. Refunds to members..... | 0 | | | | | | 0 | | |
| 29. Net gain from operations after refunds to members and before realized capital gains or (losses) (Line 27 minus Line 28)..... | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |

DETAILS OF WRITE-INS

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 08.301. | 0 | | | | | | 0 | | |
| 08.302. | 0 | | | | | | 0 | | |
| 08.303. | 0 | | | | | | 0 | | |
| 08.398. Summary of remaining write-ins for Item 8.3 from overflow page..... | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 08.399. Totals (Lines 08.301 thru 08.303 plus 08.398 above) (Line 8.3 above)..... | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 2501. | 0 | | | | | | 0 | | |
| 2502. | 0 | | | | | | 0 | | |
| 2503. | 0 | | | | | | 0 | | |
| 2598. Summary of remaining write-ins for Item 25 from overflow page..... | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 2599. Totals (Lines 2501 thru 2503 plus 2598 above) (Line 25 above)..... | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |

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ANALYSIS OF INCREASE IN RESERVES DURING THE YEAR

| | 1 Total | 2 Life Insurance | 3 Annuities | 4 Supplementary Contracts |
|---|------------|------------------------|----------------|---------------------------------|
| Involving Life or Disability Contingencies (Reserves) | | | | |
| (Net of Reinsurance Ceded) | | | | |
| 1. Reserve December 31, prior year..... | 0 | | | |
| 2. Tabular net premiums or considerations..... | 0 | | | |
| 3. Present value of disability claims incurred..... | 0 | | | .XXX |
| 4. Tabular interest..... | 0 | | | |
| 5. Tabular less actual reserve released..... | 0 | | | |
| 6. Increase in reserve on account of change in valuation basis..... | 0 | | | |
| 7. Other increases (net)..... | 0 | | | |
| 8. Totals (Lines 1 to 7)..... | 0 | 0 | 0 | 0 |
| 9. Tabular cost..... | 0 | | | .XXX |
| 10. Reserves released by death..... | 0 | | .XXX | .XXX |
| 11. Reserves released by other terminations (net)..... | 0 | | | |
| 12. Annuity, supplementary contract and disability payments involving life contingencies..... | 0 | | | |
| 13. Net transfers to or (from) separate accounts..... | 0 | | | |
| 14. Total deductions (Lines 9 to 13)..... | 0 | 0 | 0 | 0 |
| 15. Reserve December 31, current year..... | 0 | 0 | 0 | 0 |

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EXHIBIT OF NET INVESTMENT INCOME

| | 1 Collected During Year | 2 Earned During Year |
|--|-------------------------------|----------------------------|
| 1. U.S. government bonds..... | (a)..... | |
| 1.1 Bonds exempt from U.S. tax..... | (a)..... | |
| 1.2 Other bonds (unaffiliated)..... | (a)..... | |
| 1.3 Bonds of affiliates..... | (a)..... | |
| 2.1 Preferred stocks (unaffiliated)..... | (b)..... | |
| 2.11 Preferred stocks of affiliates..... | (b)..... | |
| 2.2 Common stocks (unaffiliated)..... | | |
| 2.21 Common stocks of affiliates..... | | |
| 3. Mortgage loans..... | (c)..... | |
| 4. Real estate..... | (d)..... | |
| 5. Contract loans..... | | |
| 6. Cash, cash equivalents and short-term investments..... | (e)..... | |
| 7. Derivative instruments..... | (f)..... | |
| 8. Other invested assets..... | | |
| 9. Aggregate write-ins for investment income..... | .0 | .0 |
| 10. Total gross investment income..... | .0 | .0 |
| 11. Investment expenses..... | | (g)..... |
| 12. Investment taxes, licenses and fees, excluding federal income taxes..... | | (g)..... |
| 13. Interest expense..... | | (h)..... |
| 14. Depreciation on real estate and other invested assets..... | | (i).....0 |
| 15. Aggregate write-ins for deductions from investment income..... | | .0 |
| 16. Total deductions (Lines 11 through 15)..... | | .0 |
| 17. Net investment income (Line 10 minus Line 16)..... | | .0 |

DETAILS OF WRITE-INS

| | | |
|--|----|----|
| 0901. | | |
| 0902. | | |
| 0903. | | |
| 0998. Summary of remaining write-ins for Line 9 from overflow page..... | .0 | .0 |
| 0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9 above)..... | .0 | .0 |
| 1501. | | |
| 1502. | | |
| 1503. | | |
| 1598. Summary of remaining write-ins for Line 15 from overflow page..... | | .0 |
| 1599. Totals (Lines 1501 thru 1503 plus 1598) (Line 15 above)..... | | .0 |

- (a) Includes \$.....0 accrual of discount less \$.....0 amortization of premium and less \$.....0 paid for accrued interest on purchases.
- (b) Includes \$.....0 accrual of discount less \$.....0 amortization of premium and less \$.....0 paid for accrued dividends on purchases.
- (c) Includes \$.....0 accrual of discount less \$.....0 amortization of premium and less \$.....0 paid for accrued interest on purchases.
- (d) Includes \$.....0 for company's occupancy of its own buildings; and excludes \$.....0 interest on encumbrances.
- (e) Includes \$.....0 accrual of discount less \$.....0 amortization of premium and less \$.....0 paid for accrued interest on purchases.
- (f) Includes \$.....0 accrual of discount less \$.....0 amortization of premium.
- (g) Includes \$.....0 investment expenses and \$.....0 investment taxes, licenses and fees, excluding federal income taxes, attributable to Segregated and Separate Accounts.
- (h) Includes \$.....0 interest on surplus notes and \$.....0 interest on capital notes.
- (i) Includes \$.....0 depreciation on real estate and \$.....0 depreciation on other invested assets.

EXHIBIT OF CAPITAL GAINS (LOSSES)

| | 1 Realized Gain (Loss) on Sales or Maturity | 2 Other Realized Adjustments | 3 Unrealized Increases (Decreases) by Adjustment | 4 Total |
|---|---|---------------------------------------|--|------------|
| 1. U.S. government bonds..... | | | | .0 |
| 1.1 Bonds exempt from U.S. tax..... | | | | .0 |
| 1.2 Other bonds (unaffiliated)..... | | | | .0 |
| 1.3 Bonds of affiliates..... | | | | .0 |
| 2.1 Preferred stocks (unaffiliated)..... | | | | .0 |
| 2.11 Preferred stocks of affiliates..... | | | | .0 |
| 2.2 Common stocks (unaffiliated)..... | | | | .0 |
| 2.21 Common stocks of affiliates..... | | | | .0 |
| 3. Mortgage loans..... | | | | .0 |
| 4. Real estate..... | | | | .0 |
| 5. Contract loans..... | | | | .0 |
| 6. Cash, cash equivalents and short-term investments..... | | | | .0 |
| 7. Derivative instruments..... | | | | .0 |
| 8. Other invested assets..... | | | | .0 |
| 9. Aggregate write-ins for capital gains (losses)..... | .0 | .0 | .0 | .0 |
| 10. Total capital gains (losses)..... | .0 | .0 | .0 | .0 |

DETAILS OF WRITE-INS

| | | | | |
|---|----|----|----|----|
| 0901. | | | | .0 |
| 0902. | | | | .0 |
| 0903. | | | | .0 |
| 0998. Summary of remaining write-ins for Line 9 from overflow page..... | .0 | .0 | .0 | .0 |
| 0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9 above)..... | .0 | .0 | .0 | .0 |

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

| | 1 | 2 | 3 | Insurance 4 | 5 | 6 | 7 | 8 |
|--|-------|-------------------|-------------------------|------------------------|---|--------------------------------|-----------|---------|
| | Total | Life Insurance | Individual Annuities | Accident and Health | Aggregate of All Other Lines of Business | Total (Columns 2 through 5) | Fraternal | Expense |
| FIRST YEAR (other than single) | | | | | | | | |
| 1. Uncollected..... | .0 | | | | | .0 | | |
| 2. Deferred and accrued..... | .0 | | | | | .0 | | |
| 3. Deferred, accrued & uncollected: | | | | | | | | |
| 3.1 Direct..... | .0 | | | | | .0 | | |
| 3.2 Reinsurance assumed..... | .0 | | | | | .0 | | |
| 3.3 Reinsurance ceded..... | .0 | | | | | .0 | | |
| 3.4 Net (Line 1 + Line 2)..... | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 4. Advance..... | .0 | | | | | .0 | | |
| 5. Line 3.4 - Line 4..... | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 6. Collected during year: | | | | | | | | |
| 6.1 Direct..... | .0 | | | | | .0 | | |
| 6.2 Reinsurance assumed..... | .0 | | | | | .0 | | |
| 6.3 Reinsurance ceded..... | .0 | | | | | .0 | | |
| 6.4 Net..... | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 7. Line 5 + Line 6.4..... | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 8. Prior year (uncollected + deferred and accrued - advance)..... | .0 | | | | | .0 | | |
| 9. First year premiums and considerations: | | | | | | | | |
| 9.1 Direct..... | .0 | | | | | .0 | | |
| 9.2 Reinsurance assumed..... | .0 | | | | | .0 | | |
| 9.3 Reinsurance ceded..... | .0 | | | | | .0 | | |
| 9.4 Net (Line 7 - Line 8)..... | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| SINGLE | | | | | | | | |
| 10. Single premiums and considerations: | | | | | | | | |
| 10.1 Direct..... | .0 | | | | | .0 | | |
| 10.2 Reinsurance assumed..... | .0 | | | | | .0 | | |
| 10.3 Reinsurance ceded..... | .0 | | | | | .0 | | |
| 10.4 Net..... | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| RENEWAL | | | | | | | | |
| 11. Uncollected..... | .0 | | | | | .0 | | |
| 12. Deferred and accrued..... | .0 | | | | | .0 | | |
| 13. Deferred, accrued & uncollected: | | | | | | | | |
| 13.1 Direct..... | .0 | | | | | .0 | | |
| 13.2 Reinsurance assumed..... | .0 | | | | | .0 | | |
| 13.3 Reinsurance ceded..... | .0 | | | | | .0 | | |
| 13.4 Net (Line 11 + Line 12)..... | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 14. Advance..... | .0 | | | | | .0 | | |
| 15. Line 13.4 - Line 14..... | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 16. Collected during year: | | | | | | | | |
| 16.1 Direct..... | .0 | | | | | .0 | | |
| 16.2 Reinsurance assumed..... | .0 | | | | | .0 | | |
| 16.3 Reinsurance ceded..... | .0 | | | | | .0 | | |
| 16.4 Net..... | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 17. Line 15 + Line 16.4..... | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 18. Prior year (uncollected + deferred and accrued - advance)..... | .0 | | | | | .0 | | |
| 19. Renewal premiums and considerations: | | | | | | | | |
| 19.1 Direct..... | .0 | | | | | .0 | | |
| 19.2 Reinsurance assumed..... | .0 | | | | | .0 | | |
| 19.3 Reinsurance ceded..... | .0 | | | | | .0 | | |
| 19.4 Net (Line 17 - Line 18)..... | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| TOTAL | | | | | | | | |
| 20. Total premiums and annuity considerations: | | | | | | | | |
| 20.1 Direct..... | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 20.2 Reinsurance assumed..... | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 20.3 Reinsurance ceded..... | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 20.4 Net (Lines 9.4 + 10.4 + 19.4)..... | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |

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EXHIBIT 1 - PART 2 - REFUNDS APPLIED, REINSURANCE COMMISSIONS AND EXPENSE ALLOWANCES AND COMMISSIONS INCURRED (direct business only)

| | 1 Total | Insurance | | | | 6 Total (Columns 2 through 5) | 7 Fraternal | 8 Expense |
|--|------------|---------------------|---------------------------|--------------------------|---|----------------------------------|----------------|--------------|
| | | 2 Life Insurance | 3 Individual Annuities | 4 Accident and Health | 5 Aggregate of All Other Lines of Business | | | |
| REFUNDS APPLIED (included in Part 1) | | | | | | | | |
| 21. To pay renewal premiums..... | .0 | | | | | .0 | | |
| 22. All other..... | .0 | | | | | .0 | | |
| REINSURANCE COMMISSIONS AND EXPENSE ALLOWANCES INCURRED | | | | | | | | |
| 23. First year (other than single): | | | | | | | | |
| 23.1 Reinsurance ceded..... | .0 | | | | | .0 | | |
| 23.2 Reinsurance assumed..... | .0 | | | | | .0 | | |
| 23.3 Net ceded less assumed..... | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 24. Single: | | | | | | | | |
| 24.1 Reinsurance ceded..... | .0 | | | | | .0 | | |
| 24.2 Reinsurance assumed..... | .0 | | | | | .0 | | |
| 24.3 Net ceded less assumed..... | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 25. Renewal: | | | | | | | | |
| 25.1 Reinsurance ceded..... | .0 | | | | | .0 | | |
| 25.2 Reinsurance assumed..... | .0 | | | | | .0 | | |
| 25.3 Net ceded less assumed..... | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 26. Totals: | | | | | | | | |
| 26.1 Reinsurance ceded (Page 6, Line 6)..... | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 26.2 Reinsurance assumed..... | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 26.3 Net ceded less assumed..... | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| COMMISSIONS INCURRED (direct business only) | | | | | | | | |
| 27. First year (other than single)..... | .0 | | | | | .0 | | |
| 28. Single..... | .0 | | | | | .0 | | |
| 29. Renewal..... | .0 | | | | | .0 | | |
| 30. Deposit-type contract funds..... | .0 | | | | | .0 | | |
| 31. Totals (to agree with Page 6, Line 19)..... | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |

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EXHIBIT 2 - GENERAL EXPENSES

| | Insurance | | | | 5 Investment | 6 Fraternal | 7 Total |
|--|-----------|--------------------------|-------------------|---|-----------------|----------------|------------|
| | 1 Life | Accident and Health | | 4 Aggregate of All Other Lines of Business | | | |
| | | 2 Cost Containment | 3 All Other | | | | |
| 1. Rent..... | | | | | | | .0 |
| 2. Salaries and wages..... | | | | | | | .0 |
| 3.11 Insured benefit plans for employees..... | | | | | | | .0 |
| 3.12 Insured benefit plans for fieldworkers..... | | | | | | | .0 |
| 3.21 Uninsured benefit plans for employees..... | | | | | | | .0 |
| 3.22 Uninsured benefit plans for fieldworkers..... | | | | | | | .0 |
| 3.31 Other employee welfare..... | | | | | | | .0 |
| 3.32 Other fieldworker welfare..... | | | | | | | .0 |
| 4.1 Legal fees and expenses..... | | | | | | | .0 |
| 4.2 Medical examination fees..... | | | | | | | .0 |
| 4.3 Inspection report fees..... | | | | | | | .0 |
| 4.4 Fees of public accountants and consulting actuaries..... | | | | | | | .0 |
| 4.5 Expense of investigation and settlement of certificate claims..... | | | | | | | .0 |
| 5.1 Traveling expenses..... | | | | | | | .0 |
| 5.2 Advertising..... | | | | | | | .0 |
| 5.3 Postage, express, telegraph and telephone..... | | | | | | | .0 |
| 5.4 Printing and stationery..... | | | | | | | .0 |
| 5.5 Cost or depreciation of furniture and equipment..... | | | | | | | .0 |
| 5.6 Rental of equipment..... | | | | | | | .0 |
| 5.7 Cost or depreciation of EDP equipment and software..... | | | | | | | .0 |
| 5.8 Lodge supplies less \$.00 from sales..... | | | | | | | .0 |
| 6.1 Books and periodicals..... | | | | | | | .0 |
| 6.2 Bureau and association dues..... | | | | | | | .0 |
| 6.3 Insurance, except on real estate..... | | | | | | | .0 |
| 6.4 Miscellaneous losses..... | | | | | | | .0 |
| 6.5 Collection and bank service charges..... | | | | | | | .0 |
| 6.6 Sundry general expenses..... | | | | | | | .0 |
| 7.1 Field expense allowance..... | | | | | | | .0 |
| 7.2 Fieldworkers' balances charged off (less \$.00 recovered)..... | | | | | | | .0 |
| 7.3 Field conferences other than local meetings..... | | | | | | | .0 |
| 8.1 Official publications..... | | | | | | | .0 |
| 8.2 Expense of Supreme Lodge Meetings..... | | | | | | | .0 |
| 9.1 Real estate expenses..... | | | | | | | .0 |
| 9.2 Investment expenses not included elsewhere..... | | | | | | | .0 |
| 9.3 Aggregate write-ins for expenses..... | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 10. General Expenses Incurred..... | .0 | .0 | .0 | .0 | .0 | (a).....0 | (b).....0 |
| 11. General expenses unpaid December 31, prior year..... | | | | | | | .0 |
| 12. General expenses unpaid December 31, current year..... | | | | | | | .0 |
| 13. General expenses paid during year (Lines 10 + 11 - 12)..... | .0 | .0 | .0 | .0 | .0 | .0 | .0 |

DETAILS OF WRITE-INS

| | | | | | | | |
|--|----|----|----|----|----|----|----|
| 09.301..... | | | | | | | .0 |
| 09.302..... | | | | | | | .0 |
| 09.303..... | | | | | | | .0 |
| 09.398 Summary of remaining write-ins for Line 9.3 from overflow page..... | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 09.399 Totals (Lines 09.301 thru 09.303 plus 09.398)(Line 9.3 above)..... | .0 | .0 | .0 | .0 | .0 | .0 | .0 |

(a) Show the distribution of this amount in the following categories:
 1. Charitable \$.....0; 2. Institutional \$.....0; 3. Recreational and Health \$.....0; 4. Educational \$.....0
 5. Religious \$.....0; 6. Membership \$.....0; 7. Other \$.....0; 8. Total \$.....0

(b) Includes management fees of \$.....0 to affiliates and \$.....0 to non-affiliates.

EXHIBIT 3 - TAXES, LICENSES AND FEES

| | Insurance | | | 4 Investment | 5 Fraternal | 6 Total |
|---|-----------|-----------------------------|---|-----------------|----------------|------------|
| | 1 Life | Accident and Health | | | | |
| | | 2 Accident and Health | 3 Aggregate of All Other Lines of Business | | | |
| 1. Real estate taxes..... | | | | | | .0 |
| 2. State insurance department licenses and fees..... | | | | | | .0 |
| 3. Other state taxes, including \$.00 for employee benefits..... | | | | | | .0 |
| 4. U.S. Social Security taxes..... | | | | | | .0 |
| 5. All other taxes..... | | | | | | .0 |
| 6. Taxes, licenses and fees Incurred..... | .0 | .0 | .0 | .0 | .0 | .0 |
| 7. Taxes, licenses and fees unpaid December 31, prior year..... | | | | | | .0 |
| 8. Taxes, licenses and fees unpaid December 31, current year..... | | | | | | .0 |
| 9. Taxes, licenses and fees paid during year (Lines 6 + 7 - 8)..... | .0 | .0 | .0 | .0 | .0 | .0 |

EXHIBIT 4 - DIVIDENDS OR REFUNDS

| | 1 Life | 2 Accident and Health |
|--|---|--------------------------|
| | 1. Applied to pay renewal premiums..... | |
| 2. Applied to shorten the endowment or premium-paying period..... | | |
| 3. Applied to provide paid-up additions..... | | |
| 4. Applied to provide paid-up annuities..... | | |
| 5. Total (Lines 1 to 4)..... | .0 | .0 |
| 6. Paid-in cash..... | | |
| 7. Left on deposit..... | | |
| 8. Aggregate write-ins for dividend or refund..... | .0 | .0 |
| 9. Total (Lines 5 to 8)..... | .0 | .0 |
| 10. Amount due and unpaid..... | | |
| 11. Provision for dividends or refunds payable in the following calendar year..... | | |
| 12. Terminal dividends..... | | |
| 13. Provision for deferred dividend contracts..... | | |
| 14. Amount provisionally held for deferred dividend contracts not included in Line 13..... | | |
| 15. Total (Lines 10 through 14)..... | .0 | .0 |
| 16. Total from prior year..... | | |
| 17. Total dividends or refunds (Line 9 + 15 - 16)..... | .0 | .0 |

DETAILS OF WRITE-INS

| | | |
|---|----|----|
| 0801..... | | |
| 0802..... | | |
| 0803..... | | |
| 0898. Summary of remaining write-ins for Line 8 from overflow page..... | .0 | .0 |
| 0899. Totals (Line 0801 thru 0803 plus 0898) (Line 8 above)..... | .0 | .0 |

EXHIBIT 5 - AGGREGATE RESERVE FOR LIFE CONTRACTS

| 1 Valuation Standard | 2 Total | 3 Industrial | 4 Ordinary | 5 Credit (Group and Individual) | 6 Group |
|-------------------------|------------|-----------------|---------------|---------------------------------------|------------|
|-------------------------|------------|-----------------|---------------|---------------------------------------|------------|



EXHIBIT 5 - INTERROGATORIES

- | | |
|--|--|
| 1.1 Has the reporting entity ever issued both participating and non-participating contracts? | Yes [<input type="checkbox"/>] No [<input type="checkbox"/>] |
| 1.2 If not, state which kind is issued..... | |
| 2.1 Does the reporting entity at present issue both participating and non-participating contracts? | Yes [<input type="checkbox"/>] No [<input type="checkbox"/>] |
| 2.2 If not, state which kind is issued..... | |
| 3. Does the reporting entity at present issue or have in force policies that contain non-guaranteed elements? If so, attach a statement that contains the determination procedures, answers to the interrogatories and an actuarial opinion as described in the instructions. | Yes [<input type="checkbox"/>] No [<input type="checkbox"/>] |
| 4. Has the reporting entity any assessment or stipulated premium contracts in force? If so, state: | |
| 4.1 Amount of insurance? | Yes [<input type="checkbox"/>] No [<input type="checkbox"/>] |
| 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 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? | |
| 6.1 If so, state the amount of reserve on such contracts on the basis actually held: | Yes [<input type="checkbox"/>] No [<input type="checkbox"/>] |
| 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: Attach statement of methods employed in their valuation. | \$..... |
| 7. Does the reporting entity have any Synthetic GIC policies, contracts or agreements in effect as of December 31 of the current year? | Yes [<input type="checkbox"/>] No [<input type="checkbox"/>] |
| 7.1 If yes, state the total dollar amount of assets covered by these policies, 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. | |

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

| 1 Description of Valuation Class | Valuation Basis | | 4 Increase in Actuarial Reserve Due To Change |
|-------------------------------------|-------------------|-----------------|--|
| | 2 Changed From | 3 Changed To | |
| | | | |

EXHIBIT 6 - AGGREGATE RESERVES FOR ACCIDENT AND HEALTH CONTRACTS

| | 1 Total | 2 Collectively Renewable | Other Individual Contracts | | | | 7 All Other |
|---|------------|--------------------------------|----------------------------|------------------------------|--|--------------------------------|----------------|
| | | | 3 Non- Cancelable | 4 Guaranteed Renewable | 5 Non-Renewable for Stated Reasons Only | 6 Other Accident Only | |
| ACTIVE LIFE RESERVE | | | | | | | |
| 1. Unearned premium reserves..... | .0 | | | | | | |
| 2. Additional contract reserves (a)..... | .0 | | | | | | |
| 3. Additional actuarial reserves-Asset/Liability analysis..... | .0 | | | | | | |
| 4. Reserve for future contingent benefits..... | .0 | | | | | | |
| 5. Aggregate write-ins for reserves..... | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 6. Totals (Gross)..... | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 7. Reinsurance ceded..... | .0 | | | | | | |
| 8. Totals (Net)..... | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| CLAIM RESERVE | | | | | | | |
| 9. Present value of amounts not yet due on claims..... | .0 | | | | | | |
| 10. Additional actuarial reserves-Asset/Liability analysis..... | .0 | | | | | | |
| 11. Reserve for future contingent benefits..... | .0 | | | | | | |
| 12. Aggregate write-ins for reserves..... | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 13. Totals (Gross)..... | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 14. Reinsurance ceded..... | .0 | | | | | | |
| 15. Totals (Net)..... | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 16. TOTAL (Net)..... | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 17. TABULAR FUND INTEREST..... | .0 | | | | | | |

DETAILS OF WRITE-INS

| | | | | | | | |
|---|----|----|----|----|----|----|----|
| 0501. | .0 | | | | | | |
| 0502. | .0 | | | | | | |
| 0503. | .0 | | | | | | |
| 0598. Summary of remaining write-ins for Line 5 from overflow page..... | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 0599. Totals (Lines 0501 thru 0503 + 0598) (Line 5 above) | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 1201. | .0 | | | | | | |
| 1202. | .0 | | | | | | |
| 1203. | .0 | | | | | | |
| 1298. Summary of remaining write-ins for Line 12 from overflow page..... | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 1299. Totals (Lines 1201 thru 1203 + 1298) (Line 12 above) | .0 | .0 | .0 | .0 | .0 | .0 | .0 |

(a) Attach statement as to valuation standard used in calculating this reserve, specify reserve bases, interest rates and method.

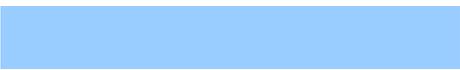


EXHIBIT 7 - DEPOSIT-TYPE CONTRACTS

| | 1 Total | 2 Guaranteed Interest Contracts | 3 Annuities Certain | 4 Supplemental Contracts | 5 Dividend Accumulations or Refunds | 6 Premium and Other Deposit Funds |
|--|------------|--|---------------------------|--------------------------------|--|--|
| 1. Balance at beginning of the year before reinsurance..... | .0 | | | | | |
| 2. Deposits received during the year..... | .0 | | | | | |
| 3. Investment earnings credited to the account..... | .0 | | | | | |
| 4. Other net change in reserves..... | .0 | | | | | |
| 5. Fees and other charges assessed..... | .0 | | | | | |
| 6. Surrender charges..... | .0 | | | | | |
| 7. Net surrender or withdrawal payments..... | .0 | | | | | |
| 8. Other net transfers to or (from) Separate Accounts..... | .0 | | | | | |
| 9. Balance at the end of the current year before reinsurance (Lines 1 + 2 + 3 + 4 - 5 - 6 - 7 - 8)..... | .0 | .0 | .0 | .0 | .0 | .0 |
| 10. Reinsurance balance at the beginning of the year..... | .0 | | | | | |
| 11. Net change in reinsurance assumed..... | .0 | | | | | |
| 12. Net change in reinsurance ceded..... | .0 | | | | | |
| 13. Reinsurance balance at the end of the year (Lines 10 + 11 - 12)..... | .0 | .0 | .0 | .0 | .0 | .0 |
| 14. Net balance at the end of current year after reinsurance (Lines 9 + 13).... | .0 | .0 | .0 | .0 | .0 | .0 |



EXHIBIT 8 - CLAIMS FOR LIFE AND ACCIDENT AND HEALTH CONTRACTS

PART 1 - Liability End of Current Year

| | 1 Total | 2 Industrial Life | Ordinary | | | 6 Credit Life (Group and Individual) | Group | | Accident and Health | | |
|-------------------------------|------------|-------------------------|------------------------|------------------------------|---------------------------------|---|------------------------|----------------|---------------------|---|-------------|
| | | | 3 Life Insurance | 4 Individual Annuities | 5 Supplementary Contracts | | 7 Life Insurance | 8 Annuities | 9 Group | 10 Credit (Group and Individual) | 11 Other |
| 1. Due and unpaid: | | | | | | | | | | | |
| 1.1 Direct..... | 0 | | | | | | | | | | |
| 1.2 Reinsurance assumed..... | 0 | | | | | | | | | | |
| 1.3 Reinsurance ceded..... | 0 | | | | | | | | | | |
| 1.4 Net..... | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 2. In course of settlement: | | | | | | | | | | | |
| 2.1 Resisted: | | | | | | | | | | | |
| 2.11 Direct..... | 0 | | | | | | | | | | |
| 2.12 Reinsurance assumed..... | 0 | | | | | | | | | | |
| 2.13 Reinsurance ceded..... | 0 | | | | | | | | | | |
| 2.14 Net..... | 0 | 0 | (b) 0 | (b) 0 | 0 | (b) 0 | (b) 0 | 0 | 0 | 0 | 0 |
| 2.2 Other: | | | | | | | | | | | |
| 2.21 Direct..... | 0 | | | | | | | | | | |
| 2.22 Reinsurance assumed..... | 0 | | | | | | | | | | |
| 2.23 Reinsurance ceded..... | 0 | | | | | | | | | | |
| 2.24 Net..... | 0 | 0 | (b) 0 | (b) 0 | 0 | (b) 0 | (b) 0 | 0 | (b) 0 | (b) 0 | 0 |
| 3. Incurred but unreported: | | | | | | | | | | | |
| 3.1 Direct..... | 0 | | | | | | | | | | |
| 3.2 Reinsurance assumed..... | 0 | | | | | | | | | | |
| 3.3 Reinsurance ceded..... | 0 | | | | | | | | | | |
| 3.4 Net..... | 0 | 0 | (b) 0 | (b) 0 | 0 | (b) 0 | (b) 0 | 0 | (b) 0 | (b) 0 | 0 |
| 4. Totals: | | | | | | | | | | | |
| 4.1 Direct..... | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 4.2 Reinsurance assumed..... | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 4.3 Reinsurance ceded..... | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 4.4 Net..... | 0 | (a) 0 | (a) 0 | 0 | 0 | 0 | (a) 0 | 0 | 0 | 0 | 0 |

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(a) Including matured endowments (but not guaranteed annual pure endowments) unpaid amounting to \$.....0 in Column 2, \$.....0 in Column 3 and \$.....0 in Column 7.

(b) Include only portion of disability and accident and health claim liabilities applicable to assumed "accrued" benefits. Reserves (including reinsurance assumed and net of reinsurance ceded) for unaccrued benefits for Ordinary Life Insurance \$.....0, Individual Annuities \$.....0, Credit Life (Group and Individual) \$.....0, and Group Life \$.....0, are included in Page 3, Line 1, (See Exhibit 5, Section on Disability Disabled Lives); and for Group Accident and Health \$.....0, Credit (Group and Individual) Accident and Health \$.....0 and Other Accident and Health \$.....0 are included in Page 3, Line 2, (See Exhibit 6, Claim Reserve).



EXHIBIT 8 - CONTRACT CLAIMS FOR LIFE AND ACCIDENT AND HEALTH CONTRACTS

PART 2 - Incurred During the Year

| | 1 Total | 2 Industrial Life (a) | 3 Ordinary | | 6 Credit Life (Group and Individual) | 7 Group | | 9 Group | 10 Accident and Health | |
|---|------------|--------------------------------|-------------------------------|------------------------------|---|---------------------------------|-------------------------------|------------|------------------------|---|
| | | | 3 Life Insurance (b) | 4 Individual Annuities | | 5 Supplementary Contracts | 7 Life Insurance (c) | | 8 Annuities | 10 Credit (Group and Individual) | 11 Other |
| 1. Settlements during the year: | | | | | | | | | | |
| 1.1 Direct..... | .0 | | | | | | | | | |
| 1.2 Reinsurance assumed..... | .0 | | | | | | | | | |
| 1.3 Reinsurance ceded..... | .0 | | | | | | | | | |
| 1.4 Net..... (d) | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 2. Liability December 31, current year from Part 1: | | | | | | | | | | |
| 2.1 Direct..... | .0 | | | | | | | | | |
| 2.2 Reinsurance assumed..... | .0 | | | | | | | | | |
| 2.3 Reinsurance ceded..... | .0 | | | | | | | | | |
| 2.4 Net..... | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 3. Amounts recoverable from reinsurers December 31, current year..... | .0 | | | | | | | | | |
| 4. Liability December 31, prior year: | | | | | | | | | | |
| 4.1 Direct..... | .0 | | | | | | | | | |
| 4.2 Reinsurance assumed..... | .0 | | | | | | | | | |
| 4.3 Reinsurance ceded..... | .0 | | | | | | | | | |
| 4.4 Net..... | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 5. Amounts recoverable from reinsurers December 31, prior year..... | .0 | | | | | | | | | |
| 6. Incurred benefits: | | | | | | | | | | |
| 6.1 Direct..... | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 6.2 Reinsurance assumed..... | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 6.3 Reinsurance ceded..... | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 6.4 Net..... | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |

(a) Including matured endowments (but not guaranteed annual pure endowments) amounting to \$.0 in Line 1.1, \$.0 in Line 1.4, \$.0 in Line 6.1 and \$.0 in line 6.4.

(b) Including matured endowments (but not guaranteed annual pure endowments) amounting to \$.0 in Line 1.1, \$.0 in Line 1.4, \$.0 in Line 6.1 and \$.0 in line 6.4.

(c) Including matured endowments (but not guaranteed annual pure endowments) amounting to \$.0 in Line 1.1, \$.0 in Line 1.4, \$.0 in Line 6.1 and \$.0 in line 6.4.

(d) Includes \$.0 premiums waived under total and permanent disability benefits.



EXHIBIT OF NONADMITTED ASSETS

| | 1 Current Year Total Nonadmitted Assets | 2 Prior Year Total Nonadmitted Assets | 3 Change in Total Nonadmitted Assets (Col. 2 - Col. 1) |
|---|--|--|---|
| 1. Bonds (Schedule D)..... | | | .0 |
| 2. Stocks (Schedule D): | | | |
| 2.1 Preferred stocks..... | | | .0 |
| 2.2 Common stocks..... | | | .0 |
| 3. Mortgage loans on real estate (Schedule B): | | | |
| 3.1 First liens..... | | | .0 |
| 3.2 Other than first liens..... | | | .0 |
| 4. Real estate (Schedule A): | | | |
| 4.1 Properties occupied by the company..... | | | .0 |
| 4.2 Properties held for the production of income..... | | | .0 |
| 4.3 Properties held for sale..... | | | .0 |
| 5. Cash (Schedule E-Part 1), cash equivalents (Schedule E-Part 2) and short-term investments (Schedule DA)..... | | | .0 |
| 6. Contract loans..... | | | .0 |
| 7. Other invested assets (Schedule BA)..... | | | .0 |
| 8. Receivables for securities..... | | | .0 |
| 9. Aggregate write-ins for invested assets..... | | | .0 |
| 10. Subtotals, cash and invested assets (Lines 1 to 9)..... | | | .0 |
| 11. Title plants (for Title insurers only)..... | | | .0 |
| 12. Investment income due and accrued..... | | | .0 |
| 13. Premiums and considerations: | | | |
| 13.1 Uncollected premiums and agents' balances in the course of collection..... | | | .0 |
| 13.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due..... | | | .0 |
| 13.3 Accrued retrospective premiums..... | | | .0 |
| 14. Reinsurance: | | | |
| 14.1 Amounts recoverable from reinsurers..... | | | .0 |
| 14.2 Funds held by or deposited with reinsured companies..... | | | .0 |
| 14.3 Other amounts receivable under reinsurance contracts..... | | | .0 |
| 15. Amounts receivable relating to uninsured plans..... | | | .0 |
| 16.1 Current federal and foreign income tax recoverable and interest thereon..... | | | .0 |
| 16.2 Net deferred tax asset..... | | | .0 |
| 17. Guaranty funds receivable or on deposit..... | | | .0 |
| 18. Electronic data processing equipment and software..... | | | .0 |
| 19. Furniture and equipment, including health care delivery assets..... | | | .0 |
| 20. Net adjustment in assets and liabilities due to foreign exchange rates..... | | | .0 |
| 21. Receivable from parent, subsidiaries and affiliates..... | | | .0 |
| 22. Health care and other amounts receivable..... | | | .0 |
| 23. Aggregate write-ins for other than invested assets..... | | | .0 |
| 24. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 10 through 23)..... | | | .0 |
| 25. From Separate Accounts, Segregated Accounts and Protected Cell Accounts..... | | | .0 |
| 26. TOTALS (Lines 24 and 25)..... | | | .0 |

DETAILS OF WRITE-INS

| | | | |
|--|----|----|----|
| 0901..... | | | .0 |
| 0902..... | | | .0 |
| 0903..... | | | .0 |
| 0998. Summary of remaining write-ins for Line 9 from overflow page..... | .0 | .0 | .0 |
| 0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9 above)..... | .0 | .0 | .0 |
| 2301..... | | | .0 |
| 2302..... | | | .0 |
| 2303..... | | | .0 |
| 2398. Summary of remaining write-ins for Line 23 from overflow page..... | .0 | .0 | .0 |
| 2399. Totals (Lines 2301 thru 2303 plus 2398) (Line 23 above)..... | .0 | .0 | .0 |



NOTES TO FINANCIAL STATEMENTS

SUMMARY INVESTMENT SCHEDULE

| Investment Categories | Gross Investment Holdings | | Admitted Assets as Reported in the Annual Statement | |
|--|---------------------------|-----------------|---|-----------------|
| | 1 Amount | 2 Percentage | 3 Amount | 4 Percentage |
| 1. Bonds: | | | | |
| 1.1 U.S. treasury securities..... | | 0.0 | | 0.0 |
| 1.2 U.S. government agency obligations (excluding mortgage-backed securities): | | | | |
| 1.21 Issued by U.S. government agencies..... | | 0.0 | | 0.0 |
| 1.22 Issued by U.S. government sponsored agencies..... | | 0.0 | | 0.0 |
| 1.3 Foreign government (including Canada, excluding mortgage-backed securities)..... | | 0.0 | | 0.0 |
| 1.4 Securities issued by states, territories and possessions and political subdivisions in the U.S.: | | | | |
| 1.41 States, territories and possessions general obligations..... | | 0.0 | | 0.0 |
| 1.42 Political subdivisions of states, territories & possessions & political subdivisions general obligations..... | | 0.0 | | 0.0 |
| 1.43 Revenue and assessment obligations..... | | 0.0 | | 0.0 |
| 1.44 Industrial development and similar obligations..... | | 0.0 | | 0.0 |
| 1.5 Mortgage-backed securities (includes residential and commercial MBS): | | | | |
| 1.51 Pass-through securities: | | | | |
| 1.511 Issued or guaranteed by GNMA..... | | 0.0 | | 0.0 |
| 1.512 Issued or guaranteed by FNMA and FHLMC..... | | 0.0 | | 0.0 |
| 1.513 All other..... | | 0.0 | | 0.0 |
| 1.52 CMOs and REMICs: | | | | |
| 1.521 Issued or guaranteed by GNMA, FNMA, FHLMC or VA..... | | 0.0 | | 0.0 |
| 1.522 Issued by non-U.S. Government issuers and collateralized by mortgage-backed securities issued or guaranteed by agencies shown in Line 1.521..... | | 0.0 | | 0.0 |
| 1.523 All other..... | | 0.0 | | 0.0 |
| 2. Other debt and other fixed income securities (excluding short-term): | | | | |
| 2.1 Unaffiliated domestic securities (includes credit tenant loans rated by the SVO)..... | | 0.0 | | 0.0 |
| 2.2 Unaffiliated foreign securities..... | | 0.0 | | 0.0 |
| 2.3 Affiliated securities..... | | 0.0 | | 0.0 |
| 3. Equity interests: | | | | |
| 3.1 Investments in mutual funds..... | | 0.0 | | 0.0 |
| 3.2 Preferred stocks: | | | | |
| 3.21 Affiliated..... | | 0.0 | | 0.0 |
| 3.22 Unaffiliated..... | | 0.0 | | 0.0 |
| 3.3 Publicly traded equity securities (excluding preferred stocks): | | | | |
| 3.31 Affiliated..... | | 0.0 | | 0.0 |
| 3.32 Unaffiliated..... | | 0.0 | | 0.0 |
| 3.4 Other equity securities: | | | | |
| 3.41 Affiliated..... | | 0.0 | | 0.0 |
| 3.42 Unaffiliated..... | | 0.0 | | 0.0 |
| 3.5 Other equity interests including tangible personal property under lease: | | | | |
| 3.51 Affiliated..... | | 0.0 | | 0.0 |
| 3.52 Unaffiliated..... | | 0.0 | | 0.0 |
| 4. Mortgage loans: | | | | |
| 4.1 Construction and land development..... | | 0.0 | | 0.0 |
| 4.2 Agricultural..... | | 0.0 | | 0.0 |
| 4.3 Single family residential properties..... | | 0.0 | | 0.0 |
| 4.4 Multifamily residential properties..... | | 0.0 | | 0.0 |
| 4.5 Commercial loans..... | | 0.0 | | 0.0 |
| 4.6 Mezzanine real estate loans..... | | 0.0 | | 0.0 |
| 5. Real estate investments: | | | | |
| 5.1 Property occupied by company..... | | 0.0 | | 0.0 |
| 5.2 Property held for production of income (including \$.....0 of property acquired in satisfaction of debt)..... | | 0.0 | | 0.0 |
| 5.3 Property held for sale (including \$.....0 property acquired in satisfaction of debt)..... | | 0.0 | | 0.0 |
| 6. Contract loans..... | | 0.0 | | 0.0 |
| 7. Receivables for securities..... | | 0.0 | | 0.0 |
| 8. Cash, cash equivalents and short-term investments..... | | 0.0 | | 0.0 |
| 9. Other invested assets..... | | 0.0 | | 0.0 |
| 10. Total invested assets..... | 0 | 0.0 | 0 | 0.0 |

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

1.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? Yes [] No []

1.2 If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations? Yes [] No [] N/A []

1.3 State regulating? _____

2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? Yes [] No []

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. _____

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. _____

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). _____

3.4 By what department or departments? _____

4.1 During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under a common control (other than salaried employees of the reporting entity) receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:

4.11 sales of new business? Yes [] No []

4.12 renewals? Yes [] No []

4.2 During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:

4.21 sales of new business? Yes [] No []

4.22 renewals? Yes [] No []

5.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? Yes [] No []

5.2 If yes, provide the name of the entity, NAIC company code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

| 1 Name of Entity | 2 NAIC Co. Code | 3 State of Domicile |
|---------------------|--------------------|------------------------|
| | | |

6.1 Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? Yes [] No []

6.2 If yes, give full information: _____

7.1 Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity? Yes [] No []

7.2 If yes,%

7.21 State the percentage of foreign control. _____

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

| 1 Nationality | 2 Type of Entity |
|------------------|---------------------|
| | |

8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board? Yes [] No []

8.2 If response to 8.1 is yes, please identify the name of the bank holding company. _____

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

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

| 1 Affiliate Name | 2 Location (City, State) | 3 FRB | 4 OCC | 5 OTS | 6 FDIC | 7 SEC |
|---------------------|-----------------------------|----------|----------|----------|-----------|----------|
| | | | | | | |

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

10. What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification? _____

11.1 Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly? Yes [] No []

11.11 Name of real estate holding company _____

11.12 Number of parcels involved

11.13 Total book/adjusted carrying value

11.2 If yes, provide explanation. _____

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

12. FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:

12.1 What changes have been made during the year in the United States manager or the United States trustees of the reporting entity?

12.2 Does this statement contain all business transacted for the reporting entity through its United States Branch on risks wherever located?

Yes [] No []

12.3 Have there been any changes made to any of the trust indentures during the year?

Yes [] No []

12.4 If answer to (12.3) is yes, has the domiciliary or entry state approved the changes?

Yes [] No [] N/A []

BOARD OF DIRECTORS

13. Is the purchase or sale of all investments of the reporting entity passed upon either by the Board of Directors or a subordinate committee thereof?

Yes [] No []

14. Does the reporting entity keep a complete permanent record of the proceedings of its Board of Directors and all subordinate committees thereof?

Yes [] No []

15. Has the reporting entity an established procedure for disclosure to its Board of Directors or trustees of any material interest or affiliation on the part of any of its officers, directors, trustees or responsible employees that is in conflict or is likely to conflict with the official duties of such person?

Yes [] No []

FINANCIAL

16.1 Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans):

16.11 To directors or other officers

\$.....0

16.12 To stockholders not officers

\$.....0

16.13 Trustees, supreme or grand (Fraternal only)

\$.....0

16.2 Total amount of loans outstanding at the end of year (inclusive of Separate Accounts, exclusive of policy loans):

16.21 To directors or other officers

\$.....0

16.22 To stockholders not officers

\$.....0

16.23 Trustees, supreme or grand (Fraternal only)

\$.....0

17.1 Were any assets reported in this statement subject to a contractual obligation to transfer to another party without the liability for such obligation being reported in the statement?

Yes [] No []

17.2 If yes, state the amount thereof at December 31 of the current year:

17.21 Rented from others

.....

17.22 Borrowed from others

.....

17.23 Leased from others

.....

17.24 Other

.....

18.1 Does this statement include payments for assessments as described in the Annual Statement Instructions other than guaranty fund or guaranty association assessments?

Yes [] No []

18.2 If answer is yes:

18.21 Amount paid as losses or risk adjustment

.....

18.22 Amount paid as expenses

.....

18.23 Other amounts paid

.....

19.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement?

Yes [] No []

19.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount.

.....

INVESTMENT

20.1 Were all the stocks, bonds and other securities owned December 31 of current year, over which the reporting entity has exclusive control, in the actual possession of the reporting entity on said date, except as shown by Schedule E-Part 3-Special Deposits?

Yes [] No []

20.2 If no, give full and complete information relating thereto.

21.1 Were any of the stocks, bonds or other assets of the reporting entity owned at December 31 of the current year not exclusively under the control of the reporting entity, except as shown on Schedule E-Part 3-Special Deposits, or has the reporting entity sold or transferred any assets subject to a put option contract that is currently in force? (Exclude securities subject to Interrogatory 17.1)

Yes [] No []

21.2 If yes, state the amount thereof at December 31 of the current year:

21.21 Loaned to others

.....

21.22 Subject to repurchase agreements

.....

21.23 Subject to reverse repurchase agreements

.....

21.24 Subject to dollar repurchase agreements

.....

21.25 Subject to reverse dollar repurchase agreements

.....

21.26 Pledged as collateral

.....

21.27 Placed under option agreements

.....

21.28 Letter stock or securities restricted as to sale

.....

21.29 Other

.....

21.3 For category (21.28) provide the following:

| 1 Nature of Restriction | 2 Description | 3 Amount |
|----------------------------|------------------|-------------|
| | | |

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

Yes [] No []

22.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state?

Yes [] No [] N/A []

If no, attach a description with this statement.

23.1 Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into equity, or, at the option of the issuer, convertible into equity?

Yes [] No []

23.2 If yes, state the amount thereof at December 31 of the current year:

.....

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

24. Excluding items in Schedule E, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Part 1-General, Section IV.H-Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook? Yes [] No []

24.01 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 |
|---------------------------|--------------------------|
| | |

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

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

24.03 Have there been any changes, including name changes, in the custodian(s) identified in 24.01 during the current year? Yes [] No []

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

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

24.05 Identify all investment advisors, brokers/dealers or individuals acting on behalf of broker/dealers that have access to the investment accounts, handle securities and have authority to make investments on behalf of the reporting entity:

| 1 Central Registration Depository Number(s) | 2 Name | 3 Address |
|--|-----------|--------------|
| | | |

25.1 Does the reporting entity have any diversified mutual funds reported in Schedule D, Part 2 (diversified according to the Securities and Exchange Commission (SEC) in the Investment Company Act of 1940 [Section 5(b)(1)])? Yes [] No []

25.2 If yes, complete the following schedule:

| 1 CUSIP # | 2 Name of Mutual Fund | 3 Book/Adj. Carrying Value |
|----------------|--------------------------|-------------------------------|
| | | |
| 25.2999. TOTAL | | 0 |

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

| 1 Name of Mutual Fund (from the above table) | 2 Name of Significant Holding of the Mutual Fund | 3 Amount of Mutual Fund's Book/Adjusted Carrying Value Attributable to Holding | 4 Date of Valuation |
|--|--|--|------------------------|
| | | | |

26. 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 Statement (Admitted) Value | 2 Fair Value | 3 Excess of Statement over Fair Value (-), or Fair Value over Statement (+) |
|----------------------------|---------------------------------------|--------------------|---|
| 26.1 Bonds..... |0 | |0 |
| 26.2 Preferred stocks..... | | |0 |
| 26.3 Totals..... |0 |0 |0 |

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

27.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Securities Valuation Office been followed? Yes [] No []

27.2 If no, list exceptions:

OTHER

28.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any? \$.....0

28.2 List the name of the organization and the amount paid if any such payment represented 25% or more of the total payments to trade associations, service organizations and statistical or rating bureaus during the period covered by this statement.

| 1 Name | 2 Amount Paid |
|-----------|------------------|
| | |

29.1 Amount of payments for legal expenses, if any? \$.....0

29.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payments for legal expenses during the period covered by this statement.

| 1 Name | 2 Amount Paid |
|-----------|------------------|
| | |

30.1 Amount of payments for expenditures in connection with matters before legislative bodies, officers or departments of government, if any? \$.....0

30.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payment expenditures in connection with matters before legislative bodies, officers or departments of government during the period covered by this statement.

| 1 Name | 2 Amount Paid |
|-----------|------------------|
| | |

GENERAL INTERROGATORIES

PART 2 - FRATERNAL INTERROGATORIES

| | |
|---|------------------------|
| 1.1 Does the reporting entity have any direct Medicare Supplement Insurance in force? | Yes [] No [] |
| 1.2 If yes, indicate premium earned on U.S. business only | ..... |
| 1.3 What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit? | ..... |
| 1.31 Reason for excluding | |
| | |
| | |
| 1.4 Indicate amount of earned premium attributable to Canadian and/or Other Alien not included in Item (1.2) above. | ..... |
| 1.5 Indicate total incurred claims on all Medicare Supplement insurance. | ..... |
| 1.6 Individual policies: | |
| Most current three years: | |
| 1.61 Total premium earned | ..... |
| 1.62 Total incurred claims | ..... |
| 1.63 Number of covered lives | ..... |
| All years prior to most current three years: | |
| 1.64 Total premium earned | ..... |
| 1.65 Total incurred claims | ..... |
| 1.66 Number of covered lives | ..... |
| 1.7 Group policies: | |
| Most current three years: | |
| 1.71 Total premium earned | ..... |
| 1.72 Total incurred claims | ..... |
| 1.73 Number of covered lives | ..... |
| All years prior to most current three years: | |
| 1.74 Total premium earned | ..... |
| 1.75 Total incurred claims | ..... |
| 1.76 Number of covered lives | ..... |
| 2.1 Does this reporting entity have Separate Accounts? | Yes [] No [] |
| 2.2 If yes, has a Separate Accounts statement been filed with this Department? | Yes [] No [] N/A [] |
| 2.3 What portion of capital and surplus funds of the reporting entity covered by assets in the Separate Accounts statement, is not currently distributable from the Separate Accounts to the general account for use by the general account? | ..... |
| 2.4 State the authority under which Separate Accounts are maintained: | |
| | |
| | |
| 2.5 Was any of the reporting entity's Separate Accounts business reinsured as of December 31? | Yes [] No [] |
| 2.6 Has the reporting entity assumed by reinsurance any Separate Accounts business as of December 31? | Yes [] No [] |
| 2.7 If the reporting entity has assumed Separate Accounts business, how much, if any, reinsurance assumed receivable for reinsurance of Separate Accounts reserve expense allowances is included as a negative amount in the liability for "Transfers to Separate Accounts due or accrued (net)?" | ..... |
| 3. Is the reporting entity organized and conducted on the lodge system, with ritualistic form of work and representative form of government? | Yes [] No [] |
| 4. How often are meetings of the subordinate branches required to be held? | |
| | |
| 5. How are the subordinate branches represented in the supreme or governing body? | |
| | |
| 6. What is the basis of representation in the governing body? | |
| | |
| 7.1 How often are regular meetings of the governing body held? | |
| | |
| 7.2 When was the last regular meeting of the governing body held? | |
| | |
| 7.3 When and where will the next regular or special meeting of the governing body be held? | |
| | |
| 7.4 How many members of the governing body attended the last regular meeting? |0 |
| 7.5 How many of the same were delegates of the subordinate branches? |0 |
| 8. How are the expenses of the governing body defrayed? | |
| | |
| 9. When and by whom are the officers and directors elected? | |
| | |
| 10. What are the qualifications for membership? | |
| | |
| 11. What are the limiting ages for admission? | |
| | |
| 12. What is the minimum and maximum insurance that may be issued on any one life? | |
| | |
| 13. Is a medical examination required before issuing a benefit certificate to applicants? | Yes [] No [] |
| 14. Are applicants admitted to membership without filing an application with and becoming a member of a local branch by ballot and initiation? | Yes [] No [] |
| 15.1 Are notices of the payments required sent to the members? | Yes [] No [] N/A [] |
| 15.2 If yes, do the notices state the purpose for which the money is to be used? | Yes [] No [] |
| 16. What proportion of first and subsequent years' payments may be used for management expenses? | |
| 16.11 First year |0.0 % |
| 16.12 Subsequent years |0.0 % |
| 17.1 Is any part of the mortuary, disability, emergency or reserve fund, or the accretions from or payments for the same, used for expenses? | Yes [] No [] |
| 17.2 If so, what amount and for what purpose? | ..... |
| | |
| | |

GENERAL INTERROGATORIES

PART 2 - FRATERNAL INTERROGATORIES

- 18.1 Does the reporting entity pay an old age disability benefit? Yes [] No []
- 18.2 If yes, at what age does the benefit commence?
- 19.1 Has the constitution or have the laws of the reporting entity been amended during the year? Yes [] No []
- 19.2 If yes, when?

.....

20. Have you filed with this Department all forms of benefit certificates issued, a copy of the constitution and of all the laws, rules and regulations in force at the present time? If not, please do so. Yes [] No []

- 21.1 State whether all or a portion of the regular insurance contributions were waived during the current year under premium-paying certificates on account of meeting attained age or membership requirements? Yes [] No []

- 21.2 If so, was an additional reserve included in Exhibit 5? Yes [] No [] N/A []

21.3 If yes, explain

- 22.1 Has the reporting entity reinsured, amalgamated with, or absorbed any company, order, society, or association during the year? Yes [] No []

- 22.2 If yes, was there any contract agreement, or understanding, written or oral, expressed or implied, by means of which any officer, director, trustee, or any other person, or firm, corporation, society or association, received or is to receive any fee, commission, emolument, or compensation of any nature whatsoever in connection with, or on account of such reinsurance, amalgamation, absorption, or transfer of membership or funds? Yes [] No [] N/A []

23. Has any present or former officer, director, trustee, incorporator, or any other persons, or any firm, corporation, society or association, any claims of any nature whatsoever against this reporting entity, which is not included in the liabilities on Page 3 of this statement? Yes [] No []

- 24.1 Does the company have variable annuities with guaranteed benefits? Yes [] No []

24.2 If 24.1 is yes, complete the following table for each type of guaranteed benefit.

| Type | | 3 Waiting Period Remaining | 4 Account Value Related to Col. 3 | 5 Total Related Account Values | 6 Gross Amount of Reserve | 7 Location of Reserve | 8 Portion Reinsured | 9 Reinsurance Reserve Credit |
|----------------------------------|-----------------------------------|-------------------------------------|--|---|---------------------------------|-----------------------------|---------------------------|------------------------------------|
| 1 Guaranteed Death Benefit | 2 Guaranteed Living Benefit | | | | | | | |
| | | | | | | | | |



FIVE-YEAR HISTORICAL DATA

Show amounts in whole dollars only, no cents; show percentages to one decimal place, i.e. 17.6.
Amounts of life insurance in this exhibit should be shown in thousands (omit 000).

| | 1 2006 | 2 2005 | 3 2004 | 4 2003 | 5 2002 |
|---|-----------|-----------|-----------|-----------|-----------|
| Life Insurance in Force (Exhibit of Life Insurance) | | | | | |
| 1. Total (Line 21, Column 2)..... | | | | | |
| New Business Issued (Exhibit of Life Insurance) | | | | | |
| 2. Total (Line 2, Column 2)..... | | | | | |
| Premium Income (Exhibit 1, Part 1) | | | | | |
| 3. Life insurance - first year (Line 9.4, Column 2)..... | | | | | |
| 4. Life insurance - single and renewal (Lines 10.4 and 19.4, Column 2)..... | | | | | |
| 5. Annuity (Line 20.4, Column 3)..... | | | | | |
| 6. Accident and health (Line 20.4, Column 4)..... | | | | | |
| 7. Aggregate of all other lines of business (Line 20.4, Column 5)..... | | | | | |
| 8. Total (Line 20.4, Column 1)..... | | | | | |
| Balance Sheet Items (Pages 2 and 3) | | | | | |
| 9. Total admitted assets excluding Separate Accounts business (Page 2, Line 24, Col. 3)..... | | | | | |
| 10. Total liabilities excluding Separate Accounts business (Page 3, Line 23)..... | | | | | |
| 11. Aggregate reserve for life certificates and contracts (Page 3, Line 1)..... | | | | | |
| 12. Aggregate reserve for accident and health certificates (Page 3, Line 2)..... | | | | | |
| 13. Deposit-type contract funds (Page 3, Line 3)..... | | | | | |
| 14. Asset valuation reserve (Page 3, Line 21.1)..... | | | | | |
| 15. Surplus (Page 3, Line 30)..... | | | | | |
| Risk-Based Capital Analysis | | | | | |
| 16. Total Adjusted Capital..... | | | | | |
| 17. 50% of the Calculated RBC Amount..... | | | | | |
| Percentage Distribution of Cash, Cash Equivalent and Invested Assets (Page 2, Col. 3) (Line No. ÷ Page 2, Line 10, Col. 3) x 100.0 | | | | | |
| 18. Bonds (Line 1)..... | | | | | |
| 19. Stocks (Lines 2.1 and 2.2)..... | | | | | |
| 20. Mortgage loans on real estate (Lines 3.1 and 3.2)..... | | | | | |
| 21. Real estate (Lines 4.1, 4.2 and 4.3)..... | | | | | |
| 22. Cash, cash equivalents and short-term investments (Line 5)..... | | | | | |
| 23. Contract loans (Line 6)..... | | | | | |
| 24. Other invested assets (Line 7)..... | | | | | |
| 25. Receivable for securities (Line 8)..... | | | | | |
| 26. Aggregate write-ins for invested assets (Line 9)..... | | | | | |
| 27. Cash, cash equivalents and invested assets (Line 10)..... | .00 | .00 | .00 | .00 | .00 |
| Investments in Subsidiaries and Affiliates | | | | | |
| 28. Affiliated bonds (Schedule D Summary, Line 25, Col. 1)..... | | | | | |
| 29. Affiliated preferred stock (Schedule D Summary, Line 39, Col. 1)..... | | | | | |
| 30. Affiliated common stock (Schedule D Summary, Line 53, Col. 2)..... | | | | | |
| 31. Affiliated short-term investments (subtotals included in Sch. DA, Part 2, Col. 5, Line 11)..... | | | | | |
| 32. Affiliated mortgage loans on real estate..... | | | | | |
| 33. All other affiliated..... | | | | | |
| 34. Total of above Lines 28 to 33..... | 0 | 0 | 0 | 0 | 0 |
| Total Nonadmitted Assets and Admitted Assets | | | | | |
| 35. Total nonadmitted assets (Page 2, Line 26, Col. 2)..... | | | | | |
| 36. Total admitted assets (Page 2, Line 26, Col. 3)..... | | | | | |
| Investment Data | | | | | |
| 37. Net investment income (Exhibit of Net Investment Income, Line 17)..... | | | | | |
| 38. Realized capital gains (losses), net of tax and before IMR transfer..... | | | | | |
| 39. Unrealized capital gains (losses)..... | | | | | |
| 40. Total of above Lines 37, 38 and 39..... | 0 | 0 | 0 | 0 | 0 |



FIVE-YEAR HISTORICAL DATA

(Continued)

| | 1 2006 | 2 2005 | 3 2004 | 4 2003 | 5 2002 |
|--|-----------|-----------|-----------|-----------|-----------|
| Benefits and Reserve Increases (Page 6) | | | | | |
| 41. Total Certificate Benefits - Life (Lines 10, 11, 12, 13 and 14, Column 7 less Line 13, Column 5)..... | | | | | |
| 42. Total Certificate Benefits - Accident and Health (Line 13, Column 5)..... | | | | | |
| 43. Increase in Life Reserves (Line 17, Column 2)..... | | | | | |
| 44. Increase in Accident and Health Reserves (Line 17, Column 5)..... | | | | | |
| 45. Refunds to Members (Line 28, Column 1)..... | | | | | |
| Operating Percentages | | | | | |
| 46. Insurance Expense Percent (Page 6, Column 1, Lines 19, 20 and 21 less Line 6, Column 1) ÷ (Page 6 Column 1, Line 1) x 100.0..... | | | | | |
| 47. Lapse Percent [(Exhibit of Life Insurance, Column 2, Lines 14 and 15) ÷ 1/2 (Column 2, Lines 1 and 21)] x 100.0..... | | | | | |
| 48. Accident and Health Loss Percent (Schedule H, Part 1, Lines 5 and 6, Column 2)..... | | | | | |
| 49. A&H cost containment percent (Schedule H, Part 1, Line 4, Column 2)..... | | | | ...XXX... | ...XXX... |
| 50. Accident and Health Expense Percent Excluding Cost Containment Expenses (Schedule H, Part 1, Line 10, Column 2)..... | | | | | |
| Accident and Health Reserve Adequacy | | | | | |
| 51. Incurred Losses on Prior Years' Claims (Schedule H, Part 3, Line 3.1, Column 1)..... | | | | | |
| 52. Prior Years' Liability and Reserve (Schedule H, Part 3, Line 3.2, Column 1)..... | | | | | |
| Net Gains from Operations After Refunds to Members by Lines of Business (Page 6, Line 29) | | | | | |
| 53. Life Insurance (Column 2)..... | | | | | |
| 54. Annuity (Column 3)..... | | | | | |
| 55. Supplementary Contracts (Column 4)..... | | | | | |
| 56. Accident and Health (Column 5)..... | | | | | |
| 57. Aggregate of All Other Lines of Business (Column 6)..... | | | | | |
| 58. Fraternal (Column 8)..... | | | | | |
| 59. Expense (Column 9)..... | | | | | |
| 60. Total (Column 1)..... | | | | | |





LIFE INSURANCE

DIRECT BUSINESS IN THE STATE OF ALABAMA DURING THE YEAR

NAIC Group Code....0

NAIC Society Code....55301

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | 1 Life and Annuities |
|---|--|-------------------------|
| 1. Life insurance..... | | |
| 2. Annuity considerations..... | | |
| 3. Deposit-type contract funds..... | | |
| 4. Other considerations..... | | |
| 5. Total (Lines 1 to 4)..... | | 0 |
| DIRECT 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 Total (Sum of Lines 6.1 to 6.4)..... | | 0 |
| Annuities: | | |
| 7.1 Paid in cash or left on deposit..... | | |
| 7.2 Applied to provide paid-up annuities..... | | |
| 7.3 Other..... | | |
| 7.4 Total (Sum of Lines 7.1 to 7.3)..... | | 0 |
| 8. Total (Line 6.5 plus Line 7.4)..... | | 0 |
| DIRECT CLAIMS AND BENEFITS PAID | | |
| 9. Death benefits..... | | |
| 10. Matured endowments..... | | |
| 11. Annuity benefits..... | | |
| 12. Surrender values and withdrawals for life contracts..... | | |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid..... | | 0 |
| 14. All other benefits, except accident & health..... | | |
| 15. Total..... | | 0 |

DETAILS OF WRITE-INS

| | |
|--|---|
| 1301. | |
| 1302. | |
| 1303. | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page..... | 0 |
| 1399. Totals (Items 1301 thru 1303 plus 1398) (Line 13 above)..... | 0 |

| DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | 1 | 2 |
|--|------------------------|--------|
| | Number of Certificates | 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 Total paid..... | 0 | 0 |
| 18.4 Reduction by compromise..... | | |
| 18.5 Amount rejected..... | | |
| 18.6 Total settlements..... | 0 | 0 |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)..... | 0 | 0 |
| 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, current year..... | 0 | 0 |

ACCIDENT AND HEALTH INSURANCE

| | 1 | 2 | 3 | 4 | 5 |
|---|-----------------|------------------------|---|--------------------|------------------------|
| | Direct Premiums | Direct Premiums Earned | Refunds Paid or Credited on Direct Business | Direct Losses Paid | Direct Losses Incurred |
| 24. Collectively Renewable Certificates..... | | | | | |
| Other Individual Certificates: | | | | | |
| 25.1 Non-cancelable..... | | | | | |
| 25.2 Guaranteed renewable..... | | | | | |
| 25.3 Non-renewable for stated reasons only..... | | | | | |
| 25.4 Other accident only..... | | | | | |
| 25.5 All Other..... | | | | | |
| 25.6 Totals (sum of Lines 25.1 to 25.5)..... | 0 | 0 | 0 | 0 | 0 |
| 26. Totals (Line 24 + 25.6)..... | 0 | 0 | 0 | 0 | 0 |

EXHIBIT OF LIFE INSURANCE

| | 1 Number of Certificates | 2 Amount of Insurance (a) |
|---|--------------------------------|---------------------------------|
| 1. In force end of prior year..... | | |
| 2. Issued during year..... | | |
| 3. Reinsurance assumed..... | | |
| 4. Revived during year..... | | |
| 5. Increased during year (net)..... | | |
| 6. Subtotals, Lines 2 to 5..... | 0 | 0 |
| 7. Additions by refunds during year..... | XXX | |
| 8. Aggregate write-ins for increases..... | 0 | 0 |
| 9. Totals (Line 1 plus Line 6 to Line 8)..... | 0 | 0 |
| Deductions During Year: | | |
| 10. Death..... | | |
| 11. Maturity..... | | |
| 12. Disability..... | | |
| 13. Expiry..... | | |
| 14. Surrender..... | | |
| 15. Lapse..... | | |
| 16. Conversion..... | | |
| 17. Decreased (net)..... | | |
| 18. Reinsurance..... | | |
| 19. Aggregate write-ins for decreases..... | 0 | 0 |
| 20. Totals (Lines 10 to 19)..... | 0 | 0 |
| 21. In force end of year (b) (Line 9 minus 20)..... | 0 | 0 |
| 22. Reinsurance ceded end of year..... | XXX | |
| 23. Line 21 minus Line 22..... | XXX | 0 |

DETAILS OF WRITE-INS

| | | |
|--|---|---|
| 0801..... | | |
| 0802..... | | |
| 0803..... | | |
| 0898. Summary of remaining write-ins for Line 8 from overflow page..... | 0 | 0 |
| 0899. Totals (Lines 0801 thru 0803 plus 0898) (Line 8 above)..... | 0 | 0 |
| 1901..... | | |
| 1902..... | | |
| 1903..... | | |
| 1998. Summary of remaining write-ins for Line 19 from overflow page..... | 0 | 0 |
| 1999. Totals (Lines 1901 thru 1903 plus 1998) (Line 19 above)..... | 0 | 0 |

(a) Amounts of life insurance in this exhibit shall be shown in thousands (omit 000).

(b) Paid-up insurance included in the final totals of Line 21 (including additions to certificates), number of certificates.....0, Amount, \$.....0.

Additional accidental death benefits included in life certificates were in amount, \$.....0. Does the society collect any contributions from members for general expenses of the society under fully paid-up certificates? Yes [] No []
If not, how are such expenses met?.....

EXHIBIT OF NUMBERS OF CERTIFICATES FOR SUPPLEMENTARY CONTRACTS, ANNUITIES AND ACCIDENT AND HEALTH INSURANCE

| | 1 Supplementary Contracts (Involving Life Contingencies) | 2 Supplementary Contracts (Not Involving Life Contingencies) | 3 Individual Annuities | 4 Accident & Health Insurance |
|---|--|--|------------------------------|--|
| 1. In force end of prior year..... | | | | |
| 2. Issued during year..... | | | | |
| 3. Reinsurance assumed..... | | | | |
| 4. Increased during year (net)..... | | | | |
| 5. TOTALS (Lines 1 to 4)..... | 0 | 0 | 0 | 0 |
| Deduction during year: | | | | |
| 6. Decreased during year (net)..... | | | | |
| 7. Reinsurance ceded..... | | | | |
| 8. TOTALS (Lines 6 and 7)..... | 0 | 0 | 0 | 0 |
| 9. In force end of year (Line 5 minus Line 8)..... | 0 | 0 | 0 | 0 |
| 10. Amount on deposit..... | | | | XXX |
| Income now payable: | | | | |
| 11. Amount of income payable..... | | | | XXX |
| Deferred: fully paid: | | | | |
| 12. Deferred: fully paid - account balance..... | XXX | XXX | | XXX |
| Deferred: not fully paid: | | | | |
| 13. Deferred: not fully paid - account balance..... | XXX | XXX | | XXX |

FORM FOR CALCULATING THE INTEREST MAINTENANCE RESERVE

Interest Maintenance Reserve

| | 1 Amount |
|--|-------------|
| 1. Reserve as of December 31, prior year..... | |
| 2. Current year's realized pre-tax capital gains/(losses) of \$.....0 transferred into the reserve net of taxes of \$.....0..... | |
| 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)..... | 0 |
| 5. Current year's amortization released to Summary of Operations (Amortization, Line 1, Column 4)..... | |
| 6. Reserve as of December 31, current year (Line 4 minus Line 5)..... | 0 |

Amortization

| Year of Amortization | 1 Reserve as of December 31, Prior Year | 2 Current Year's Realized Capital Gains/(Losses) Transferred into the Reserve Net of Taxes | 3 Adjustment for Current Year's Liability Gains/(Losses) Released from the Reserve | 4 Balance Before Reduction for the Current Year's Amortization (Cols. 1 + 2 + 3) |
|--------------------------------|--|---|---|---|
| 1. 2006..... | | | | 0 |
| 2. 2007..... | | | | 0 |
| 3. 2008..... | | | | 0 |
| 4. 2009..... | | | | 0 |
| 5. 2010..... | | | | 0 |
| 6. 2011..... | | | | 0 |
| 7. 2012..... | | | | 0 |
| 8. 2013..... | | | | 0 |
| 9. 2014..... | | | | 0 |
| 10. 2015..... | | | | 0 |
| 11. 2016..... | | | | 0 |
| 12. 2017..... | | | | 0 |
| 13. 2018..... | | | | 0 |
| 14. 2019..... | | | | 0 |
| 15. 2020..... | | | | 0 |
| 16. 2021..... | | | | 0 |
| 17. 2022..... | | | | 0 |
| 18. 2023..... | | | | 0 |
| 19. 2024..... | | | | 0 |
| 20. 2025..... | | | | 0 |
| 21. 2026..... | | | | 0 |
| 22. 2027..... | | | | 0 |
| 23. 2028..... | | | | 0 |
| 24. 2029..... | | | | 0 |
| 25. 2030..... | | | | 0 |
| 26. 2031..... | | | | 0 |
| 27. 2032..... | | | | 0 |
| 28. 2033..... | | | | 0 |
| 29. 2034..... | | | | 0 |
| 30. 2035..... | | | | 0 |
| 31. 2036 and Later..... | | | | 0 |
| 32. Total (Lines 1 to 31)..... | 0 | 0 | 0 | 0 |



ASSET VALUATION RESERVE

| | Default Component | | | Equity Component | | | 7 Total Amount (Cols. 3 + 6) |
|--|--------------------------------------|------------------------|-----------------------------|----------------------|--|-----------------------------|---------------------------------------|
| | 1 Other Than Mortgage Loans | 2 Mortgage Loans | 3 Total (Cols. 1 + 2) | 4 Common Stock | 5 Real Estate and Other Invested Assets | 6 Total (Cols. 4 + 5) | |
| 1. Reserve as of December 31, prior year..... | | | 0 | | | 0 | 0 |
| 2. Realized capital gains/(losses) net of taxes - General Account..... | | | 0 | | | 0 | 0 |
| 3. Realized capital gains/(losses) net of taxes - Separate Accounts..... | | | 0 | | | 0 | 0 |
| 4. Unrealized capital gains/(losses) - net of deferred taxes - General Account..... | | | 0 | | | 0 | 0 |
| 5. Unrealized capital gains/(losses) - net of deferred taxes - Separate Accounts..... | | | 0 | | | 0 | 0 |
| 6. Capital gains credited/(losses charged) to contract benefits, payments or reserves..... | | | 0 | | | 0 | 0 |
| 7. Basic contribution..... | | | 0 | | | 0 | 0 |
| 8. Accumulated balances (Lines 1 through 5, minus 6 plus 7)..... | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 9. Maximum reserve..... | | | 0 | | | 0 | 0 |
| 10. Reserve objective..... | | | 0 | | | 0 | 0 |
| 11. 20% of (Line 10 minus Line 8)..... | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 12. Balance before transfers (Lines 8 + 11)..... | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 13. Transfers..... | | | 0 | | | 0 | .XXX |
| 14. Voluntary contribution..... | | | 0 | | | 0 | 0 |
| 15. Adjustment down to maximum/up to zero..... | | | 0 | | | 0 | 0 |
| 16. Reserve as of December 31, current year (Lines 12 + 13 + 14 + 15)..... | 0 | 0 | 0 | 0 | 0 | 0 | 0 |

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ASSET VALUATION RESERVE

Basic Contribution, Reserve Objective and Maximum Reserve Calculations

Default Component

| Line Number | NAIC Designation | Description | 1 Book/Adjusted Carrying Value | 2 Reclassify Related Party Encumbrances | 3 Add Third Party Encumbrances | 4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3) | Basic Contribution | | Reserve Objective | | Maximum Reserve | |
|-------------------------|------------------|---|-----------------------------------|--|-----------------------------------|---|--------------------|---------------------------|-------------------|---------------------------|-----------------|----------------------------|
| | | | | | | | 5 Factor | 6 Amount (Cols. 4 x 5) | 7 Factor | 8 Amount (Cols. 4 x 7) | 9 Factor | 10 Amount (Cols. 4 x 9) |
| LONG-TERM BONDS | | | | | | | | | | | | |
| 1 | | Exempt obligations..... | | XXX | XXX | 0 | 0.0000 | 0 | 0.0000 | 0 | 0.0000 | 0 |
| 2 | 1 | Highest quality..... | | XXX | XXX | 0 | 0.0004 | 0 | 0.0023 | 0 | 0.0030 | 0 |
| 3 | 2 | High quality..... | | XXX | XXX | 0 | 0.0019 | 0 | 0.0058 | 0 | 0.0090 | 0 |
| 4 | 3 | Medium quality..... | | XXX | XXX | 0 | 0.0093 | 0 | 0.0230 | 0 | 0.0340 | 0 |
| 5 | 4 | Low quality..... | | XXX | XXX | 0 | 0.0213 | 0 | 0.0530 | 0 | 0.0750 | 0 |
| 6 | 5 | Lower quality..... | | XXX | XXX | 0 | 0.0432 | 0 | 0.1100 | 0 | 0.1700 | 0 |
| 7 | 6 | In or near default..... | | XXX | XXX | 0 | 0.0000 | 0 | 0.2000 | 0 | 0.2000 | 0 |
| 8 | | Total unrated multi-class securities acquired by conversion..... | | XXX | XXX | 0 | XXX | 0 | XXX | 0 | XXX | 0 |
| 9 | | Total bonds (sum of Lines 1 through 8) (Page 2, Line 1, Net admitted asset)..... | 0 | XXX | XXX | 0 | XXX | 0 | XXX | 0 | XXX | 0 |
| PREFERRED STOCKS | | | | | | | | | | | | |
| 10 | 1 | Highest quality..... | | XXX | XXX | 0 | 0.0004 | 0 | 0.0023 | 0 | 0.0030 | 0 |
| 11 | 2 | High quality..... | | XXX | XXX | 0 | 0.0019 | 0 | 0.0058 | 0 | 0.0090 | 0 |
| 12 | 3 | Medium quality..... | | XXX | XXX | 0 | 0.0093 | 0 | 0.0230 | 0 | 0.0340 | 0 |
| 13 | 4 | Low quality..... | | XXX | XXX | 0 | 0.0213 | 0 | 0.0530 | 0 | 0.0750 | 0 |
| 14 | 5 | Lower quality..... | | XXX | XXX | 0 | 0.0432 | 0 | 0.1100 | 0 | 0.1700 | 0 |
| 15 | 6 | In or near default..... | | XXX | XXX | 0 | 0.0000 | 0 | 0.2000 | 0 | 0.2000 | 0 |
| 16 | | Affiliated life with AVR..... | | XXX | XXX | 0 | 0.0000 | 0 | 0.0000 | 0 | 0.0000 | 0 |
| 17 | | Total preferred stocks (sum of Lines 10 through 16) (Page 2, Line 2.1, Net admitted asset)..... | 0 | XXX | XXX | 0 | XXX | 0 | XXX | 0 | XXX | 0 |
| SHORT-TERM BONDS | | | | | | | | | | | | |
| 18 | | Exempt obligations..... | | XXX | XXX | 0 | 0.0000 | 0 | 0.0000 | 0 | 0.0000 | 0 |
| 19 | 1 | Highest quality..... | | XXX | XXX | 0 | 0.0004 | 0 | 0.0023 | 0 | 0.0030 | 0 |
| 20 | 2 | High quality..... | | XXX | XXX | 0 | 0.0019 | 0 | 0.0058 | 0 | 0.0090 | 0 |
| 21 | 3 | Medium quality..... | | XXX | XXX | 0 | 0.0093 | 0 | 0.0230 | 0 | 0.0340 | 0 |
| 22 | 4 | Low quality..... | | XXX | XXX | 0 | 0.0213 | 0 | 0.0530 | 0 | 0.0750 | 0 |
| 23 | 5 | Lower quality..... | | XXX | XXX | 0 | 0.0432 | 0 | 0.1100 | 0 | 0.1700 | 0 |
| 24 | 6 | In or near default..... | | XXX | XXX | 0 | 0.0000 | 0 | 0.2000 | 0 | 0.2000 | 0 |
| 25 | | Total short-term bonds (sum of Lines 18 thru 24)..... | 0 | XXX | XXX | 0 | XXX | 0 | XXX | 0 | XXX | 0 |

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ASSET VALUATION RESERVE (continued)

Basic Contribution, Reserve Objective and Maximum Reserve Calculations

Default Component

| Line Number | NAIC Designation | Description | 1 Book/Adjusted Carrying Value | 2 Reclassify Related Party Encumbrances | 3 Add Third Party Encumbrances | 4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3) | Basic Contribution | | Reserve Objective | | Maximum Reserve | |
|-------------------------------|------------------|--|-----------------------------------|--|-----------------------------------|---|--------------------|---------------------------|-------------------|---------------------------|-----------------|----------------------------|
| | | | | | | | 5 Factor | 6 Amount (Cols. 4 x 5) | 7 Factor | 8 Amount (Cols. 4 x 7) | 9 Factor | 10 Amount (Cols. 4 x 9) |
| DERIVATIVE INSTRUMENTS | | | | | | | | | | | | |
| 26 | | Exchange-traded..... | | XXX | XXX | 0 | 0.0004 | 0 | 0.0023 | 0 | 0.0030 | 0 |
| 27 | 1 | Highest quality..... | | XXX | XXX | 0 | 0.0004 | 0 | 0.0023 | 0 | 0.0030 | 0 |
| 28 | 2 | High quality..... | | XXX | XXX | 0 | 0.0019 | 0 | 0.0058 | 0 | 0.0090 | 0 |
| 29 | 3 | Medium quality..... | | XXX | XXX | 0 | 0.0093 | 0 | 0.0230 | 0 | 0.0340 | 0 |
| 30 | 4 | Low quality..... | | XXX | XXX | 0 | 0.0213 | 0 | 0.0530 | 0 | 0.0750 | 0 |
| 31 | 5 | Lower quality..... | | XXX | XXX | 0 | 0.0432 | 0 | 0.1100 | 0 | 0.1700 | 0 |
| 32 | 6 | In or near default..... | | XXX | XXX | 0 | 0.0000 | 0 | 0.2000 | 0 | 0.2000 | 0 |
| 33 | | Total derivative instruments..... | 0 | XXX | XXX | 0 | XXX | 0 | XXX | 0 | XXX | 0 |
| 34 | | TOTAL (Lines 9 + 17 + 25 + 33)..... | 0 | XXX | XXX | 0 | XXX | 0 | XXX | 0 | XXX | 0 |
| MORTGAGE LOANS | | | | | | | | | | | | |
| In good standing: | | | | | | | | | | | | |
| 35 | | Farm mortgages..... | | | XXX | 0 | (a) | 0 | (a) | 0 | (a) | 0 |
| 36 | | Residential mortgages-insured or guaranteed..... | | | XXX | 0 | 0.0003 | 0 | 0.0006 | 0 | 0.0010 | 0 |
| 37 | | Residential mortgages-all other..... | | | XXX | 0 | 0.0013 | 0 | 0.0030 | 0 | 0.0040 | 0 |
| 38 | | Commercial mortgages-insured or guaranteed..... | | | XXX | 0 | 0.0003 | 0 | 0.0006 | 0 | 0.0010 | 0 |
| 39 | | Commercial mortgages-all other..... | | | XXX | 0 | (a) | 0 | (a) | 0 | (a) | 0 |
| 40 | | In good standing with restructured terms..... | | | XXX | 0 | (b) | 0 | (b) | 0 | (b) | 0 |
| Overdue, not in process: | | | | | | | | | | | | |
| 41 | | Farm mortgages..... | | | XXX | 0 | 0.0420 | 0 | 0.0760 | 0 | 0.1200 | 0 |
| 42 | | Residential mortgages-insured or guaranteed..... | | | XXX | 0 | 0.0005 | 0 | 0.0012 | 0 | 0.0020 | 0 |
| 43 | | Residential mortgages-all other..... | | | XXX | 0 | 0.0025 | 0 | 0.0058 | 0 | 0.0090 | 0 |
| 44 | | Commercial mortgages-insured or guaranteed..... | | | XXX | 0 | 0.0005 | 0 | 0.0012 | 0 | 0.0020 | 0 |
| 45 | | Commercial mortgages-all other..... | | | XXX | 0 | 0.0420 | 0 | 0.0760 | 0 | 0.1200 | 0 |
| In process of foreclosure: | | | | | | | | | | | | |
| 46 | | Farm mortgages..... | | | XXX | 0 | 0.0000 | 0 | 0.1700 | 0 | 0.1700 | 0 |
| 47 | | Residential mortgages-insured or guaranteed..... | | | XXX | 0 | 0.0000 | 0 | 0.0040 | 0 | 0.0040 | 0 |
| 48 | | Residential mortgages-all other..... | | | XXX | 0 | 0.0000 | 0 | 0.0130 | 0 | 0.0130 | 0 |
| 49 | | Commercial mortgages-insured or guaranteed..... | | | XXX | 0 | 0.0000 | 0 | 0.0040 | 0 | 0.0040 | 0 |
| 50 | | Commercial mortgages-all other..... | | | XXX | 0 | 0.0000 | 0 | 0.1700 | 0 | 0.1700 | 0 |
| 51 | | Total Schedule B mortgages (sum of Lines 35 through 50) (Page 2, Line 3, Net admitted asset)..... | 0 | 0 | XXX | 0 | XXX | 0 | XXX | 0 | XXX | 0 |
| 52 | | Schedule DA mortgages..... | | | XXX | 0 | (c) | 0 | (c) | 0 | (c) | 0 |
| 53 | | Total mortgage loans on real estate (Lines 51 + 52)..... | 0 | 0 | XXX | 0 | XXX | 0 | XXX | 0 | XXX | 0 |

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(a) Times the company's experience adjustment factor (EAF).

(b) Column 9 is the greater of 6.4% without any EAF adjustments or a company's EAF adjusted In Good Standing (IGS) factor plus 150 basis points. Columns 5 and 7 are 28% and 62% respectively of Column 9.

(c) Determined using the same factors and breakdowns used for directly owned mortgage loans.



ASSET VALUATION RESERVE

Basic Contribution, Reserve Objective and Maximum Reserve Calculations
Equity and Other Invested Asset Component

| Line Number | NAIC Designation | Description | 1 | 2 | 3 | 4 | Basic Contribution | | Reserve Objective | | Maximum Reserve | |
|---|------------------|---|------------------------------|---------------------------------------|------------------------------|--|--------------------|---------------------------|-------------------|---------------------------|-----------------|----------------------------|
| | | | Book/Adjusted Carrying Value | Reclassify Related Party Encumbrances | Add Third Party Encumbrances | Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3) | 5 Factor | 6 Amount (Cols. 4 x 5) | 7 Factor | 8 Amount (Cols. 4 x 7) | 9 Factor | 10 Amount (Cols. 4 x 9) |
| COMMON STOCK | | | | | | | | | | | | |
| 1 | | Unaffiliated public..... | | XXX | XXX | 0 | 0.0000 | 0 | (d)..... | 0 | (d)..... | 0 |
| 2 | | Unaffiliated private..... | | XXX | XXX | 0 | 0.0000 | 0 | 0.1600 | 0 | 0.1600 | 0 |
| 3 | | Federal Home Loan Bank..... | | XXX | XXX | 0 | 0.0000 | 0 | 0.0050 | 0 | 0.0080 | 0 |
| 4 | | Affiliated life with AVR..... | | XXX | XXX | 0 | 0.0000 | 0 | 0.0000 | 0 | 0.0000 | 0 |
| Affiliated Investment Subsidiary: | | | | | | | | | | | | |
| 5 | | Fixed income exempt obligations..... | | | | 0 | XXX | | XXX | | XXX | |
| 6 | | Fixed income highest quality..... | | | | 0 | XXX | | XXX | | XXX | |
| 7 | | Fixed income high quality..... | | | | 0 | XXX | | XXX | | XXX | |
| 8 | | Fixed income medium quality..... | | | | 0 | XXX | | XXX | | XXX | |
| 9 | | Fixed income low quality..... | | | | 0 | XXX | | XXX | | XXX | |
| 10 | | Fixed income lower quality..... | | | | 0 | XXX | | XXX | | XXX | |
| 11 | | Fixed income in or near default..... | | | | 0 | XXX | | XXX | | XXX | |
| 12 | | Unaffiliated common stock public..... | | | | 0 | 0.0000 | 0 | (d)..... | 0 | (d)..... | 0 |
| 13 | | Unaffiliated common stock private..... | | | | 0 | 0.0000 | 0 | 0.1600 | 0 | 0.1600 | 0 |
| 14 | | Mortgage loans..... | | | | 0 | (c)..... | 0 | (c)..... | 0 | (c)..... | 0 |
| 15 | | Real estate..... | | | | 0 | (e)..... | 0 | (e)..... | 0 | (e)..... | 0 |
| 16 | | Affiliated - certain other (see SVO Purposes and Procedures manual)..... | | XXX | XXX | 0 | 0.0000 | 0 | 0.1300 | 0 | 0.1300 | 0 |
| 17 | | Affiliated - all other..... | | XXX | XXX | 0 | 0.0000 | 0 | 0.1600 | 0 | 0.1600 | 0 |
| 18 | | Total common stock (sum of Lines 1 through 17) (Page 2, Line 2.2, Net admitted asset)..... | 0 | 0 | 0 | 0 | XXX | 0 | XXX | 0 | XXX | 0 |
| REAL ESTATE | | | | | | | | | | | | |
| 19 | | Home office property (General Account only)..... | | | | 0 | 0.0000 | 0 | 0.0750 | 0 | 0.0750 | 0 |
| 20 | | Investment properties..... | | | | 0 | 0.0000 | 0 | 0.0750 | 0 | 0.0750 | 0 |
| 21 | | Properties acquired in satisfaction of debt..... | | | | 0 | 0.0000 | 0 | 0.1100 | 0 | 0.1100 | 0 |
| 22 | | Total real estate (sum of Lines 19 through 21)..... | 0 | 0 | 0 | 0 | XXX | 0 | XXX | 0 | XXX | 0 |
| OTHER INVESTED ASSETS | | | | | | | | | | | | |
| INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF BONDS | | | | | | | | | | | | |
| 23 | | Exempt obligations..... | | XXX | XXX | 0 | 0.0000 | 0 | 0.0000 | 0 | 0.0000 | 0 |
| 24 | 1 | Highest quality..... | | XXX | XXX | 0 | 0.0004 | 0 | 0.0023 | 0 | 0.0030 | 0 |
| 25 | 2 | High quality..... | | XXX | XXX | 0 | 0.0019 | 0 | 0.0058 | 0 | 0.0090 | 0 |
| 26 | 3 | Medium quality..... | | XXX | XXX | 0 | 0.0093 | 0 | 0.0230 | 0 | 0.0340 | 0 |
| 27 | 4 | Low quality..... | | XXX | XXX | 0 | 0.0213 | 0 | 0.0530 | 0 | 0.0750 | 0 |
| 28 | 5 | Lower quality..... | | XXX | XXX | 0 | 0.0432 | 0 | 0.1100 | 0 | 0.1700 | 0 |
| 29 | 6 | In or near default..... | | XXX | XXX | 0 | 0.0000 | 0 | 0.2000 | 0 | 0.2000 | 0 |
| 30 | | Total with bond characteristics (sum of Lines 23 through 29)..... | 0 | XXX | XXX | 0 | XXX | 0 | XXX | 0 | XXX | 0 |

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ASSET VALUATION RESERVE (continued)

Basic Contribution, Reserve Objective and Maximum Reserve Calculations
Equity and Other Invested Asset Component

| Line Number | NAIC Designation | Description | 1 Book/Adjusted Carrying Value | 2 Reclassify Related Party Encumbrances | 3 Add Third Party Encumbrances | 4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3) | Basic Contribution | | Reserve Objective | | Maximum Reserve | |
|--|------------------|--|-----------------------------------|--|-----------------------------------|---|--------------------|---------------------------|-------------------|---------------------------|-----------------|----------------------------|
| | | | | | | | 5 Factor | 6 Amount (Cols. 4 x 5) | 7 Factor | 8 Amount (Cols. 4 x 7) | 9 Factor | 10 Amount (Cols. 4 x 9) |
| INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF PREFERRED STOCKS | | | | | | | | | | | | |
| 31 | 1 | Highest quality..... | | .XXX | .XXX | 0 | 0.0004 | 0 | 0.0023 | 0 | 0.0030 | 0 |
| 32 | 2 | High quality..... | | .XXX | .XXX | 0 | 0.0019 | 0 | 0.0058 | 0 | 0.0090 | 0 |
| 33 | 3 | Medium quality..... | | .XXX | .XXX | 0 | 0.0093 | 0 | 0.0230 | 0 | 0.0340 | 0 |
| 34 | 4 | Low quality..... | | .XXX | .XXX | 0 | 0.0213 | 0 | 0.0530 | 0 | 0.0750 | 0 |
| 35 | 5 | Lower quality..... | | .XXX | .XXX | 0 | 0.0432 | 0 | 0.1100 | 0 | 0.1700 | 0 |
| 36 | 6 | In or near default..... | | .XXX | .XXX | 0 | 0.0000 | 0 | 0.2000 | 0 | 0.2000 | 0 |
| 37 | | Affiliated life with AVR..... | | .XXX | .XXX | 0 | 0.0000 | 0 | 0.0000 | 0 | 0.0000 | 0 |
| 38 | | Total with preferred stock characteristics (sum of Lines 31 through 37)..... | 0 | .XXX | .XXX | 0 | .XXX | 0 | .XXX | 0 | .XXX | 0 |
| INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF MORTGAGE LOANS | | | | | | | | | | | | |
| In Good Standing: | | | | | | | | | | | | |
| 39 | | Farm mortgages..... | | | .XXX | 0 | (a) | 0 | (a) | 0 | (a) | 0 |
| 40 | | Residential mortgages-insured or guaranteed..... | | | .XXX | 0 | 0.0003 | 0 | 0.0006 | 0 | 0.0010 | 0 |
| 41 | | Residential mortgages-all other..... | | .XXX | .XXX | 0 | 0.0013 | 0 | 0.0030 | 0 | 0.0040 | 0 |
| 42 | | Commercial mortgages-insured or guaranteed..... | | | .XXX | 0 | 0.0003 | 0 | 0.0006 | 0 | 0.0010 | 0 |
| 43 | | Commercial mortgages-all other..... | | | .XXX | 0 | (a) | 0 | (a) | 0 | (a) | 0 |
| 44 | | In good standing with restructured terms..... | | | .XXX | 0 | (b) | 0 | (b) | 0 | (b) | 0 |
| Overdue, Not in Process: | | | | | | | | | | | | |
| 45 | | Farm mortgages..... | | | .XXX | 0 | 0.0420 | 0 | 0.0760 | 0 | 0.1200 | 0 |
| 46 | | Residential mortgages-insured or guaranteed..... | | | .XXX | 0 | 0.0005 | 0 | 0.0012 | 0 | 0.0020 | 0 |
| 47 | | Residential mortgages-all other..... | | | .XXX | 0 | 0.0025 | 0 | 0.0058 | 0 | 0.0090 | 0 |
| 48 | | Commercial mortgages-insured or guaranteed..... | | | .XXX | 0 | 0.0005 | 0 | 0.0012 | 0 | 0.0020 | 0 |
| 49 | | Commercial mortgages-all other..... | | | .XXX | 0 | 0.0420 | 0 | 0.0760 | 0 | 0.1200 | 0 |
| In Process of foreclosure: | | | | | | | | | | | | |
| 50 | | Farm mortgages..... | | | .XXX | 0 | 0.0000 | 0 | 0.1700 | 0 | 0.1700 | 0 |
| 51 | | Residential mortgages-insured or guaranteed..... | | | .XXX | 0 | 0.0000 | 0 | 0.0040 | 0 | 0.0040 | 0 |
| 52 | | Residential mortgages-all other..... | | | .XXX | 0 | 0.0000 | 0 | 0.0130 | 0 | 0.0130 | 0 |
| 53 | | Commercial mortgages-insured or guaranteed..... | | | .XXX | 0 | 0.0000 | 0 | 0.0040 | 0 | 0.0040 | 0 |
| 54 | | Commercial mortgages-all other..... | | | .XXX | 0 | 0.0000 | 0 | 0.1700 | 0 | 0.1700 | 0 |
| 55 | | Total with mortgage loan characteristics (sum of Lines 39 through 54)..... | 0 | 0 | .XXX | 0 | .XXX | 0 | .XXX | 0 | .XXX | 0 |

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ASSET VALUATION RESERVE (continued)

Basic Contribution, Reserve Objective and Maximum Reserve Calculations
Equity and Other Invested Asset Component

| Line Number | NAIC Designation | Description | 1 Book/Adjusted Carrying Value | 2 Reclassify Related Party Encumbrances | 3 Add Third Party Encumbrances | 4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3) | Basic Contribution | | Reserve Objective | | Maximum Reserve | |
|--|------------------|--|-----------------------------------|--|-----------------------------------|---|--------------------|---------------------------|-------------------|---------------------------|-----------------|----------------------------|
| | | | | | | | 5 Factor | 6 Amount (Cols. 4 x 5) | 7 Factor | 8 Amount (Cols. 4 x 7) | 9 Factor | 10 Amount (Cols. 4 x 9) |
| INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF COMMON STOCK | | | | | | | | | | | | |
| 56 | | Unaffiliated public..... | | XXX | XXX | 0 | 0.0000 | 0 | (d) | 0 | (d) | 0 |
| 57 | | Unaffiliated private..... | | XXX | XXX | 0 | 0.0000 | 0 | 0.1600 | 0 | 0.1600 | 0 |
| 58 | | Affiliated life with AVR..... | | XXX | XXX | 0 | 0.0000 | 0 | 0.0000 | 0 | 0.0000 | 0 |
| 59 | | Affiliated certain other (see SVO Purposes and Procedures manual)..... | | XXX | XXX | 0 | 0.0000 | 0 | 0.1300 | 0 | 0.1300 | 0 |
| 60 | | Affiliated other - all other..... | | XXX | XXX | 0 | 0.0000 | 0 | 0.1600 | 0 | 0.1600 | 0 |
| 61 | | Total with common stock characteristics (sum of Lines 56 through 60)..... | 0 | XXX | XXX | 0 | XXX | 0 | XXX | 0 | XXX | 0 |
| INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF REAL ESTATE | | | | | | | | | | | | |
| 62 | | Home office property (general account only)..... | | | | 0 | 0.0000 | 0 | 0.0750 | 0 | 0.0750 | 0 |
| 63 | | Investment properties..... | | | | 0 | 0.0000 | 0 | 0.0750 | 0 | 0.0750 | 0 |
| 64 | | Properties acquired in satisfaction of debt..... | | | | 0 | 0.0000 | 0 | 0.1100 | 0 | 0.1100 | 0 |
| 65 | | Total with real estate characteristics (Lines 62 through 64)..... | 0 | 0 | 0 | 0 | XXX | 0 | XXX | 0 | XXX | 0 |
| LOW INCOME HOUSING TAX CREDIT INVESTMENTS | | | | | | | | | | | | |
| 66 | | Guaranteed federal low income housing tax credit..... | | | | 0 | 0.0003 | 0 | 0.0006 | 0 | 0.0010 | 0 |
| 67 | | Non-guaranteed federal low income housing tax credit..... | | | | 0 | 0.0063 | 0 | 0.0120 | 0 | 0.0190 | 0 |
| 68 | | State low income housing tax credit..... | | | | 0 | 0.0273 | 0 | 0.0600 | 0 | 0.0975 | 0 |
| 69 | | All other low income housing tax credit..... | | | | 0 | 0.0273 | 0 | 0.0600 | 0 | 0.0975 | 0 |
| 70 | | Total low income housing tax credit (Lines 66 through 69)..... | 0 | 0 | 0 | 0 | XXX | 0 | XXX | 0 | XXX | 0 |
| ALL OTHER INVESTMENTS | | | | | | | | | | | | |
| 71 | | Other invested assets - Schedule BA..... | | XXX | | 0 | 0.0000 | 0 | 0.1300 | 0 | 0.1300 | 0 |
| 72 | | Other short-term invested assets - Schedule DA..... | | XXX | | 0 | 0.0000 | 0 | 0.1300 | 0 | 0.1300 | 0 |
| 73 | | Total all other (sum of Lines 71 + 72)..... | 0 | XXX | 0 | 0 | XXX | 0 | XXX | 0 | XXX | 0 |
| 74 | | Total other invested assets - Schedule BA & DA (Sum of Lines 30, 38, 55, 61, 65, 70 and 73)..... | 0 | 0 | 0 | 0 | XXX | 0 | XXX | 0 | XXX | 0 |

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- (a) Times the company's experience adjustment factor (EAF).
- (b) Column 9 is the greater of 6.4% without any EAF adjustments or a company's EAF adjusted In Good Standing (IGS) factor plus 150 basis points. Columns 5 and 7 are 28% and 62% respectively of Column 9.
- (c) Determined using the same factors and breakdowns used for directly owned mortgage loans.
- (d) Times the company's weighted average portfolio beta (Minimum .10, Maximum .20).
- (e) Determined using same factors and breakdowns used for directly owned real estate.



ASSET VALUATION RESERVE (continued)

Basic Contributions, Reserve Objective and Maximum Reserve Calculations

Replications (Synthetic) Assets

| 1 RSAT Number | 2 Type | 3 CUSIP | 4 Description of Asset(s) | 5 NAIC Designation or Other Description of Asset | 6 Value of Asset | 7 AVR Basic Contribution | 8 AVR Reserve Objective | 9 AVR Maximum Reserve |
|---------------------|-----------|------------|---------------------------------|---|------------------------|-----------------------------------|----------------------------------|--------------------------------|
| | | | | | | | | |

SCHEDULE A - VERIFICATION BETWEEN YEARS

Real Estate

| | | |
|--|--|---|
| 1. Book/adjusted carrying value, December 31 of prior year..... | | |
| 2. Increase (decrease) by adjustment: | | |
| 2.1 Totals, Part 1, Column 11..... | | |
| 2.2 Totals, Part 3, Column 7..... | | |
| 3. Cost of acquired (Totals, Part 2, Column 6, net of encumbrances (Column 7) and net of additions and permanent improvements (Column 9))..... | | |
| 4. Cost of additions and permanent improvements: | | |
| 4.1 Totals, Part 1, Column 14..... | | |
| 4.2 Totals, Part 3, Column 9..... | | |
| 5. Total profit (loss) on sales, Part 3, Column 14..... | | |
| 6. Increase (decrease) by foreign exchange adjustment: | | |
| 6.1 Totals, Part 1, Column 12..... | | |
| 6.2 Totals, Part 3, Column 8..... | | |
| 7. Amounts received on sales, Part 3, Column 11 and Part 1, Column 13..... | | |
| 8. Book/adjusted carrying value at end of current period..... | | 0 |
| 9. Total valuation allowance..... | | |
| 10. Subtotal (Lines 8 plus 9)..... | | 0 |
| 11. Total nonadmitted amounts..... | | |
| 12. Statement value, current period (Page 2, real estate lines, Net Admitted Assets column)..... | | 0 |

SCHEDULE B - VERIFICATION BETWEEN YEARS

Mortgage Loans

| | | |
|---|--|---|
| 1. Book value/recorded investment excluding accrued interest of mortgages owned, December 31 of prior year..... | | |
| 2. Amount loaned during year: | | |
| 2.1 Actual cost at time of acquisitions..... | | |
| 2.2 Additional investment made after acquisitions..... | | 0 |
| 3. Accrual of discount and mortgage interest points and commitment fees..... | | |
| 4. Increase (decrease) by adjustment..... | | |
| 5. Total profit (loss) on sale..... | | |
| 6. Amounts paid on account or in full during the year..... | | |
| 7. Amortization of premium..... | | |
| 8. Increase (decrease) by foreign exchange adjustment..... | | |
| 9. Book value/recorded investment excluding accrued interest on mortgages owned at end of current period..... | | 0 |
| 10. Total valuation allowance..... | | |
| 11. Subtotal (Lines 9 plus 10)..... | | 0 |
| 12. Total nonadmitted amounts..... | | |
| 13. Statement value of mortgages owned at end of current period (Page 2, mortgage lines, Net Admitted Assets column)..... | | 0 |

SCHEDULE BA - VERIFICATION BETWEEN YEARS

Long-Term Invested Assets

| | | |
|---|--|---|
| 1. Book/adjusted carrying value of long-term invested assets owned, December 31 of prior year..... | | |
| 2. Cost of acquisitions during year: | | |
| 2.1 Actual cost at time of acquisitions..... | | |
| 2.2 Additional investment made after acquisitions..... | | 0 |
| 3. Accrual of discount..... | | |
| 4. Increase (decrease) by adjustment..... | | |
| 5. Total profit (loss) on sale..... | | |
| 6. Amounts paid on account or in full during the year..... | | |
| 7. Amortization of premium..... | | |
| 8. Increase (decrease) by foreign exchange adjustment..... | | |
| 9. Book/adjusted carrying value of long-term invested assets at end of current period..... | | 0 |
| 10. Total valuation allowance..... | | |
| 11. Subtotal (Lines 9 plus 10)..... | | 0 |
| 12. Total nonadmitted amounts..... | | |
| 13. Statement value of long-term invested assets at end of current period (Page 2, Line 7, Column 3)..... | | 0 |



SCHEDULE D - SUMMARY BY COUNTRY

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

| Description | | 1 Book/Adjusted Carrying Value | 2 Fair Value | 3 Actual Cost | 4 Par Value of Bonds |
|--|--|--------------------------------------|-----------------|------------------|----------------------------|
| BONDS | | | | | |
| Governments (Including all obligations guaranteed by governments) | 1. United States..... | | | | |
| | 2. Canada..... | | | | |
| | 3. Other Countries..... | | | | |
| | 4. Totals..... | .0 | .0 | .0 | .0 |
| States, Territories and Possessions (Direct and guaranteed) | 5. United States..... | | | | |
| | 6. Canada..... | | | | |
| | 7. Other Countries..... | | | | |
| | 8. Totals..... | .0 | .0 | .0 | .0 |
| Political Subdivisions of States, Territories and Possessions (Direct and guaranteed) | 9. United States..... | | | | |
| | 10. Canada..... | | | | |
| | 11. Other Countries..... | | | | |
| | 12. Totals..... | .0 | .0 | .0 | .0 |
| Special Revenue and Special Assessment Obligations and all Non-guaranteed Obligations of Agencies and Authorities of Governments and their Political Subdivisions | 13. United States..... | | | | |
| | 14. Canada..... | | | | |
| | 15. Other Countries..... | | | | |
| | 16. Totals..... | .0 | .0 | .0 | .0 |
| Public Utilities (Unaffiliated) | 17. United States..... | | | | |
| | 18. Canada..... | | | | |
| | 19. Other Countries..... | | | | |
| | 20. Totals..... | .0 | .0 | .0 | .0 |
| Industrial and Miscellaneous and Credit Tenant Loans (Unaffiliated) | 21. United States..... | | | | |
| | 22. Canada..... | | | | |
| | 23. Other Countries..... | | | | |
| | 24. Totals..... | .0 | .0 | .0 | .0 |
| Parent, Subsidiaries and Affiliates | 25. Totals..... | | | | |
| | 26. Total Bonds..... | .0 | .0 | .0 | .0 |
| PREFERRED STOCKS | | | | | |
| Public Utilities (Unaffiliated) | 27. United States..... | | | | |
| | 28. Canada..... | | | | |
| | 29. Other Countries..... | | | | |
| | 30. Totals..... | .0 | .0 | .0 | .0 |
| Banks, Trust and Insurance Companies (Unaffiliated) | 31. United States..... | | | | |
| | 32. Canada..... | | | | |
| | 33. Other Countries..... | | | | |
| | 34. Totals..... | .0 | .0 | .0 | .0 |
| Industrial and Miscellaneous (Unaffiliated) | 35. United States..... | | | | |
| | 36. Canada..... | | | | |
| | 37. Other Countries..... | | | | |
| | 38. Totals..... | .0 | .0 | .0 | .0 |
| Parent, Subsidiaries and Affiliates | 39. Totals..... | | | | |
| | 40. Total Preferred Stocks..... | .0 | .0 | .0 | .0 |
| COMMON STOCKS | | | | | |
| Public Utilities (Unaffiliated) | 41. United States..... | | | | |
| | 42. Canada..... | | | | |
| | 43. Other Countries..... | | | | |
| | 44. Totals..... | .0 | .0 | .0 | .0 |
| Banks, Trust and Insurance Companies (Unaffiliated) | 45. United States..... | | | | |
| | 46. Canada..... | | | | |
| | 47. Other Countries..... | | | | |
| | 48. Totals..... | .0 | .0 | .0 | .0 |
| Industrial and Miscellaneous (Unaffiliated) | 49. United States..... | | | | |
| | 50. Canada..... | | | | |
| | 51. Other Countries..... | | | | |
| | 52. Totals..... | .0 | .0 | .0 | .0 |
| Parent, Subsidiaries and Affiliates | 53. Totals..... | | | | |
| | 54. Total Common Stocks..... | .0 | .0 | .0 | .0 |
| | 55. Total Stocks..... | .0 | .0 | .0 | .0 |
| | 56. Total Bonds and Stocks..... | .0 | .0 | .0 | .0 |

SCHEDULE D - VERIFICATION BETWEEN YEARS

Bonds and Stocks

| | | | | | |
|---|--|---|--|--|---|
| 1. Book/adjusted carrying value of bonds and stocks, prior year..... | | | | | |
| 2. Cost of bonds and stocks acquired, Column 7, Part 3..... | | | | | |
| 3. Accrual of discount..... | | | | | |
| 4. Increase (decrease) by adjustment: | | | | | |
| 4.1 Columns 12 - 14, Part 1..... | | | | | |
| 4.2 Columns 15 - 17, Part 2, Section 1..... | | | | | |
| 4.3 Column 15, Part 2, Section 2..... | | | | | |
| 4.4 Columns 11 - 13, Part 4..... | | 0 | | | |
| 5. Total gain (loss), Column 19, Part 4..... | | | | | |
| 6. Deduct consideration for bonds and stocks disposed of, Column 7, Part 4..... | | | | | |
| 7. Amortization of premium..... | | | | | |
| 8. Foreign exchange adjustment: | | | | | |
| 8.1 Column 15, Part 1..... | | | | | |
| 8.2 Column 19, Part 2, Section 1..... | | | | | |
| 8.3 Column 16, Part 2, Section 2..... | | | | | |
| 8.4 Column 15, Part 4..... | | | | | 0 |
| 9. Book/adjusted carrying value at end of current period..... | | | | | 0 |
| 10. Total valuation allowance..... | | | | | 0 |
| 11. Subtotal (Lines 9 plus 10)..... | | | | | 0 |
| 12. Total nonadmitted amounts..... | | | | | 0 |
| 13. Statement value of bonds and stocks, current year..... | | | | | 0 |

SCHEDULE D - PART 1A - SECTION 1

Quality and Maturity Distribution of All Bonds Owned December 31, At Book/Adjusted Carrying Values By Major Types of Issues and NAIC Designations

| Quality Rating per the 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 Total Current Year | 7 Column 6 as a % of Line 10.7 | 8 Total from Column 6 Prior Year | 9 % from Col. 7 Prior Year | 10 Total Publicly Traded | 11 Total Privately Placed (a) |
|--|------------------------|-------------------------------------|---------------------------------------|--|-----------------------|----------------------------|--------------------------------------|--|----------------------------------|--------------------------------|-------------------------------------|
| 1. U.S. Governments, Schedules D & DA (Group 1) | | | | | | | | | | | |
| 1.1 Class 1..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 1.2 Class 2..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 1.3 Class 3..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 1.4 Class 4..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 1.5 Class 5..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 1.6 Class 6..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 1.7 Totals..... | 0 | 0 | 0 | 0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 | 0 |
| 2. All Other Governments, Schedules D & DA (Group 2) | | | | | | | | | | | |
| 2.1 Class 1..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 2.2 Class 2..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 2.3 Class 3..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 2.4 Class 4..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 2.5 Class 5..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 2.6 Class 6..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 2.7 Totals..... | 0 | 0 | 0 | 0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 | 0 |
| 3. States, Territories and Possessions, etc., Guaranteed, Schedules D & DA (Group 3) | | | | | | | | | | | |
| 3.1 Class 1..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 3.2 Class 2..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 3.3 Class 3..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 3.4 Class 4..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 3.5 Class 5..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 3.6 Class 6..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 3.7 Totals..... | 0 | 0 | 0 | 0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 | 0 |
| 4. Political Subdivisions of States, Territories and Possessions, Guaranteed, Schedules D & DA (Group 4) | | | | | | | | | | | |
| 4.1 Class 1..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 4.2 Class 2..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 4.3 Class 3..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 4.4 Class 4..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 4.5 Class 5..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 4.6 Class 6..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 4.7 Totals..... | 0 | 0 | 0 | 0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 | 0 |
| 5. Special Revenue & Special Assessment Obligations, etc., Non-Guaranteed, Schedules D & DA (Group 5) | | | | | | | | | | | |
| 5.1 Class 1..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 5.2 Class 2..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 5.3 Class 3..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 5.4 Class 4..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 5.5 Class 5..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 5.6 Class 6..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 5.7 Totals..... | 0 | 0 | 0 | 0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 | 0 |

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SCHEDULE D - PART 1A - SECTION 1 (continued)

Quality and Maturity Distribution of All Bonds Owned December 31, At Book/Adjusting Carrying Values By Major Types of Issues and NAIC Designations

| Quality Rating per the 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 Total Current Year | 7 Column 6 as a % of Line 10.7 | 8 Total from Column 6 Prior Year | 9 % from Col. 7 Prior Year | 10 Total Publicly Traded | 11 Total Privately Placed (a) |
|---|------------------------|-------------------------------------|---------------------------------------|--|-----------------------|----------------------------|--------------------------------------|--|----------------------------------|--------------------------------|-------------------------------------|
| 6. Public Utilities (Unaffiliated), Schedules D & DA (Group 6) | | | | | | | | | | | |
| 6.1 Class 1..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 6.2 Class 2..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 6.3 Class 3..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 6.4 Class 4..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 6.5 Class 5..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 6.6 Class 6..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 6.7 Totals..... | 0 | 0 | 0 | 0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 | 0 |
| 7. Industrial & Miscellaneous (Unaffiliated), Schedules D & DA (Group 7) | | | | | | | | | | | |
| 7.1 Class 1..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 7.2 Class 2..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 7.3 Class 3..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 7.4 Class 4..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 7.5 Class 5..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 7.6 Class 6..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 7.7 Totals..... | 0 | 0 | 0 | 0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 | 0 |
| 8. Credit Tenant Loans, Schedules D & DA (Group 8) | | | | | | | | | | | |
| 8.1 Class 1..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 8.2 Class 2..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 8.3 Class 3..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 8.4 Class 4..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 8.5 Class 5..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 8.6 Class 6..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 8.7 Totals..... | 0 | 0 | 0 | 0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 | 0 |
| 9. Parent, Subsidiaries and Affiliates, Schedules D & DA (Group 9) | | | | | | | | | | | |
| 9.1 Class 1..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 9.2 Class 2..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 9.3 Class 3..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 9.4 Class 4..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 9.5 Class 5..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 9.6 Class 6..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 9.7 Totals..... | 0 | 0 | 0 | 0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 | 0 |

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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 Rating per the 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 Total Current Year | 7 Column 6 as a % of Line 10.7 | 8 Total from Column 6 Prior Year | 9 % from Col. 7 Prior Year | 10 Total Publicly Traded | 11 Total Privately Placed (a) |
|---|------------------------|-------------------------------------|---------------------------------------|--|-----------------------|----------------------------|--------------------------------------|--|----------------------------------|--------------------------------|-------------------------------------|
| 10. Total Bonds Current Year | | | | | | | | | | | |
| 10.1 Class 1..... | 0 | 0 | 0 | 0 | 0 | 0 | 0.0 | XXX | XXX | 0 | 0 |
| 10.2 Class 2..... | 0 | 0 | 0 | 0 | 0 | 0 | 0.0 | XXX | XXX | 0 | 0 |
| 10.3 Class 3..... | 0 | 0 | 0 | 0 | 0 | 0 | 0.0 | XXX | XXX | 0 | 0 |
| 10.4 Class 4..... | 0 | 0 | 0 | 0 | 0 | 0 | 0.0 | XXX | XXX | 0 | 0 |
| 10.5 Class 5..... | 0 | 0 | 0 | 0 | 0 | 0 | 0.0 | XXX | XXX | 0 | 0 |
| 10.6 Class 6..... | 0 | 0 | 0 | 0 | 0 | 0 | 0.0 | XXX | XXX | 0 | 0 |
| 10.7 Totals..... | 0 | 0 | 0 | 0 | 0 | 0 | 0.0 | XXX | XXX | 0 | 0 |
| 10.8 Line 10.7 as a % of Col. 6..... | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | XXX | XXX | XXX | 0.0 | 0.0 |
| 11. Total Bonds Prior Year | | | | | | | | | | | |
| 11.1 Class 1..... | | | | | | XXX | XXX | 0 | 0.0 | | |
| 11.2 Class 2..... | | | | | | XXX | XXX | 0 | 0.0 | | |
| 11.3 Class 3..... | | | | | | XXX | XXX | 0 | 0.0 | | |
| 11.4 Class 4..... | | | | | | XXX | XXX | 0 | 0.0 | | |
| 11.5 Class 5..... | | | | | | XXX | XXX | (c) | 0.0 | | |
| 11.6 Class 6..... | | | | | | XXX | XXX | (c) | 0.0 | | |
| 11.7 Totals..... | 0 | 0 | 0 | 0 | 0 | XXX | XXX | (b) | 0.0 | 0 | 0 |
| 11.8 Line 11.7 as a % of Col. 8..... | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | XXX | XXX | 0.0 | XXX | 0.0 | 0.0 |
| 12. Total Publicly Traded Bonds | | | | | | | | | | | |
| 12.1 Class 1..... | | | | | | 0 | 0.0 | 0 | 0.0 | 0 | XXX |
| 12.2 Class 2..... | | | | | | 0 | 0.0 | 0 | 0.0 | 0 | XXX |
| 12.3 Class 3..... | | | | | | 0 | 0.0 | 0 | 0.0 | 0 | XXX |
| 12.4 Class 4..... | | | | | | 0 | 0.0 | 0 | 0.0 | 0 | XXX |
| 12.5 Class 5..... | | | | | | 0 | 0.0 | 0 | 0.0 | 0 | XXX |
| 12.6 Class 6..... | | | | | | 0 | 0.0 | 0 | 0.0 | 0 | XXX |
| 12.7 Totals..... | 0 | 0 | 0 | 0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 | XXX |
| 12.8 Line 12.7 as a % of Col. 6..... | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | XXX | XXX | XXX | 0.0 | XXX |
| 12.9 Line 12.7 as a % of Line 10.7, Col. 6, Section 10..... | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | XXX | XXX | XXX | 0.0 | XXX |
| 13. Total Privately Placed Bonds | | | | | | | | | | | |
| 13.1 Class 1..... | | | | | | 0 | 0.0 | 0 | 0.0 | XXX | 0 |
| 13.2 Class 2..... | | | | | | 0 | 0.0 | 0 | 0.0 | XXX | 0 |
| 13.3 Class 3..... | | | | | | 0 | 0.0 | 0 | 0.0 | XXX | 0 |
| 13.4 Class 4..... | | | | | | 0 | 0.0 | 0 | 0.0 | XXX | 0 |
| 13.5 Class 5..... | | | | | | 0 | 0.0 | 0 | 0.0 | XXX | 0 |
| 13.6 Class 6..... | | | | | | 0 | 0.0 | 0 | 0.0 | XXX | 0 |
| 13.7 Totals..... | 0 | 0 | 0 | 0 | 0 | 0 | 0.0 | 0 | 0.0 | XXX | 0 |
| 13.8 Line 13.7 as a % of Col. 6..... | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | XXX | XXX | XXX | XXX | 0.0 |
| 13.9 Line 13.7 as a % of Line 10.7, Col. 6, Section 10..... | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | XXX | XXX | XXX | XXX | 0.0 |

(a) Includes \$.....0 freely tradable under SEC Rule 144 or qualified for resale under SEC Rule 144A.
 (b) Includes \$.....0 current year, \$.....0 prior year of bonds with Z designations and \$.....0 current year, \$.....0 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. "Z*" means the SVO could not evaluate the obligation because valuation procedures for the security class are under regulatory review.
 (c) Includes \$.....0 current year, \$.....0 prior year of bonds with 5* designations and \$.....0 current year, \$.....0 prior year of bonds with 6* designations. "5*" means the NAIC designation was assigned by the 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

| Distribution by Type | 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 Total Current Year | 7 Column 6 as a % of Line 10.7 | 8 Total from Column 6 Prior Year | 9 % from Col. 7 Prior Year | 10 Total Publicly Traded | 11 Total Privately Placed |
|--|------------------------|-------------------------------------|---------------------------------------|--|-----------------------|----------------------------|--------------------------------------|--|----------------------------------|--------------------------------|---------------------------------|
| 1. U.S. Governments, Schedules D & DA (Group 1) | | | | | | | | | | | |
| 1.1 Issuer Obligations..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 1.2 Single Class Mortgage-Backed/Asset-Backed Securities..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 1.7 Totals..... | 0 | 0 | 0 | 0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 | 0 |
| 2. All Other Governments, Schedules D & DA (Group 2) | | | | | | | | | | | |
| 2.1 Issuer Obligations..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 2.2 Single Class Mortgage-Backed/Asset-Backed Securities..... | | | | | | 0 | 0.0 | | 0.0 | | |
| MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES: | | | | | | | | | | | |
| 2.3 Defined..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 2.4 Other..... | | | | | | 0 | 0.0 | | 0.0 | | |
| MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ ASSET-BACKED SECURITIES: | | | | | | | | | | | |
| 2.5 Defined..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 2.6 Other..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 2.7 Totals..... | 0 | 0 | 0 | 0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 | 0 |
| 3. States, Territories and Possessions, Guaranteed, Schedules D & DA (Group 3) | | | | | | | | | | | |
| 3.1 Issuer Obligations..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 3.2 Single Class Mortgage-Backed/Asset-Backed Securities..... | | | | | | 0 | 0.0 | | 0.0 | | |
| MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES: | | | | | | | | | | | |
| 3.3 Defined..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 3.4 Other..... | | | | | | 0 | 0.0 | | 0.0 | | |
| MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ ASSET-BACKED SECURITIES: | | | | | | | | | | | |
| 3.5 Defined..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 3.6 Other..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 3.7 Totals..... | 0 | 0 | 0 | 0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 | 0 |
| 4. Political Subdivisions of States, Territories and Possessions, Guaranteed, Schedules D & DA (Group 4) | | | | | | | | | | | |
| 4.1 Issuer Obligations..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 4.2 Single Class Mortgage-Backed/Asset-Backed Securities..... | | | | | | 0 | 0.0 | | 0.0 | | |
| MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES: | | | | | | | | | | | |
| 4.3 Defined..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 4.4 Other..... | | | | | | 0 | 0.0 | | 0.0 | | |
| MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ ASSET-BACKED SECURITIES: | | | | | | | | | | | |
| 4.5 Defined..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 4.6 Other..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 4.7 Totals..... | 0 | 0 | 0 | 0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 | 0 |
| 5. Special Revenue & Special Assessment Obligations, etc., Non-Guaranteed, Schedules D & DA (Group 5) | | | | | | | | | | | |
| 5.1 Issuer Obligations..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 5.2 Single Class Mortgage-Backed/Asset-Backed Securities..... | | | | | | 0 | 0.0 | | 0.0 | | |
| MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES: | | | | | | | | | | | |
| 5.3 Defined..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 5.4 Other..... | | | | | | 0 | 0.0 | | 0.0 | | |
| MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ ASSET-BACKED SECURITIES: | | | | | | | | | | | |
| 5.5 Defined..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 5.6 Other..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 5.7 Totals..... | 0 | 0 | 0 | 0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 | 0 |

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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

| Distribution by Type | 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 Total Current Year | 7 Column 6 as a % of Line 10.7 | 8 Total from Column 6 Prior Year | 9 % from Col. 7 Prior Year | 10 Total Publicly Traded | 11 Total Privately Placed |
|---|------------------------|-------------------------------------|---------------------------------------|--|-----------------------|----------------------------|--------------------------------------|--|----------------------------------|--------------------------------|---------------------------------|
| 6. Public Utilities (Unaffiliated), Schedules D & DA (Group 6) | | | | | | | | | | | |
| 6.1 Issuer Obligations..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 6.2 Single Class Mortgage-Backed/Asset-Backed Securities..... | | | | | | 0 | 0.0 | | 0.0 | | |
| MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES: | | | | | | | | | | | |
| 6.3 Defined..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 6.4 Other..... | | | | | | 0 | 0.0 | | 0.0 | | |
| MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ ASSET-BACKED SECURITIES: | | | | | | | | | | | |
| 6.5 Defined..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 6.6 Other..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 6.7 Totals..... | 0 | 0 | 0 | 0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 | 0 |
| 7. Industrial & Miscellaneous (Unaffiliated), Schedules D & DA (Group 7) | | | | | | | | | | | |
| 7.1 Issuer Obligations..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 7.2 Single Class Mortgage-Backed/Asset-Backed Securities..... | | | | | | 0 | 0.0 | | 0.0 | | |
| MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES: | | | | | | | | | | | |
| 7.3 Defined..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 7.4 Other..... | | | | | | 0 | 0.0 | | 0.0 | | |
| MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ ASSET-BACKED SECURITIES: | | | | | | | | | | | |
| 7.5 Defined..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 7.6 Other..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 7.7 Totals..... | 0 | 0 | 0 | 0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 | 0 |
| 8. Credit Tenant Loans, Schedules D & DA (Group 8) | | | | | | | | | | | |
| 8.1 Issuer Obligations..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 8.7 Totals..... | 0 | 0 | 0 | 0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 | 0 |
| 9. Parent, Subsidiaries and Affiliates, Schedules D & DA (Group 9) | | | | | | | | | | | |
| 9.1 Issuer Obligations..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 9.2 Single Class Mortgage-Backed/Asset-Backed Securities..... | | | | | | 0 | 0.0 | | 0.0 | | |
| MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES: | | | | | | | | | | | |
| 9.3 Defined..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 9.4 Other..... | | | | | | 0 | 0.0 | | 0.0 | | |
| MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ ASSET-BACKED SECURITIES: | | | | | | | | | | | |
| 9.5 Defined..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 9.6 Other..... | | | | | | 0 | 0.0 | | 0.0 | | |
| 9.7 Totals..... | 0 | 0 | 0 | 0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 | 0 |

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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

| Distribution by Type | 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 Total Current Year | 7 Column 6 as a % of Line 10.7 | 8 Total from Column 6 Prior Year | 9 % from Col. 7 Prior Year | 10 Total Publicly Traded | 11 Total Privately Placed |
|---|------------------------|-------------------------------------|---------------------------------------|--|-----------------------|----------------------------|--------------------------------------|--|----------------------------------|--------------------------------|---------------------------------|
| 10. Total Bonds Current Year | | | | | | | | | | | |
| 10.1 Issuer Obligations..... | 0 | 0 | 0 | 0 | 0 | 0 | 0.0 | XXX | XXX | 0 | 0 |
| 10.2 Single Class Mortgage-Backed/Asset-Backed Securities..... | 0 | 0 | 0 | 0 | 0 | 0 | 0.0 | XXX | XXX | 0 | 0 |
| MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES: | | | | | | | | | | | |
| 10.3 Defined..... | 0 | 0 | 0 | 0 | 0 | 0 | 0.0 | XXX | XXX | 0 | 0 |
| 10.4 Other..... | 0 | 0 | 0 | 0 | 0 | 0 | 0.0 | XXX | XXX | 0 | 0 |
| MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ ASSET-BACKED SECURITIES: | | | | | | | | | | | |
| 10.5 Defined..... | 0 | 0 | 0 | 0 | 0 | 0 | 0.0 | XXX | XXX | 0 | 0 |
| 10.6 Other..... | 0 | 0 | 0 | 0 | 0 | 0 | 0.0 | XXX | XXX | 0 | 0 |
| 10.7 Totals..... | 0 | 0 | 0 | 0 | 0 | 0 | 0.0 | XXX | XXX | 0 | 0 |
| 10.8 Line 10.7 as a % of Col. 6..... | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | XXX | XXX | XXX | 0.0 | 0.0 |
| 11. Total Bonds Prior Year | | | | | | | | | | | |
| 11.1 Issuer Obligations..... | | | | | | XXX | XXX | 0 | 0.0 | | |
| 11.2 Single Class Mortgage-Backed/Asset-Backed Securities..... | | | | | | XXX | XXX | 0 | 0.0 | | |
| MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES: | | | | | | | | | | | |
| 11.3 Defined..... | | | | | | XXX | XXX | 0 | 0.0 | | |
| 11.4 Other..... | | | | | | XXX | XXX | 0 | 0.0 | | |
| MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ ASSET-BACKED SECURITIES: | | | | | | | | | | | |
| 11.5 Defined..... | | | | | | XXX | XXX | 0 | 0.0 | | |
| 11.6 Other..... | | | | | | XXX | XXX | 0 | 0.0 | | |
| 11.7 Totals..... | 0 | 0 | 0 | 0 | 0 | XXX | XXX | 0 | 100.0 | 0 | 0 |
| 11.8 Line 11.7 as a % of Col. 8..... | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | XXX | XXX | 0.0 | XXX | 0.0 | 0.0 |
| 12. Total Publicly Traded Bonds | | | | | | | | | | | |
| 12.1 Issuer Obligations..... | | | | | | 0 | 0.0 | 0 | 0.0 | 0 | XXX |
| 12.2 Single Class Mortgage-Backed/Asset-Backed Securities..... | | | | | | 0 | 0.0 | 0 | 0.0 | 0 | XXX |
| MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES: | | | | | | | | | | | |
| 12.3 Defined..... | | | | | | 0 | 0.0 | 0 | 0.0 | 0 | XXX |
| 12.4 Other..... | | | | | | 0 | 0.0 | 0 | 0.0 | 0 | XXX |
| MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ ASSET-BACKED SECURITIES: | | | | | | | | | | | |
| 12.5 Defined..... | | | | | | 0 | 0.0 | 0 | 0.0 | 0 | XXX |
| 12.6 Other..... | | | | | | 0 | 0.0 | 0 | 0.0 | 0 | XXX |
| 12.7 Totals..... | 0 | 0 | 0 | 0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 | XXX |
| 12.8 Line 12.7 as a % of Col. 6..... | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | XXX | XXX | XXX | 0.0 | XXX |
| 12.9 Line 12.7 as a % of Line 10.7, Col. 6, Section 10..... | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | XXX | XXX | XXX | 0.0 | XXX |
| 13. Total Privately Placed Bonds | | | | | | | | | | | |
| 13.1 Issuer Obligations..... | | | | | | 0 | 0.0 | 0 | 0.0 | XXX | 0 |
| 13.2 Single Class Mortgage-Backed/Asset-Backed Securities..... | | | | | | 0 | 0.0 | 0 | 0.0 | XXX | 0 |
| MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES: | | | | | | | | | | | |
| 13.3 Defined..... | | | | | | 0 | 0.0 | 0 | 0.0 | XXX | 0 |
| 13.4 Other..... | | | | | | 0 | 0.0 | 0 | 0.0 | XXX | 0 |
| MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ ASSET-BACKED SECURITIES: | | | | | | | | | | | |
| 13.5 Defined..... | | | | | | 0 | 0.0 | 0 | 0.0 | XXX | 0 |
| 13.6 Other..... | | | | | | 0 | 0.0 | 0 | 0.0 | XXX | 0 |
| 13.7 Totals..... | 0 | 0 | 0 | 0 | 0 | 0 | 0.0 | 0 | 0.0 | XXX | 0 |
| 13.8 Line 13.7 as a % of Col. 6..... | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | XXX | XXX | XXX | XXX | 0.0 |
| 13.9 Line 13.7 as a % of Line 10.7, Col. 6, Section 10..... | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | XXX | XXX | XXX | XXX | 0.0 |

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SCHEDULE DA - PART 2 - VERIFICATION BETWEEN YEARS

Short-Term Investments

| | 1 | 2 | 3 | 4 | 5 |
|--|-------|-------|-------------------|---|---|
| | Total | Bonds | Mortgage Loans | Other Short-term Investment Assets (a) | Investments in Subsidiaries and Affiliates |
| 1. Book/adjusted carrying value December 31 of prior year..... | .0 | | | | |
| 2. Cost of short-term investments acquired..... | .0 | | | | |
| 3. Increase (decrease) by adjustment..... | .0 | | | | |
| 4. Increase (decrease) by foreign exchange adjustment..... | .0 | | | | |
| 5. Total profit (loss) on disposal of short-term investments..... | .0 | | | | |
| 6. Consideration received on disposal of short-term investments..... | .0 | | | | |
| 7. Book/adjusted carrying value, current year..... | .0 | .0 | .0 | .0 | .0 |
| 8. Total valuation allowance..... | .0 | | | | |
| 9. Subtotal (Lines 7 plus 8)..... | .0 | .0 | .0 | .0 | .0 |
| 10. Total nonadmitted amounts..... | .0 | | | | |
| 11. Statement value (Lines 9 minus 10)..... | .0 | .0 | .0 | .0 | .0 |
| 12. Income collected during year..... | .0 | | | | |
| 13. Income earned during year..... | .0 | | | | |

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

.....

SCHEDULE DB - PART A - VERIFICATION BETWEEN YEARS

Options, Caps, Floors and Insurance Futures Options Owned

| | | | |
|-----|---|--|---|
| 1. | Book value, December 31, prior year (Line 8, prior year)..... | | |
| 2. | Cost/option premium (Section 2, Column 7)..... | | |
| 3. | Increase/(decrease) by adjustment (Section 1, Column 12) plus (Section 3, Column 13)..... | | |
| 4. | Gain/(loss) on termination: | | |
| 4.1 | Recognized (Section 3, Column 14)..... | | |
| 4.2 | Used to adjust basis of hedged item (Section 3, Column 15)..... | | 0 |
| 5. | Consideration received on terminations (Section 3, Column 12)..... | | |
| 6. | Used to adjust basis on open contracts (Section 1, Column 13)..... | | |
| 7. | Disposition of deferred amount on contracts terminated in prior year: | | |
| 7.1 | Recognized..... | | |
| 7.2 | Used to adjust basis of hedged item..... | | 0 |
| 8. | Book value, December 31, current year (Lines 1 + 2 + 3 + 4 - 5 - 6 - 7)..... | | 0 |

SCHEDULE DB - PART B - VERIFICATION BETWEEN YEARS

Options, Caps, Floors and Insurance Futures Options Written

| | | | |
|-----|---|--|---|
| 1. | Book value, December 31, prior year (Line 8, prior year)..... | | |
| 2. | Consideration received (Section 2, Column 7)..... | | |
| 3. | Increase/(decrease) by adjustment (Section 1, Column 12) plus (Section 3, Column 13)..... | | |
| 4. | Gain/(loss) on termination: | | |
| 4.1 | Recognized (Section 3, Column 14)..... | | |
| 4.2 | Used to adjust basis (Section 3, Column 15)..... | | 0 |
| 5. | Consideration paid on terminations (Section 3, Column 12)..... | | |
| 6. | Used to adjust basis on open contracts (Section 1, Column 13)..... | | |
| 7. | Disposition of deferred amount on contracts terminated in prior year: | | |
| 7.1 | Recognized..... | | |
| 7.2 | Used to adjust basis..... | | 0 |
| 8. | Book value, December 31, current year..... | | 0 |



SCHEDULE DB - PART C - VERIFICATION BETWEEN YEARS

Swaps and Forwards

| | | |
|--|--|---|
| 1. Book value, December 31, prior year (Line 8, prior year)..... | | |
| 2. Cost or (consideration received) (Section 2, Column 7)..... | | |
| 3. Increase/(decrease) by adjustment (Section 1, Column 12) plus (Section 3, Column 13)..... | | |
| 4. Gain/(loss) on termination: | | |
| 4.1 Recognized (Section 3, Column 14)..... | | |
| 4.2 Used to adjust basis of hedged item (Section 3, Column 15)..... | | 0 |
| 5. Consideration received (or paid) on terminations (Section 3, Column 12)..... | | |
| 6. Used to adjust basis of hedged item on open contracts (Section 1, Column 13)..... | | |
| 7. Disposition of deferred amount on contracts terminated in prior year: | | |
| 7.1 Recognized..... | | |
| 7.2 Used to adjust basis of hedged item..... | | 0 |
| 8. Book value, December 31, current year (Lines 1 + 2 + 3 + 4 - 5 - 6 - 7)..... | | 0 |

SCHEDULE DB - PART D - VERIFICATION BETWEEN YEARS

Futures Contracts and Insurance Futures Contracts

| | | |
|--|--|---|
| 1. Book value, December 31, prior year (Line 8, prior year)..... | | |
| 2. Change in total variation margin on open contracts (difference between years - Section 1, Column 6)..... | | |
| 3.1 Change in variation margin on open contracts used to adjust basis of hedged item (Section 1, Column 11)..... | | |
| 3.2 Change in variation margin on open contracts recognized (difference between years - Section 1, Column 10)..... | | |
| 4.1 Variation margin on contracts terminated during the year (Section 3, Column 6)..... | | |
| 4.2 Less: | | |
| 4.21 Gain/(loss) recognized in current year (Section 3, Column 11)..... | | |
| 4.22 Gain/(loss) used to adjust basis of hedge (Section 3, Column 12)..... | | 0 |
| 4.3 Subtotal (Line 4.1 minus Line 4.2)..... | | 0 |
| 5.1 Net additions to cash deposits (Section 2, Column 7)..... | | |
| 5.2 Less: Net reductions to cash deposits (Section 3, Column 9)..... | | 0 |
| 6. Subtotal (Lines 1 - 2 + 3.1 + 3.2 - 4.3 + 5.2)..... | | 0 |
| 7. Disposition of gain/(loss) on contracts terminated in prior year: | | |
| 7.1 Recognized..... | | |
| 7.2 Used to adjust basis of hedged item..... | | 0 |
| 8. Book value, December 31, current year (Lines 6 + 7.1 + 7.2)..... | | 0 |

SCHEDULE DB - PART E - VERIFICATION

Statement Value and Fair Value of Open Contracts

| | | |
|--|--|-----------------|
| | | Statement Value |
| 1. Part A, Section 1, Column 10..... | | |
| 2. Part B, Section 1, Column 10..... | | |
| 3. Part C, Section 1, Column 10..... | | |
| 4. Part D, Section 1, Column 9 - 12..... | | |
| 5. Lines (1) - (2) + (3) + (4)..... | | 0 |
| 6. Part E, Section 1, Column 4..... | | |
| 7. Part E, Section 1, Column 5..... | | |
| 8. Lines (5) - (6) - (7)..... | | 0 |
| | | Fair Value |
| 9. Part A, Section 1, Column 11..... | | |
| 10. Part B, Section 1, Column 11..... | | |
| 11. Part C, Section 1, Column 11..... | | |
| 12. Part D, Section 1, Column 9..... | | |
| 13. Lines (9) - (10) + (11) + (12)..... | | 0 |
| 14. Part E, Section 1, Column 7..... | | |
| 15. Part E, Section 1, Column 8..... | | |
| 16. Lines (13) - (14) - (15)..... | | 0 |



SCHEDULE DB - PART F - SECTION 1

Replicated (Synthetic) Assets Open

| Replicated (Synthetic) Asset | | | | | Components of the Replicated (Synthetic) Asset | | | | | | | |
|------------------------------------|----------------------|---|-------------------------|--------------------|--|--------------------|-------------------------|------------------|--------------------------|---------------------|--|--|
| 1 Replication RSAT Number | 2 Description | 3 NAIC Designation or Other Description | 4 Statement Value | 5 Fair Value | Derivative Instruments Open | | Cash Instrument(s) Held | | | | | |
| | | | | | 6 Description | 7 Fair Value | 8 CUSIP | 9 Description | 10 Statement Value | 11 Fair Value | 12 NAIC Designation or Other Description | |
| | | | | | | | | | | | | |

SCHEDULE DB - PART F - SECTION 2

Reconciliation of Replicated (Synthetic) Assets Open

| | First Quarter | | Second Quarter | | Third Quarter | | Fourth Quarter | | Year-To-Date | |
|--|--------------------------------|--|--------------------------------|--|--------------------------------|--|--------------------------------|--|--------------------------------|---|
| | 1 Number of Positions | 2 Total Replicated (Synthetic) Assets Statement Value | 3 Number of Positions | 4 Total Replicated (Synthetic) Assets Statement Value | 5 Number of Positions | 6 Total Replicated (Synthetic) Assets Statement Value | 7 Number of Positions | 8 Total Replicated (Synthetic) Assets Statement Value | 9 Number of Positions | 10 Total Replicated (Synthetic) Assets Statement Value |
| 1. Beginning Inventory..... | | | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 2. Add: Opened or acquired transactions..... | | | | | | | | | | |
| 3. Add: Increases in replicated asset statement value..... | XXX | | XXX | | XXX | | XXX | | XXX | .0 |
| 4. Less: Closed or disposed of transactions..... | | | | | | | | | .0 | .0 |
| 5. Less: Positions disposed of for failing effectiveness criteria..... | | | | | | | | | .0 | .0 |
| 6. Less: Decreases in replicated (synthetic) asset statement value..... | XXX | | XXX | | XXX | | XXX | | XXX | .0 |
| 7. Ending inventory..... | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |



SCHEDULE F

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

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
|---------------------|------------------|--------------------------------------|---|-------------------|-----------------------------------|--|--------------------------------|
| Contract Numbers | Claim Numbers | State of Residence of Claimant | Year of Claim for Death or Disability | Amount Claimed | Amount Paid During the Year | Amount Resisted Dec. 31 of Current Year | Why Compromised or Resisted |
| | | | | | | | |

SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT

| | Total | | Collectively Renewable | | Other Individual Contracts | | | | | | | | |
|--|-------------|--------|------------------------|--------|----------------------------|--------|----------------------|--------|---------------------------------------|---------|---------------------|---------|--------------|
| | | | | | Non-Cancelable | | Guaranteed Renewable | | Non-Renewable for Stated Reasons Only | | Other Accident Only | | All Other |
| | 1 Amount | 2 % | 3 Amount | 4 % | 5 Amount | 6 % | 7 Amount | 8 % | 9 Amount | 10 % | 11 Amount | 12 % | 13 Amount | 14 % |

PART 1 - ANALYSIS OF UNDERWRITING OPERATIONS

| | | | | | | | | | | | | | | |
|---|----|-----|----|-----|----|------|----|------|----|-----|----|-----|----|------|
| 1. Premiums written..... | .0 | XXX | | XXX | | .XXX | | .XXX | | XXX | | XXX | | .XXX |
| 2. Premiums earned..... | .0 | XXX | | XXX | | .XXX | | .XXX | | XXX | | XXX | | .XXX |
| 3. Incurred claims..... | .0 | .00 | | .00 | | .00 | | .00 | | .00 | | .00 | | .00 |
| 4. Cost containment expenses..... | .0 | .00 | | .00 | | .00 | | .00 | | .00 | | .00 | | .00 |
| 5. Incurred claims and cost containment expenses (Lines 3 and 4)..... | .0 | .00 | .0 | .00 | .0 | .00 | .0 | .00 | .0 | .00 | .0 | .00 | .0 | .00 |
| 6. Increase in contract reserves..... | .0 | .00 | | .00 | | .00 | | .00 | | .00 | | .00 | | .00 |
| 7. Commissions (a)..... | .0 | .00 | | .00 | | .00 | | .00 | | .00 | | .00 | | .00 |
| 8. Other general insurance expenses..... | .0 | .00 | | .00 | | .00 | | .00 | | .00 | | .00 | | .00 |
| 9. Taxes, licenses and fees..... | .0 | .00 | | .00 | | .00 | | .00 | | .00 | | .00 | | .00 |
| 10. Total other expenses incurred..... | .0 | .00 | .0 | .00 | .0 | .00 | .0 | .00 | .0 | .00 | .0 | .00 | .0 | .00 |
| 11. Aggregate write-ins for deductions..... | .0 | .00 | .0 | .00 | .0 | .00 | .0 | .00 | .0 | .00 | .0 | .00 | .0 | .00 |
| 12. Gain from underwriting before dividends or refunds..... | .0 | .00 | .0 | .00 | .0 | .00 | .0 | .00 | .0 | .00 | .0 | .00 | .0 | .00 |
| 13. Dividends or refunds..... | .0 | .00 | | .00 | | .00 | | .00 | | .00 | | .00 | | .00 |
| 14. Gain from underwriting after dividends or refunds..... | .0 | .00 | .0 | .00 | .0 | .00 | .0 | .00 | .0 | .00 | .0 | .00 | .0 | .00 |

DETAILS OF WRITE-INS

| | | | | | | | | | | | | | | |
|-------|--|----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|
| 1101. | | .0 | .00 | .00 | .00 | .00 | .00 | .00 | .00 | .00 | .00 | .00 | .00 | .00 |
| 1102. | | .0 | .00 | .00 | .00 | .00 | .00 | .00 | .00 | .00 | .00 | .00 | .00 | .00 |
| 1103. | | .0 | .00 | .00 | .00 | .00 | .00 | .00 | .00 | .00 | .00 | .00 | .00 | .00 |
| 1198. | Summary of remaining write-ins for Line 11 from overflow page..... | .0 | .00 | .0 | .00 | .0 | .00 | .0 | .00 | .0 | .00 | .0 | .00 | .0 |
| 1199. | Total (Lines 1101 thru 1103 plus 1198) (Line 11 above)..... | .0 | .00 | .0 | .00 | .0 | .00 | .0 | .00 | .0 | .00 | .0 | .00 | .0 |

(a) Includes \$.00 reported as "Contract, membership and other fees retained by agents."

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SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT (continued)

| | 1 Total | 2 Collectively Renewable | Other Individual Contracts | | | | 7 All Other |
|--|------------|--------------------------------|----------------------------|------------------------------|---|-----------------------------|----------------|
| | | | 3 Non-Cancelable | 4 Guaranteed Renewable | 5 Non-Renewable for Stated Reasons Only | 6 Other Accident Only | |
| PART 2 - RESERVES AND LIABILITIES | | | | | | | |
| A. Premium Reserves: | | | | | | | |
| 1. Unearned premiums..... | 0 | | | | | | |
| 2. Advance premiums..... | 0 | | | | | | |
| 3. Reserve for rate credits..... | 0 | | | | | | |
| 4. Total premium reserves, current year..... | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 5. Total premium reserves, prior year..... | 0 | | | | | | |
| 6. Increase in total premium reserves..... | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| B. Contract Reserves: | | | | | | | |
| 1. Additional reserves..... | 0 | | | | | | |
| 2. Reserve for future contingent benefits..... | 0 | | | | | | |
| 3. Total contract reserves, current year..... | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 4. Total contract reserves, prior year..... | 0 | | | | | | |
| 5. Increase in contract reserves..... | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| C. Claim Reserves and Liabilities: | | | | | | | |
| 1. Total current year..... | 0 | | | | | | |
| 2. Total prior year..... | 0 | | | | | | |
| 3. Increase..... | 0 | 0 | 0 | 0 | 0 | 0 | 0 |

PART 3 - TEST OF PRIOR YEAR'S CLAIM RESERVES AND LIABILITIES

| | | | | | | | |
|--|---|---|---|---|---|---|---|
| 49 | | | | | | | |
| 1. Claims Paid During the Year: | | | | | | | |
| 1.1 On claims incurred prior to current year..... | 0 | | | | | | |
| 1.2 On claims incurred during current year..... | 0 | | | | | | |
| 2. Claim Reserves and Liabilities, Dec. 31, Current Year: | | | | | | | |
| 2.1 On claims incurred prior to current year..... | 0 | | | | | | |
| 2.2 On claims incurred during current year..... | 0 | | | | | | |
| 3. Test: | | | | | | | |
| 3.1 Line 1.1 plus 2.1..... | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 3.2 Claim reserves and liabilities, Dec. 31, prior year..... | 0 | | | | | | |
| 3.3 Line 3.1 minus Line 3.2..... | 0 | 0 | 0 | 0 | 0 | 0 | 0 |

PART 4 - REINSURANCE

| | | | | | | | |
|--------------------------------|---|--|--|--|--|--|--|
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| A. Reinsurance Assumed: | | | | | | | |
| 1. Premiums written..... | 0 | | | | | | |
| 2. Premiums earned..... | 0 | | | | | | |
| 3. Incurred claims..... | 0 | | | | | | |
| 4. Commissions..... | 0 | | | | | | |
| B. Reinsurance Ceded: | | | | | | | |
| 1. Premiums written..... | 0 | | | | | | |
| 2. Premiums earned..... | 0 | | | | | | |
| 3. Incurred claims..... | 0 | | | | | | |
| 4. Commissions..... | 0 | | | | | | |



SCHEDULE H - PART 5 - HEALTH CLAIMS

| | 1 Medical | 2 Dental | 3 Other | 4 Total |
|--|--------------|-------------|------------|------------|
| A. Direct: | | | | |
| 1. Incurred claims..... | | | | .0 |
| 2. Beginning claim reserves and liabilities..... | | | | .0 |
| 3. Ending claim reserves and liabilities..... | | | | .0 |
| 4. Claims paid..... | .0 | .0 | .0 | .0 |
| B. Assumed Reinsurance: | | | | |
| 5. Incurred claims..... | | | | .0 |
| 6. Beginning claim reserves and liabilities..... | | | | .0 |
| 7. Ending claim reserves and liabilities..... | | | | .0 |
| 8. Claims paid..... | .0 | .0 | .0 | .0 |
| C. Ceded Reinsurance: | | | | |
| 9. Incurred claims..... | | | | .0 |
| 10. Beginning claim reserves and liabilities..... | | | | .0 |
| 11. Ending claim reserves and liabilities..... | | | | .0 |
| 12. Claims paid..... | .0 | .0 | .0 | .0 |
| D. Net: | | | | |
| 13. Incurred claims..... | .0 | .0 | .0 | .0 |
| 14. Beginning claim reserves and liabilities..... | .0 | .0 | .0 | .0 |
| 15. Ending claim reserves and liabilities..... | .0 | .0 | .0 | .0 |
| 16. Claims paid..... | .0 | .0 | .0 | .0 |
| E. Net Incurred Claims and Cost Containment Expenses: | | | | |
| 17. Incurred claims and cost containment expenses..... | | | | .0 |
| 18. Beginning reserves and liabilities..... | | | | .0 |
| 19. Ending reserves and liabilities..... | | | | .0 |
| 20. Paid claims and cost containment expenses..... | .0 | .0 | .0 | .0 |



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

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 |
|-------------------------|-------------------------|-------------------|-------------------|----------|-----------------------------------|--|---------|----------|--|------------------------------------|---|
| NAIC Company Code | Federal ID Number | Effective Date | Name of Reinsured | Location | Type of Reinsurance Assumed | Amount of Inforce at End of Year | Reserve | Premiums | Reinsurance Payable on Paid and Unpaid Losses | Modified Coinsurance Reserve | Funds Withheld Under Coinsurance |
| | | | | | | | | | | | |

SCHEDULE S - PART 1 - SECTION 2

Reinsurance Assumed Accident and Health Insurance Listed by Reinsured Company as of December 31, Current Year

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 |
|-------------------------|-------------------------|-------------------|-------------------|----------|-----------------------------------|----------|----------------------|---|--|------------------------------------|---|
| NAIC Company Code | Federal ID Number | Effective Date | Name of Reinsured | Location | Type of Reinsurance Assumed | Premiums | Unearned Premiums | Reserve Liability Other Than for Unearned Premiums | Reinsurance Payable on Paid and Unpaid Losses | Modified Coinsurance Reserve | Funds Withheld Under Coinsurance |
| | | | | | | | | | | | |

SCHEDULE S - PART 2

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

| 1 NAIC Company Code | 2 Federal ID Number | 3 Effective Date | 4 Name of Company | 5 Location | 6 Paid Losses | 7 Unpaid Losses |
|------------------------------|------------------------------|------------------------|----------------------|---------------|------------------|--------------------|
| | | | | | | |

SCHEDULE S - PART 3 - SECTION 1

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

| 1 NAIC Company Code | 2 Federal ID Number | 3 Effective Date | 4 Name of Company | 5 Location | 6 Type of Reinsurance Ceded | 7 Amount In Force at End of Year | Reserve Credit Taken | | 10 Premiums | Outstanding Surplus Relief | | 13 Modified Coinsurance Reserve | 14 Funds Withheld Under Coinsurance |
|------------------------------|------------------------------|------------------------|----------------------|---------------|--------------------------------------|---|----------------------|--------------------|----------------|----------------------------|---------------------|--|---|
| | | | | | | | 8 Current Year | 9 Prior Year | | 11 Current Year | 12 Prior Year | | |
| | | | | | | | | | | | | | |

SCHEDULE S - PART 3 - SECTION 2

Reinsurance Ceded Accident and Health Insurance Listed by Reinsuring Company as of December 31, Current Year

| 1 NAIC Company Code | 2 Federal ID Number | 3 Effective Date | 4 Name of Company | 5 Location | 6 Type | 7 Premiums | 8 Unearned Premiums (estimated) | 9 Reserve Credit Taken Other Than for Unearned Premiums | Outstanding Surplus Relief | | 12 Modified Coinsurance Reserve | 13 Funds Withheld Under Coinsurance |
|------------------------------|------------------------------|------------------------|----------------------|---------------|-----------|---------------|--|---|----------------------------|---------------------|--|---|
| | | | | | | | | | 10 Current Year | 11 Prior Year | | |
| | | | | | | | | | | | | |

SCHEDULE S - PART 4

Reinsurance Ceded To Unauthorized Companies

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 |
|-------------------|-------------------|----------------|-------------------|----------------------|--|--------------|-------------------------|-------------------|------------------|---|-------|---------------------------------|--|
| NAIC Company Code | Federal ID Number | Effective Date | Name of Reinsurer | Reserve Credit Taken | Paid and Unpaid Losses Recoverable (Debit) | Other Debits | Total (Cols. 5 + 6 + 7) | Letters of Credit | Trust Agreements | Funds Deposited by and Withheld from Reinsurers | Other | Miscellaneous Balances (Credit) | Sum of Cols. 9 + 10 + 11 + 12 + 13 But Not in Excess of Col. 8 |
| | | | | | | | | | | | | | |

SCHEDULE S - PART 5

Five-Year Exhibit of Reinsurance Ceded Business (000 Omitted)

| | 1 2006 | 2 2005 | 3 2004 | 4 2003 | 5 2002 |
|---|-----------|-----------|-----------|-----------|-----------|
| A. OPERATIONS ITEMS | | | | | |
| 1. Premiums and annuity considerations for life and accident and health contracts..... | | | | | |
| 2. Commissions and reinsurance expense allowances..... | | | | | |
| 3. Contract claims..... | | | | | |
| 4. Surrender benefits and withdrawals for life contracts..... | | | | | |
| 5. Refunds to members..... | | | | | |
| 6. Reserve adjustments on reinsurance ceded..... | | | | | |
| 7. Increase in aggregate reserves for life and accident and health contracts..... | | | | | |
| B. BALANCE SHEET ITEMS | | | | | |
| 8. Premiums and annuity considerations for life and accident and health contracts deferred and uncollected..... | | | | | |
| 9. Aggregate reserves for life and accident and health contracts..... | | | | | |
| 10. Liability for deposit-type contracts..... | | | | | |
| 11. Contract claims unpaid..... | | | | | |
| 12. Amounts recoverable on reinsurance..... | | | | | |
| 13. Experience rating refunds due or unpaid..... | | | | | |
| 14. Refunds to members (not included in Line 10)..... | | | | | |
| 15. Commissions and reinsurance expense allowances unpaid..... | | | | | |
| 16. Unauthorized reinsurance offset..... | | | | | |
| C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM) | | | | | |
| 17. Funds deposited by and withheld from (F)..... | | | | | |
| 18. Letters of credit (L)..... | | | | | |
| 19. Trust agreements (T)..... | | | | | |
| 20. Other (O)..... | | | | | |



SCHEDULE S - PART 6

Restatement of Balance Sheet to Identify Net Credit for Ceded Reinsurance

| | 1 As Reported (Net of Ceded) | 2 Restatement Adjustments | 3 Restated (Gross of Ceded) |
|---|------------------------------------|---------------------------------|-----------------------------------|
| ASSETS (Page 2, Col. 3) | | | |
| 1. Cash and invested assets (Line 10)..... | | | .0 |
| 2. Reinsurance (Line 14)..... | | | .0 |
| 3. Premiums and considerations (Line 13)..... | | | .0 |
| 4. Net credit for ceded reinsurance..... | .XXX | | .0 |
| 5. All other admitted assets (balance)..... | | | .0 |
| 6. Total assets excluding separate accounts (Line 24)..... | .0 | .0 | .0 |
| 7. Separate account assets (Line 25)..... | | | .0 |
| 8. Total assets (Line 26)..... | .0 | .0 | .0 |
| LIABILITIES, SURPLUS AND OTHER FUNDS (Page 3) | | | |
| 9. Contract reserves (Lines 1 and 2)..... | | | .0 |
| 10. Liability for deposit-type contracts (Line 3)..... | | | .0 |
| 11. Claim reserves (Line 4)..... | | | .0 |
| 12. Member refunds/reserves (Lines 5 through 6)..... | | | .0 |
| 13. Premium & annuity considerations received in advance (Line 7)..... | | | .0 |
| 14. Other contract liabilities (Line 8)..... | | | .0 |
| 15. Reinsurance in unauthorized companies (Line 21.2)..... | | | .0 |
| 16. Funds held under reinsurance with unauthorized reinsurance (Line 21.3)..... | | .XXX | .0 |
| 17. All other liabilities (balance)..... | | | .0 |
| 18. Total liabilities excluding Separate Accounts (Line 23)..... | .0 | .0 | .0 |
| 19. Separate Account liabilities (Line 24)..... | | | .0 |
| 20. Total liabilities (Line 25)..... | .0 | .0 | .0 |
| 21. Capital & surplus (Line 30)..... | | .XXX | .0 |
| 22. Total liabilities, capital & surplus (Line 31)..... | .0 | .0 | .0 |
| NET CREDIT FOR CEDED REINSURANCE | | | |
| 23. Contract reserves..... | | | .0 |
| 24. Claim reserves..... | | | .0 |
| 25. Member refunds/reserves..... | | | .0 |
| 26. Premium & annuity considerations received in advance..... | | | .0 |
| 27. Liability for deposit-type contracts..... | | | .0 |
| 28. Other contract liabilities..... | | | .0 |
| 29. Reinsurance ceded assets..... | | | .0 |
| 30. Other ceded reinsurance recoverables..... | | | .0 |
| 31. Total ceded reinsurance recoverables..... | | | .0 |
| 32. Premiums and considerations..... | | | .0 |
| 33. Reinsurance in unauthorized companies..... | | | .0 |
| 34. Other ceded reinsurance payables/offsets..... | | | .0 |
| 35. Total ceded reinsurance payables/offsets..... | | | .0 |
| 36. Total net credit for ceded reinsurance..... | | | .0 |



SCHEDULE T - PREMIUMS AND ANNUITY CONSIDERATIONS

Allocated by States and Territories

| | States, Etc. | 1 Is Insurer Licensed? (Yes or No) | Life Contracts | | 4 Accident and Health Insurance Premiums, Including Policy, Mem- bership and Other Fees | 5 Deposit-Type Contract Funds | 6 Other Considerations |
|-----|---|---|---------------------------------|--------------------------------|---|--|------------------------------|
| | | | 2 Life Insurance Premiums | 3 Annuity Considerations | | | |
| 1. | Alabama..... | AL | | | | | |
| 2. | Alaska..... | AK | | | | | |
| 3. | Arizona..... | AZ | | | | | |
| 4. | Arkansas..... | AR | | | | | |
| 5. | California..... | CA | | | | | |
| 6. | Colorado..... | CO | | | | | |
| 7. | Connecticut..... | CT | | | | | |
| 8. | Delaware..... | DE | | | | | |
| 9. | District of Columbia..... | DC | | | | | |
| 10. | Florida..... | FL | | | | | |
| 11. | Georgia..... | GA | | | | | |
| 12. | Hawaii..... | HI | | | | | |
| 13. | Idaho..... | ID | | | | | |
| 14. | Illinois..... | IL | | | | | |
| 15. | Indiana..... | IN | | | | | |
| 16. | Iowa..... | IA | | | | | |
| 17. | Kansas..... | KS | | | | | |
| 18. | Kentucky..... | KY | | | | | |
| 19. | Louisiana..... | LA | | | | | |
| 20. | Maine..... | ME | | | | | |
| 21. | Maryland..... | MD | | | | | |
| 22. | Massachusetts..... | MA | | | | | |
| 23. | Michigan..... | MI | | | | | |
| 24. | Minnesota..... | MN | | | | | |
| 25. | Mississippi..... | MS | | | | | |
| 26. | Missouri..... | MO | | | | | |
| 27. | Montana..... | MT | | | | | |
| 28. | Nebraska..... | NE | | | | | |
| 29. | Nevada..... | NV | | | | | |
| 30. | New Hampshire..... | NH | | | | | |
| 31. | New Jersey..... | NJ | | | | | |
| 32. | New Mexico..... | NM | | | | | |
| 33. | New York..... | NY | | | | | |
| 34. | North Carolina..... | NC | | | | | |
| 35. | North Dakota..... | ND | | | | | |
| 36. | Ohio..... | OH | | | | | |
| 37. | Oklahoma..... | OK | | | | | |
| 38. | Oregon..... | OR | | | | | |
| 39. | Pennsylvania..... | PA | | | | | |
| 40. | Rhode Island..... | RI | | | | | |
| 41. | South Carolina..... | SC | | | | | |
| 42. | South Dakota..... | SD | | | | | |
| 43. | Tennessee..... | TN | | | | | |
| 44. | Texas..... | TX | | | | | |
| 45. | Utah..... | UT | | | | | |
| 46. | Vermont..... | VT | | | | | |
| 47. | Virginia..... | VA | | | | | |
| 48. | Washington..... | WA | | | | | |
| 49. | West Virginia..... | WV | | | | | |
| 50. | Wisconsin..... | WI | | | | | |
| 51. | Wyoming..... | WY | | | | | |
| 52. | American Samoa..... | AS | | | | | |
| 53. | Guam..... | GU | | | | | |
| 54. | Puerto Rico..... | PR | | | | | |
| 55. | US Virgin Islands..... | VI | | | | | |
| 56. | Northern Mariana Islands..... | MP | | | | | |
| 57. | Canada..... | CN | | | | | |
| 58. | Aggregate Other Alien..... | OT | XXX | 0 | 0 | 0 | 0 |
| 59. | Subtotal..... | (a) | XXX | 0 | 0 | 0 | 0 |
| 90. | Reporting entity contributions for employee benefit plans..... | XXX | | | | | |
| 91. | Dividends or refunds applied to purchase paid-up additions and annuities..... | XXX | | | | | |
| 92. | Dividends or refunds applied to shorten endowment or premium paying period..... | XXX | | | | | |
| 93. | Premium or annuity considerations waived under disability or other contract provisions..... | XXX | | | | | |
| 94. | Aggregate other amounts not allocable by State..... | XXX | 0 | 0 | 0 | 0 | 0 |
| 95. | Totals (Direct Business)..... | XXX | 0 | 0 | 0 | 0 | 0 |
| 96. | Plus Reinsurance Assumed..... | XXX | | | | | |
| 97. | Totals (All Business)..... | XXX | 0 | 0 | 0 | 0 | 0 |
| 98. | Less Reinsurance Ceded..... | XXX | | | | | |
| 99. | Totals (All Business) less reinsurance ceded..... | XXX | 0 | 0 | (b) | 0 | 0 |

DETAILS OF WRITE-INS

| | | | | | | | |
|-------|--|-----|---|---|---|---|---|
| 5801. | ..... | XXX | | | | | |
| 5802. | ..... | XXX | | | | | |
| 5803. | ..... | XXX | | | | | |
| 5898. | Summary of remaining write-ins for line 58 from overflow page..... | XXX | 0 | 0 | 0 | 0 | 0 |
| 5899. | Total (Lines 5801 thru 5803 plus 5898) (Line 58 above)..... | XXX | 0 | 0 | 0 | 0 | 0 |
| 9401. | ..... | XXX | | | | | |
| 9402. | ..... | XXX | | | | | |
| 9403. | ..... | XXX | | | | | |
| 9498. | Summary of remaining write-ins for line 94 from overflow page..... | XXX | 0 | 0 | 0 | 0 | 0 |
| 9499. | Total (Lines 9401 thru 9403 plus 9498) (Line 94 above)..... | XXX | 0 | 0 | 0 | 0 | 0 |

Explanation of basis of allocation by states, etc., of premiums and annuity considerations.



(a) Insert the number of yes responses except for Canada and Other Alien.

(b) Column 4 should balance with Exhibit 1, Lines 6.4, 10.4 and 16.4, Col. 4 or with Schedule H, Part 1, Column 1, Line 1. Indicate which:



SCHEDULE T - PART 2

INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

| | | | Direct Business Only | | | | 6 Totals | |
|--------------|-------------------------------|----|--|---|---|--|-------------|--------------------------------|
| | | | 1 Life (Group and Individual) | 2 Annuities (Group and Individual) | 3 Disability Income (Group and Individual) | 4 Long-Term Care (Group and Individual) | | 5 Deposit-Type Contracts |
| States, Etc. | | | | | | | | |
| 1. | Alabama..... | AL | | | | | | 0 |
| 2. | Alaska..... | AK | | | | | | 0 |
| 3. | Arizona..... | AZ | | | | | | 0 |
| 4. | Arkansas..... | AR | | | | | | 0 |
| 5. | California..... | CA | | | | | | 0 |
| 6. | Colorado..... | CO | | | | | | 0 |
| 7. | Connecticut..... | CT | | | | | | 0 |
| 8. | Delaware..... | DE | | | | | | 0 |
| 9. | District of Columbia..... | DC | | | | | | 0 |
| 10. | Florida..... | FL | | | | | | 0 |
| 11. | Georgia..... | GA | | | | | | 0 |
| 12. | Hawaii..... | HI | | | | | | 0 |
| 13. | Idaho..... | ID | | | | | | 0 |
| 14. | Illinois..... | IL | | | | | | 0 |
| 15. | Indiana..... | IN | | | | | | 0 |
| 16. | Iowa..... | IA | | | | | | 0 |
| 17. | Kansas..... | KS | | | | | | 0 |
| 18. | Kentucky..... | KY | | | | | | 0 |
| 19. | Louisiana..... | LA | | | | | | 0 |
| 20. | Maine..... | ME | | | | | | 0 |
| 21. | Maryland..... | MD | | | | | | 0 |
| 22. | Massachusetts..... | MA | | | | | | 0 |
| 23. | Michigan..... | MI | | | | | | 0 |
| 24. | Minnesota..... | MN | | | | | | 0 |
| 25. | Mississippi..... | MS | | | | | | 0 |
| 26. | Missouri..... | MO | | | | | | 0 |
| 27. | Montana..... | MT | | | | | | 0 |
| 28. | Nebraska..... | NE | | | | | | 0 |
| 29. | Nevada..... | NV | | | | | | 0 |
| 30. | New Hampshire..... | NH | | | | | | 0 |
| 31. | New Jersey..... | NJ | | | | | | 0 |
| 32. | New Mexico..... | NM | | | | | | 0 |
| 33. | New York..... | NY | | | | | | 0 |
| 34. | North Carolina..... | NC | | | | | | 0 |
| 35. | North Dakota..... | ND | | | | | | 0 |
| 36. | Ohio..... | OH | | | | | | 0 |
| 37. | Oklahoma..... | OK | | | | | | 0 |
| 38. | Oregon..... | OR | | | | | | 0 |
| 39. | Pennsylvania..... | PA | | | | | | 0 |
| 40. | Rhode Island..... | RI | | | | | | 0 |
| 41. | South Carolina..... | SC | | | | | | 0 |
| 42. | South Dakota..... | SD | | | | | | 0 |
| 43. | Tennessee..... | TN | | | | | | 0 |
| 44. | Texas..... | TX | | | | | | 0 |
| 45. | Utah..... | UT | | | | | | 0 |
| 46. | Vermont..... | VT | | | | | | 0 |
| 47. | Virginia..... | VA | | | | | | 0 |
| 48. | Washington..... | WA | | | | | | 0 |
| 49. | West Virginia..... | WV | | | | | | 0 |
| 50. | Wisconsin..... | WI | | | | | | 0 |
| 51. | Wyoming..... | WY | | | | | | 0 |
| 52. | American Samoa..... | AS | | | | | | 0 |
| 53. | Guam..... | GU | | | | | | 0 |
| 54. | Puerto Rico..... | PR | | | | | | 0 |
| 55. | US Virgin Islands..... | VI | | | | | | 0 |
| 56. | Northern Mariana Islands..... | MP | | | | | | 0 |
| 57. | Canada..... | CN | | | | | | 0 |
| 58. | Aggregate Other Alien..... | OT | | | | | | 0 |
| 59. | Totals..... | | 0 | 0 | 0 | 0 | 0 | 0 |



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

PART 1 - ORGANIZATIONAL CHART

SCHEDULE Y (Continued)

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

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 |
|-------------------------|-------------------------|--|--------------------------|--------------------------|---|---|---|---|----|--|--------|---|
| NAIC Company Code | Federal ID Number | Names of Insurers and Parent, Subsidiaries or Affiliates | Shareholder Dividends | Capital Contributions | Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments | Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s) | Management Agreements and Service Contracts | Income/ (Disbursements) Incurred under Reinsurance Agreements | * | Any Other Material Activity Not in the Ordinary Course of the Insurer's Business | Totals | Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability) |
| | | | | | | | | | | | | |

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.

MARCH FILING

1. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?
2. Will an actuarial opinion be filed with this statement by March 1?

APRIL FILING

3. Will Management's Discussion and Analysis be filed by April 1?

4. Will the Supplemental Investment Risk Interrogatories be filed by April 1?

JUNE FILING

5. Will an audited financial report be filed by June 1?

Responses

| |
|----------------------|
| ERROR-Enter Response |

The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the 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.

MARCH FILING

6. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?
7. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?
8. Will the actuarial opinion on participating and non-participating policies as required in Interrogatories 1 and 2 to Exhibit 5 be filed by March 1?
9. Will the actuarial opinion on non-guaranteed elements as required in interrogatory #3 to Exhibit 5 be filed by March 1?
10. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?

APRIL FILING

11. Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?
12. Will the Interest-Sensitive Life Insurance Products Report Forms be filed with the state of domicile and the NAIC by April 1?
13. Will the Accident and Health Policy Experience Exhibit be filed by April 1?

| |
|----------------------|
| ERROR-Enter Response |

EXPLANATIONS:

BAR CODE:



Overflow Page for Write-Ins

Overflow Page for Write-Ins

SCHEDULE A - PART 1

Showing all Real Estate OWNED December 31 of Current Year

| 1 | 2 | Location | | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 |
|----------------------------|------|----------|-------|------------------|------------------------------|-------------|---------------------------|---|------------------------------------|---|--|------------------------------------|--|--|---|
| Description of Property | Code | 3 | 4 | Date Acquired | Date of Last Appraisal | Actual Cost | Amount of Encumbrances | Book/Adjusted Carrying Value Less Encumbrances | Fair Value Less Encumbrances | Increase (Decrease) by Adjustment | Increase (Decrease) by Foreign Exchange Adjustment | Amounts Received During Year | Expended for Additions, Permanent Improvements and Changes in Encumbrances During Year | Gross Income Earned Less Interest Incurred on Encumbrances | Taxes, Repairs, and Expenses Incurred |
| | | City | State | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |

SCHEDULE A - PART 2

Showing all Real Estate ACQUIRED During the Year

| 1 | Location | | 4 | 5 | 6 | 7 | 8 | 9 |
|-------------------------|----------|-------|------------------|----------------|-------------|---------------------------|---|--|
| Description of Property | 2 | 3 | Date Acquired | Name of Vendor | Actual Cost | Amount of Encumbrances | Book/Adjusted Carrying Value Less Encumbrances | Expended for Additions and Permanent Improvements |
| | City | State | | | | | | |
| | | | | | | | | |

SCHEDULE A - PART 3

Showing all Real Estate SOLD During the Year, Including Payments During the Final Year on "Sales under Contract"

| 1 | Location | | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 |
|-------------------------|----------|-------|---------------|-------------------|-------------|-----------------------------------|--|--|--|------------------|--|--------------------------------|-----------------------------|--|---------------------------------------|
| | 2 | 3 | | | | | | | | | | | | | |
| Description of Property | City | State | Disposal Date | Name of Purchaser | Actual Cost | Increase (Decrease) by Adjustment | Increase (Decrease) by Foreign Exchange Adjustment | Expended for Additions, Permanent Improvements and Changes in Encumbrances | Book/Adjusted Carrying Value Less Encumbrances | Amounts Received | Foreign Exchange Profit (Loss) on Sale | Realized Profit (Loss) on Sale | Total Profit (Loss) on Sale | Gross Income Earned Less Interest Incurred on Encumbrances | Taxes, Repairs, and Expenses Incurred |
| | | | | | | | | | | | | | | | |

SCHEDULE B - PART 1

Showing all Mortgage Loans OWNED December 31 of Current Year

| 1 | 2 | Location | | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 |
|-------------|------|-----------|------------|-----------|---------------|------------------|---|-----------------------------------|--|-----------------------------|-------------------------------------|
| Loan Number | Code | 3 City | 4 State | Loan Type | Date Acquired | Rate of Interest | Book Value/Recorded Investment Excluding Accrued Interest | Increase (Decrease) by Adjustment | Increase (Decrease) by Foreign Exchange Adjustment | Value of Land and Buildings | Date of Last Appraisal or Valuation |

General Interrogatory:

1. Mortgages in good standing \$.....0 unpaid taxes \$.....0 interest due and unpaid.
2. Restructured mortgages \$.....0 unpaid taxes \$.....0 interest due and unpaid.
3. Mortgages with overdue interest over 90 days not in process of foreclosure \$.....0 unpaid taxes \$.....0 interest due and unpaid.
4. Mortgages in process of foreclosure \$.....0 unpaid taxes \$.....0 interest due and unpaid.



SCHEDULE B - PART 2

Showing all Mortgage Loans SOLD, Transferred or Paid in Full During the Year

| 1 | Location | | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 |
|-------------|----------|-------|-----------|---------------|--|-----------------------------------|--|--|------------------------|--|--------------------------------|-----------------------------|
| Loan Number | 2 | 3 | Loan Type | Date Acquired | Book Value/Recorded Investment Excluding Accrued Interest Prior Year | Increase (Decrease) by Adjustment | Increase (Decrease) by Foreign Exchange Adjustment | Book Value/Recorded Investment Excluding Accrued Interest at Disposition | Consideration Received | Foreign Exchange Profit (Loss) on Sale | Realized Profit (Loss) on Sale | Total Profit (Loss) on Sale |
| Loan Number | City | State | | | | | | | | | | |
| | | | | | | | | | | | | |

SCHEDULE BA - PART 1

Showing Other Long-Term Invested Assets OWNED December 31 of Current Year

| 1 | 2 | 3 | Location | | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 |
|----------------------|---------------------|------|----------|-------|-----------------------------------|------------------|--------------------------|-------------------|-------------|---|------------|------------------------|--|-----------------------------------|--|-------------------|--------------------------------------|-------------------------|
| CUSIP Identification | Name or Description | Code | 4 | 5 | Name of Vendor or General Partner | NAIC Designation | Date Originally Acquired | Type and Strategy | Actual Cost | Additional Investment During Year Actual Cost | Fair Value | Amount of Encumbrances | Book/Adjusted Carrying Value Less Encumbrances | Increase (Decrease) by Adjustment | Increase (Decrease) by Foreign Exchange Adjustment | Investment Income | Commitment for Additional Investment | Percentage of Ownership |
| | | | City | State | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | |

SCHEDULE BA - PART 2

Showing Other Long-Term Invested Assets SOLD, Transferred or Paid in Full During the Year

| 1 | 2 | Location | | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 |
|----------------------|---------------------|----------|---|---|--------------------------|--|-----------------------------------|--|--|------------------------|--|----------------------------------|-------------------------------|-------------------|
| CUSIP Identification | Name or Description | 3 | 4 | Name of Purchaser or Nature of Disposal | Date Originally Acquired | Book/Adjusted Carrying Value Less Encumbrances, Prior Year | Increase (Decrease) by Adjustment | Increase (Decrease) by Foreign Exchange Adjustment | Book/Adjusted Carrying Value Less Encumbrances on Disposal | Consideration Received | Foreign Exchange Gain (Loss) on Disposal | Realized Gain (Loss) on Disposal | Total Gain (Loss) on Disposal | Investment Income |
| | | | | | | | | | | | | | | |

SCHEDULE D - PART 1

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

| 1 | 2 | Codes | | | 6 | 7 | Fair Value | | 10 | 11 | Change in Book/Adjusted Carrying Value | | | | Interest | | | | | Dates | |
|-------------------------|-------------|-------|---------------------------------|--------------|--------------------------|-------------|---|---------------|-----------|---------------------------------|--|---|--|--|------------|-------------------------|-------------|--|---|----------|----------|
| | | 3 | 4 | 5 | | | 8 | 9 | | | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 |
| CUSIP Identification | Description | * | F o r e i g n | Bond Char | NAIC Desig- nation | Actual Cost | Rate Used to Obtain Fair Value | Fair Value | Par Value | Book/Adjusted Carrying Value | Unrealized Valuation Increase/ (Decrease) | Current Year's (Amortization)/ Accretion | Current Year's Other Than Temporary Impairment Recognized | Total Foreign Exchange Change in B./A.C.V. | Rate of | Effective Rate of | How Paid | Admitted Amount Due and Accrued | Gross Amount Received During Year | Acquired | Maturity |
| | | | | | | | | | | | | | | | | | | | | | |

SCHEDULE D - PART 2 - SECTION 1

Showing all PREFERRED STOCKS Owned December 31 of Current Year

| 1 | 2 | Codes | | 5 | 6 | 7 | 8 | Fair Value | | 11 | Dividends | | | Change in Book/Adjusted Carrying Value | | | | 20 | 21 | |
|-------------------------|-------------|-------|---------------------------------|------------------------|------------------------------|----------------------|--|---|---------------|----------------|---------------------------|--------------------------------------|--|--|---|---|--|---|--------------------------|------------------|
| | | 3 | 4 | | | | | 9 | 10 | | 12 | 13 | 14 | 15 | 16 | 17 | 18 | | | 19 |
| CUSIP Identification | Description | Code | F o r e i g n | Number of Shares | Par Value Per Share | Rate Per Share | Book/ Adjusted Carrying Value | Rate Per Share Used to Obtain Fair Value | Fair Value | Actual Cost | Declared but Unpaid | Amount Received During Year | Nonadmitted Declared but Unpaid | Unrealized Valuation Increase/ (Decrease) | Current Year's (Amortization)/ Accretion | Current Year's Other Than Temporary Impairment Recognized | Total Change in B./A.C.V. (15+16-17) | Total Foreign Exchange Change in B./A.C.V. | NAIC Desig- nation | Date Acquired |
| | | | | | | | | | | | | | | | | | | | | |

SCHEDULE D - PART 2 - SECTION 2

Showing all COMMON STOCKS Owned December 31 of Current Year

| 1 | 2 | Codes | | 5 | 6 | Fair Value | | 9 | Dividends | | | Change in Book/Adjusted Carrying Value | | | 17 | 18 | |
|-------------------------|-------------|-------|---------------------------------|------------------------|--|---|---------------|----------------|---------------------------|--------------------------------------|--|--|--|---|---|------------------------------------|------------------|
| | | 3 | 4 | | | 7 | 8 | | 10 | 11 | 12 | 13 | 14 | 15 | | | 16 |
| CUSIP Identification | Description | Code | F o r e i g n | Number of Shares | Book/ Adjusted Carrying Value | Rate Per Share Used to Obtain Fair Value | Fair Value | Actual Cost | Declared but Unpaid | Amount Received During Year | Nonadmitted Declared but Unpaid | Unrealized Valuation Increase/ (Decrease) | Current Year's Other Than Temporary Impairment Recognized | Total Change in B./A.C.V. (13-14) | Total Foreign Exchange Change in B./A.C.V. | NAIC Market Indicator (a) | Date Acquired |

(a) For all common stocks bearing the NAIC market indicator "U" provide: the number of such issues.....0, the total \$ value (included in Column 8) of all such issues \$.....0.

SCHEDULE D - PART 3

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

| 1 CUSIP Identification | 2 Description | 3 Foreign | 4 Date Acquired | 5 Name of Vendor | 6 Number of Shares of Stock | 7 Actual Cost | 8 Par Value | 9 Paid for Accrued Interest and Dividends |
|------------------------------|------------------|--------------|-----------------------|---------------------|-----------------------------------|---------------------|-------------------|---|
|------------------------------|------------------|--------------|-----------------------|---------------------|-----------------------------------|---------------------|-------------------|---|



SCHEDULE D - PART 4

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

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | Change in Book/Adjusted Carrying Value | | | | | 16 | 17 | 18 | 19 | 20 | 21 |
|-------------------------|-------------|---------------------------------|------------------|-------------------|---------------------------------|---------------|--------------|----------------|--|--|---|--|---|--|---|---|--|---|---|------------------|
| | | | | | | | | | | 11 | 12 | 13 | 14 | 15 | | | | | | |
| CUSIP Identification | Description | F o r e i g n | Disposal Date | Name of Purchaser | Number of Shares of Stock | Consideration | Par Value | Actual Cost | Prior Year Book/ Adjusted Carrying Value | Unrealized Valuation Increase/ (Decrease) | Current Year's (Amortization)/ Accretion | Current Year's Other Than Temporary Impairment Recognized | Total Change in B./A.C.V. (11+12-13) | Total Foreign Exchange Change in B./A.C.V. | Book/ Adjusted Carrying Value at Disposal Date | Foreign Exchange Gain (Loss) on Disposal | Realized Gain (Loss) on Disposal | Total Gain (Loss) on Disposal | Bond Interest/ Stock Dividends Received During Year | Maturity Date |
| | | | | | | | | | | | | | | | | | | | | |

SCHEDULE D - PART 5

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

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | Change in Book/Adjusted Carrying Value | | | | 17 | 18 | 19 | 20 | 21 | |
|-------------------------|-------------|---------------------------------|------------------|----------------|------------------|-------------------|--|----------------|---------------|---|--|--|--|---|--|--|--|---|--|---|
| | | | | | | | | | | | 12 | 13 | 14 | 15 | | | | | | 16 |
| CUSIP Identification | Description | F o r e i g n | Date Acquired | Name of Vendor | Disposal Date | Name of Purchaser | Par Value (Bonds) or Number of Shares (Stock) | Actual Cost | Consideration | Book/ Adjusted Carrying Value at Disposal Date | Unrealized Valuation Increase/ (Decrease) | Current Year's (Amortization) Accretion | Current Year's Other Than Temporary Impairment Recognized | Total Change in B./A.C.V. (12+13-14) | Total Foreign Exchange Change in B./A.C.V. | Foreign Exchange Gain (Loss) on Disposal | Realized Gain (Loss) on Disposal | Total Gain (Loss) on Disposal | Interest and Dividends Received During Year | Paid for Accrued Interest and Dividends |
| | | | | | | | | | | | | | | | | | | | | |

SCHEDULE D - PART 6 - SECTION 1

Valuation of Shares of Subsidiary, Controlled or Affiliated Companies

| 1 CUSIP Identifi- cation | 2 Description Name of Subsidiary, Controlled or Affiliated Company | 3 Foreign | 4 NAIC Company Code or Alien Insurer Identification Number | 5 NAIC Valuation Method (See SVO Purposes and Procedures Manual) | 6 Do Insurer's Assets Include Intangible Assets Connected with Holding of Such Company's Stock? | 7 Total Amount of Such Intangible Assets | 8 Book/Adjusted Carrying Value | Stock of Such Company Owned by Insurer on Statement Date | |
|-----------------------------------|---|--------------|--|--|---|--|---|--|---------------------------|
| | | | | | | | | 9 Number of Shares | 10 % of Outstanding |

1. Amount of insurer's capital and surplus from the prior period's statutory statement reduced by any admitted EDP, goodwill and net deferred tax assets included therein: \$.....0.
2. Total amount of intangible assets nonadmitted \$.....0.

SCHEDULE D - PART 6 - SECTION 2

| 1 CUSIP Identifi- cation | 2 Name of Lower-Tier Company | 3 Name of Company Listed in Section 1 Which Controls Lower-Tier Company | 4 Total Amount of Intangible Assets Included in Amount Shown in Column 7, Section 1 | Stock in Lower-Tier Company Owned Indirectly by Insurer on Statement Date | |
|-----------------------------------|---------------------------------|---|--|--|-----------------------|
| | | | | 5 Number of Shares | 6 % of Outstanding |

SCHEDULE DA - PART 1

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

| 1 Description | Codes | | 4 Date Acquired | 5 Name of Vendor | 6 Maturity Date | 7 Book/ Adjusted Carrying Value | Change in Book/Adjusted Carrying Value | | | 12 Par Value | 13 Actual Cost | Interest | | | | | 20 Paid for Accrued Interest | |
|------------------|-----------|--------------------------------------|-----------------------|---------------------|-----------------------|---|---|--|--|--------------------|----------------------|--|---|--|---------------|----------------------------|---------------------------------------|-------------------|
| | 2 Code | 3 F o r e i g n | | | | | 8 Unrealized Valuation Increase/ (Decrease) | 9 Current Year's (Amortization)/ Accretion | 10 Current Year's Other Than Temporary Impairment Recognized | | | 11 Total Foreign Exchange Change in B./A.C.V. | 14 Amount Due and Accrued December 31 of Current Year on Bond Not in Default | 15 Non- Admitted Due and Accrued | 16 Rate of | 17 Effective Rate of | | 18 How Paid | 19 Gross Amount Received |
| | | | | | | | | | | | | | | | | | | |

SCHEDULE DB - PART A - SECTION 1

Showing all Options, Caps, Floors and Insurance Futures Options Owned December 31 of Current Year

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 |
|-------------|--|---|-----------------------------|---------------------|--------------------------|----------------------|------------|---|-----------------|------------|------------------------------------|-------------------------------------|--|
| Description | Number of Contracts or Notional Amount | Date of Maturity, Expiry, or Settlement | Strike Price, Rate or Index | Date of Acquisition | Exchange or Counterparty | Cost/ Option Premium | Book Value | * | Statement Value | Fair Value | Increase/ (Decrease) by Adjustment | Used to Adjust Basis of Hedged Item | Other Investment/ Miscellaneous Income |

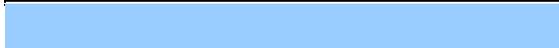


E16

SCHEDULE DB - PART A - SECTION 2

Showing all Options, Caps, Floors and Insurance Futures Options Acquired During Current Year

| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
|-------------|--|---|-----------------------------|---------------------|--------------------------|----------------------|
| Description | Number of Contracts or Notional Amount | Date of Maturity, Expiry, or Settlement | Strike Price, Rate or Index | Date of Acquisition | Exchange or Counterparty | Cost/ Option Premium |



SCHEDULE DB - PART A - SECTION 3

Showing all Owned Options, Caps, Floors and Insurance Futures Options Terminated During Current Year

| 1 Description | 2 Number of Contracts or Notional Amount | 3 Date of Maturity, Expiry, or Settlement | 4 Strike Price, Rate or Index | 5 Date of Acquisition | 6 Exchange or Counterparty | 7 Cost/Option Premium | 8 Indicate Exercise, Expiration, Maturity or Sale | 9 Termination Date | 10 Book Value | 11 * | 12 Consideration Received on Terminations | 13 Increase/ (Decrease) by Adjustment | Gain/(Loss) on Termination | | | 17 Other Investment/ Miscellaneous Income |
|------------------|---|--|----------------------------------|--------------------------|-------------------------------|--------------------------|--|-----------------------|------------------|---------|--|--|----------------------------|---|----------------|--|
| | | | | | | | | | | | | | 14 Recognized | 15 Used to Adjust Basis of Hedged Item | 16 Deferred | |
| | | | | | | | | | | | | | | | | |

E17

SCHEDULE DB - PART B - SECTION 1

Showing all Options, Caps, Floors and Insurance Futures Options Written and In-Force December 31 of Current Year

| 1 Description | 2 Number of Contracts or Notional Amount | 3 Date of Maturity, Expiry, or Settlement | 4 Strike Price, Rate or Index | 5 Date of Issuance/ Purchase | 6 Exchange or Counterparty | 7 Consideration Received | 8 Book Value | 9 * | 10 Statement Value | 11 Fair Value | 12 Increase/ (Decrease) by Adjustment | 13 Used to Adjust Basis | 14 Other Investment/ Miscellaneous Income |
|------------------|---|--|----------------------------------|---------------------------------|-------------------------------|-----------------------------|-----------------|--------|-----------------------|------------------|--|----------------------------|--|
| | | | | | | | | | | | | | |

SCHEDULE DB - PART B - SECTION 2

Showing all Options, Caps, Floors and Insurance Futures Options Written During Current Year

| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
|-------------|--|---|-----------------------------|----------------------------|--------------------------|------------------------|
| Description | Number of Contracts or Notional Amount | Date of Maturity, Expiry, or Settlement | Strike Price, Rate or Index | Date of Issuance/ Purchase | Exchange or Counterparty | Consideration Received |

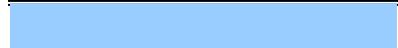


E18

SCHEDULE DB - PART B - SECTION 3

Showing all Written Options, Caps, Floors and Insurance Futures Options Terminated During Current Year

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | Gain/(Loss) on Termination | | | 17 |
|-------------|--|---|-----------------------------|----------------------------|--------------------------|------------------------|---|------------------|------------|----|------------------------------------|-----------------------------------|----------------------------|----------------------|----------|--|
| | | | | | | | | | | | | | 14 | 15 | 16 | |
| Description | Number of Contracts or Notional Amount | Date of Maturity, Expiry, or Settlement | Strike Price, Rate or Index | Date of Issuance/ Purchase | Exchange or Counterparty | Consideration Received | Indicate Exercise, Expiration, Maturity or Closing Purchase Transaction | Termination Date | Book Value | * | Consideration Paid on Terminations | Increase (Decrease) by Adjustment | Recognized | Used to Adjust Basis | Deferred | Other Investment/ Miscellaneous Income |



SCHEDULE DB - PART C - SECTION 1

Showing all Collar, Swap and Forwards Open December 31 of Current Year

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 |
|-------------|-----------------|---|---------------------------------------|---------------------------------------|--------------------------|----------------------------------|------------|---|-----------------|------------|-----------------------------------|-------------------------------------|--|--------------------|
| Description | Notional Amount | Date of Maturity, Expiry, or Settlement | Strike Price, Rate or Index Rec (Pay) | Date of Opening Position or Agreement | Exchange or Counterparty | Cost or (Consideration Received) | Book Value | * | Statement Value | Fair Value | Increase (Decrease) by Adjustment | Used to Adjust Basis of Hedged Item | Other Investment/ Miscellaneous Income | Potential Exposure |
| | | | | | | | | | | | | | | |

E19

SCHEDULE DB - PART C - SECTION 2

Showing all Collar, Swap and Forwards Opened During Current Year

| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
|-------------|-----------------|---|---------------------------------------|---------------------------------------|--------------------------|----------------------------------|
| Description | Notional Amount | Date of Maturity, Expiry, or Settlement | Strike Price, Rate or Index Rec (Pay) | Date of Opening Position or Agreement | Exchange or Counterparty | Cost or (Consideration Received) |
| | | | | | | |

SCHEDULE DB - PART C - SECTION 3

Showing all Collar, Swap and Forwards Terminated During Current Year

| 1 Description | 2 Notional Amount | 3 Date of Maturity, Expiry, or Settlement | 4 Strike Price, Rate or Index Rec (Pay) | 5 Date of Opening Position or Agreement | 6 Exchange or Counterparty | 7 Cost or (Consideration Received) | 8 Indicate Exercise, Expiration, Maturity or Sale | 9 Termination Date | 10 Book Value | 11 * | 12 Consideration Received or (Paid) on Terminations | 13 Increase (Decrease) by Adjustment | Gain/(Loss) on Termination | | | 17 Other Investment/Miscellaneous Income |
|------------------|----------------------|--|--|--|-------------------------------|---------------------------------------|--|-----------------------|------------------|---------|--|---|----------------------------|---|----------------|---|
| | | | | | | | | | | | | | 14 Recognized | 15 Used to Adjust Basis of Hedged Item | 16 Deferred | |
| | | | | | | | | | | | | | | | | |

E20

SCHEDULE DB - PART D - SECTION 1

Showing all Futures Contracts and Insurance Futures Contracts Open December 31 of Current Year

| 1 Description | 2 Number of Contracts | 3 Maturity Date | 4 Original Value | 5 Current Value | 6 Variation Margin | 7 Date of Opening Position | 8 Exchange or Counterparty | 9 Cash Deposit | Variation Margin Information | | | 13 Potential Exposure |
|------------------|--------------------------|--------------------|---------------------|--------------------|-----------------------|-------------------------------|-------------------------------|-------------------|------------------------------|---|----------------|--------------------------|
| | | | | | | | | | 10 Recognized | 11 Used to Adjust Basis of Hedged Item | 12 Deferred | |
| | | | | | | | | | | | | |

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SCHEDULE DB - PART D - SECTION 2

Showing all Futures Contracts and Insurance Futures Contracts Opened During Current Year

| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
|-------------|---------------------|---------------|----------------|--------------------------|--------------------------|--------------------------------|
| Description | Number of Contracts | Maturity Date | Original Value | Date of Opening Position | Exchange or Counterparty | Net Additions to Cash Deposits |
| | | | | | | |

E21

SCHEDULE DB - PART D - SECTION 3

Showing all Futures Contracts and Insurance Futures Contracts Terminated During Current Year

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | Variation Margin Information | | |
|-------------|---------------------|---------------|----------------|-------------------|------------------|--------------------------|--------------------------|--------------------------------|------------------|------------------------------|---|------------------------|
| | | | | | | | | | | 11 | 12 | 13 |
| Description | Number of Contracts | Maturity Date | Original Value | Termination Value | Variation Margin | Date of Opening Position | Exchange or Counterparty | Net Reduction to Cash Deposits | Termination Date | Gain / (Loss) Recognized | Gain / (Loss) Used to Adjust Basis of Hedged Item | Gain / (Loss) Deferred |
| | | | | | | | | | | | | |

SCHEDULE DB - PART E - SECTION 1

Showing Counterparty Exposure for Derivative Instruments Open December 31 of Current Year

| 1 Description Counterparty or Exchange Traded | 2 Master Agreement (Y or N) | 3 Fair Value of Acceptable Collateral | Statement Value | | | Fair Value | | | 10 Potential Exposure | 11 Off-Balance Sheet Exposure |
|--|--------------------------------------|--|--|--|------------------------------------|-------------------------------------|-------------------------------------|------------------------------------|-----------------------------|--|
| | | | 4 Contracts Statement Value > 0 | 5 Contracts Statement Value < 0 | 6 Exposure Net of Collateral | 7 Contracts Fair Value > 0 | 8 Contracts Fair Value < 0 | 9 Exposure Net of Collateral | | |
| | | | | | | | | | | |

SCHEDULE E - PART 1 - CASH

| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
|------------|------|------------------------|--|---|---------|---|
| Depository | Code | Rate of Interest | Amount of Interest Received During Year | Amount of Interest Accrued December 31 of Current Year | Balance | * |

TOTALS OF DEPOSITORY BALANCES ON THE LAST DAY OF EACH MONTH DURING THE CURRENT YEAR

| | | | | | | | |
|------------------|-------|---------------|-------|-------------------|-------|-------------------|-------|
| 1. January..... | ..... | 4. April..... | ..... | 7. July..... | ..... | 10. October..... | ..... |
| 2. February..... | ..... | 5. May..... | ..... | 8. August..... | ..... | 11. November..... | ..... |
| 3. March..... | ..... | 6. June..... | ..... | 9. September..... | ..... | 12. December..... | ..... |

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned December 31 of Current Year

| 1 CUSIP Identification | 2 Description | 3 Code | 4 Date Acquired | 5 Rate of Interest | 6 Maturity | 7 Book/Adjusted Carrying Value | 8 Amount of Interest Due & Accrued | 9 Gross Investment Income |
|------------------------------|------------------|-----------|-----------------------|--------------------------|---------------|--------------------------------------|--|---------------------------------|
|------------------------------|------------------|-----------|-----------------------|--------------------------|---------------|--------------------------------------|--|---------------------------------|



SCHEDULE E - PART 3 - SPECIAL DEPOSITS

| States, Etc. | 1 Type of Deposit | 2 Purpose of Deposit | Deposits with the State of Domicile for the Benefit of All Policyholders | | All Other Special Deposits | | |
|------------------------------------|----------------------|-------------------------|--|-----------------|-----------------------------------|-----------------|---|
| | | | 3 Book/Adjusted Carrying Value | 4 Fair Value | 5 Book/Adjusted Carrying Value | 6 Fair Value | |
| 1. Alabama..... | AL | | | | | | |
| 2. Alaska..... | AK | | | | | | |
| 3. Arizona..... | AZ | | | | | | |
| 4. Arkansas..... | AR | | | | | | |
| 5. California..... | CA | | | | | | |
| 6. Colorado..... | CO | | | | | | |
| 7. Connecticut..... | CT | | | | | | |
| 8. Delaware..... | DE | | | | | | |
| 9. District of Columbia..... | DC | | | | | | |
| 10. Florida..... | FL | | | | | | |
| 11. Georgia..... | GA | | | | | | |
| 12. Hawaii..... | HI | | | | | | |
| 13. Idaho..... | ID | | | | | | |
| 14. Illinois..... | IL | | | | | | |
| 15. Indiana..... | IN | | | | | | |
| 16. Iowa..... | IA | | | | | | |
| 17. Kansas..... | KS | | | | | | |
| 18. Kentucky..... | KY | | | | | | |
| 19. Louisiana..... | LA | | | | | | |
| 20. Maine..... | ME | | | | | | |
| 21. Maryland..... | MD | | | | | | |
| 22. Massachusetts..... | MA | | | | | | |
| 23. Michigan..... | MI | | | | | | |
| 24. Minnesota..... | MN | | | | | | |
| 25. Mississippi..... | MS | | | | | | |
| 26. Missouri..... | MO | | | | | | |
| 27. Montana..... | MT | | | | | | |
| 28. Nebraska..... | NE | | | | | | |
| 29. Nevada..... | NV | | | | | | |
| 30. New Hampshire..... | NH | | | | | | |
| 31. New Jersey..... | NJ | | | | | | |
| 32. New Mexico..... | NM | | | | | | |
| 33. New York..... | NY | | | | | | |
| 34. North Carolina..... | NC | | | | | | |
| 35. North Dakota..... | ND | | | | | | |
| 36. Ohio..... | OH | | | | | | |
| 37. Oklahoma..... | OK | | | | | | |
| 38. Oregon..... | OR | | | | | | |
| 39. Pennsylvania..... | PA | | | | | | |
| 40. Rhode Island..... | RI | | | | | | |
| 41. South Carolina..... | SC | | | | | | |
| 42. South Dakota..... | SD | | | | | | |
| 43. Tennessee..... | TN | | | | | | |
| 44. Texas..... | TX | | | | | | |
| 45. Utah..... | UT | | | | | | |
| 46. Vermont..... | VT | | | | | | |
| 47. Virginia..... | VA | | | | | | |
| 48. Washington..... | WA | | | | | | |
| 49. West Virginia..... | WV | | | | | | |
| 50. Wisconsin..... | WI | | | | | | |
| 51. Wyoming..... | WY | | | | | | |
| 52. American Samoa..... | AS | | | | | | |
| 53. Guam..... | GU | | | | | | |
| 54. Puerto Rico..... | PR | | | | | | |
| 55. US Virgin Islands..... | VI | | | | | | |
| 56. Northern Mariana Islands..... | MP | | | | | | |
| 57. Canada..... | CN | | | | | | |
| 58. Aggregate Alien and Other..... | OT | XXX | XXX | 0 | 0 | 0 | 0 |
| 59. Total..... | XXX | XXX | XXX | 0 | 0 | 0 | 0 |

DETAILS OF WRITE-INS

| | | | | | | | |
|--|-----|-----|-----|---|---|---|---|
| 5801. | | | | | | | |
| 5802. | | | | | | | |
| 5803. | | | | | | | |
| 5898. Summary of remaining write-ins for line 58 from overflow page..... | XXX | XXX | XXX | 0 | 0 | 0 | 0 |
| 5899. Total (Lines 5801 thru 5803+5898) (Line 58 above)..... | XXX | XXX | XXX | 0 | 0 | 0 | 0 |



AMENDED FILING EXPLANATION



MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT

For the Year Ended December 31, 2006

(To Be Filed by March 1)

FOR THE STATE OF.....Alabama

NAIC Group Code.....0
 Address (City, State and Zip Code).....
 Person Completing This Exhibit.....
 Title.....

NAIC Company Code.....55301

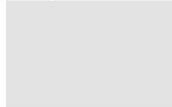
Telephone Number.....

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | Policies Issued Through 2003 | | | Policies Issued in 2004, 2005 & 2006 | | | | |
|----------------------|--------------------|---|-----------------|----------------------|---------------|-------------------------|-------------------|-------------|-----------------------------|------------------------------|-----------------|----------------------------|--------------------------------------|-----------------|-----------------|----------------------------|-------------------------|
| | | | | | | | | | | 11 | Incurred Claims | | 14 | 15 | Incurred Claims | | 18 |
| | | | | | | | | | | | 12 | 13 | | | 16 | 17 | |
| Compliance with OBRA | Policy Form Number | Standardized Medicare Supplement Benefit Plan | Medicare Select | Plan Characteristics | Date Approved | Date Approval Withdrawn | Date Last Amended | Date Closed | Policy Marketing Trade Name | Premiums Earned | Amount | Percent of Premiums Earned | Number of Covered Lives | Premiums Earned | Amount | Percent of Premiums Earned | Number of Covered Lives |

360.AL

GENERAL INTERROGATORIES

1. If response in Column 1 is no, give full and complete details.....



2. Claims address and contact person provided to the Secretary of Health and Human Services as required by 42 U.S.C. 1395ss(c)(3)(E) for this state.

2.1 Address.....

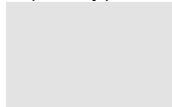
2.2 Contact person and phone number.....

3. Billing address and contact person for user fees established under 41 U.S.C. 1395u(h)(3)(B).

3.1 Address.....

3.2 Contact person and phone number.....

4. Explain any policies identified as policy type "O".



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MEDICARE PART D COVERAGE SUPPLEMENT

For the Year Ended December 31 2006

(To Be Filed By March 1)

| | Individual Coverage | | Group Coverage | | 5 Total Cash |
|--|---------------------|----------------|----------------|----------------|--------------------|
| | 1 Insured | 2 Uninsured | 3 Insured | 4 Uninsured | |
| 1. Premiums Collected: | | | | | |
| 1.1 Standard Coverage | | | | | |
| 1.11 With Reinsurance Coverage..... | | XXX | | XXX | .0 |
| 1.12 Without Reinsurance Coverage..... | | XXX | | XXX | .0 |
| 1.13 Risk-Corridor Payment Adjustments..... | | XXX | | XXX | .0 |
| 1.2 Supplemental Benefits..... | | XXX | | XXX | .0 |
| 2. Premiums Due and Uncollected-Change: | | | | | |
| 2.1 Standard Coverage | | | | | |
| 2.11 With Reinsurance Coverage..... | | XXX | | XXX | XXX |
| 2.12 Without Reinsurance Coverage..... | | XXX | | XXX | XXX |
| 2.2 Supplemental Benefits..... | | XXX | | XXX | XXX |
| 3. Unearned Premium and Advance Premium-Change: | | | | | |
| 3.1 Standard Coverage: | | | | | |
| 3.11 With Reinsurance Coverage..... | | XXX | | XXX | XXX |
| 3.12 Without Reinsurance Coverage..... | | XXX | | XXX | XXX |
| 3.2 Supplemental Benefits..... | | XXX | | XXX | XXX |
| 4. Risk-Corridor Payment Adjustments-Change: | | | | | |
| 4.1 Receivable..... | | XXX | | XXX | XXX |
| 4.2 Payable..... | | XXX | | XXX | XXX |
| 5. Earned Premiums: | | | | | |
| 5.1 Standard Coverage: | | | | | |
| 5.11 With Reinsurance Coverage..... | .0 | XXX | .0 | XXX | XXX |
| 5.12 Without Reinsurance Coverage..... | .0 | XXX | .0 | XXX | XXX |
| 5.13 Risk-Corridor Payment Adjustments..... | .0 | XXX | .0 | XXX | XXX |
| 5.2 Supplemental Benefits..... | .0 | XXX | .0 | XXX | XXX |
| 6. Total Premiums..... | .0 | XXX | .0 | XXX | .0 |
| 7. Claims Paid: | | | | | |
| 7.1 Standard Coverage: | | | | | |
| 7.11 With Reinsurance Coverage..... | | XXX | | XXX | .0 |
| 7.12 Without Reinsurance Coverage..... | | XXX | | XXX | .0 |
| 7.2 Supplemental Benefits..... | | XXX | | XXX | .0 |
| 8. Claim Reserves and Liabilities-Change: | | | | | |
| 8.1 Standard Coverage: | | | | | |
| 8.11 With Reinsurance Coverage..... | | XXX | | XXX | XXX |
| 8.12 Without Reinsurance Coverage..... | | XXX | | XXX | XXX |
| 8.2 Supplemental Benefits..... | | XXX | | XXX | XXX |
| 9. Health Care Receivables-Change: | | | | | |
| 9.1 Standard Coverage | | | | | |
| 9.11 With Reinsurance Coverage..... | | XXX | | XXX | XXX |
| 9.12 Without Reinsurance Coverage..... | | XXX | | XXX | XXX |
| 9.2 Supplemental Benefits..... | | XXX | | XXX | XXX |
| 10. Claims Incurred: | | | | | |
| 10.1 Standard Coverage: | | | | | |
| 10.11 With Reinsurance Coverage..... | .0 | XXX | .0 | XXX | XXX |
| 10.12 Without Reinsurance Coverage..... | .0 | XXX | .0 | XXX | XXX |
| 10.2 Supplemental Benefits..... | .0 | XXX | .0 | XXX | XXX |
| 11. Total Claims..... | .0 | XXX | .0 | XXX | .0 |
| 12. Reinsurance Coverage and Low Income Cost Sharing: | | | | | |
| 12.1 Claims Paid - Net To Reimbursements Applied..... | XXX | | XXX | | .0 |
| 12.2 Reimbursements Received but Not Applied-Change..... | XXX | | XXX | | .0 |
| 12.3 Reimbursements Receivable-Change..... | XXX | | XXX | | XXX |
| 12.4 Health Care Receivables-Change..... | XXX | | XXX | | XXX |
| 13. Aggregate Policy Reserves-Change..... | | | | | XXX |
| 14. Expenses Paid..... | | XXX | | XXX | .0 |
| 15. Expenses Incurred..... | | XXX | | XXX | XXX |
| 16. Underwriting Gain/Loss..... | .0 | XXX | .0 | XXX | XXX |
| 17. Cash Flow Results..... | XXX | XXX | XXX | XXX | .0 |



DETERMINATION PROCEDURES, ANSWERS TO THE INTERROGATORIES AND
AN ACTUARIAL OPINION AS TO THE NON-GUARANTEED ELEMENTS



ACTUARIAL OPINION

I, (name, title), am (relationship to Company) and a Member of the American Academy of Actuaries. I have examined the actuarial assumptions and methods used in determining nonguaranteed elements for the individual life insurance and annuity contracts of the reporting entity used for delivery in the United States. The nonguaranteed elements included are those:

- i. Paid, credited, charged or determined in (year of statement); and
- ii. Authorized by the Reporting Entity to be illustrated on new and existing business during (year of statement).

My examination included such review of the actuarial assumptions and methods of the underlying basic records and such tests of the actuarial calculations, as I considered necessary. In my opinion, the nonguaranteed elements described above have been determined in accordance with generally accepted actuarial principles and practices applicable to the determination of nonguaranteed elements, except as described above.

Signature of Actuary

Date

ACTUARIAL OPINION ON PARTICIPATING AND NON-PARTICIPATING POLICIES
FOR EXHIBIT 5



ACTUARIAL OPINION

I, (name, title), am (relationship to Reporting Entity) and a Member of the American Academy of Actuaries. I have examined the actuarial assumptions and methods used in determining dividends or refunds under the dividend or refund scale for the individual participating life insurance contracts of the reporting entity issued for delivery in the United States. The dividends or refunds encompassed by this scale include:

- i. Apportioned for payment during (year following year of statement); and
- ii. In effect as of January 1, (year following year of statement) that are illustrated for payment on new or existing business in (second year following year of statement) and later that are authorized for illustration by the reporting entity.

My examination included such review of the actuarial assumptions and methods of the underlying basic records and such tests of the actuarial calculations, as I consider necessary. In my opinion, these dividends or refunds have been determined in accordance with actuarial principles and practices of the American Academy of Actuaries applicable to the determination of dividends or refunds except as described above.

Signature of Actuary

Date

ACTUARIAL OPINION





SUPPLEMENTAL COMPENSATION EXHIBIT

For the Year Ended December 31, 2006
(To be filed by March 1)

PART 1 - INTERROGATORIES

- | | |
|--|----------------|
| 1. The reporting insurer is a member of a group of insurers or other holding company system? If yes, do the amounts below represent 1) total gross compensation paid to each individual by or on behalf of all companies which are part of the group; or 2) allocation to each insurer? | Yes [] No [] |
| 2. Did any person while an officer, director, or trustee of the reporting entity receive directly or indirectly, during the period covered by this statement any commission on the business transactions of the reporting entity? | Yes [] No [] |
| 3. Except for retirement plans generally applicable to its staff employees, has the reporting entity any agreement with any person, other than contracts with its agents for the payment of commissions whereby it agrees that for any service rendered or to be rendered, that he/she shall receive directly or indirectly, any salary, compensation or emolument that will extend beyond a period of 12 months from the date of the agreement? | Yes [] No [] |

PART 2 - OFFICERS AND EMPLOYEES COMPENSATION

| 1 Name and Principal Position | 2 Year | Annual Compensation | | | |
|----------------------------------|-----------|---------------------|------------|-----------------------------|-------------|
| | | 3 Salary | 4 Bonus | 5 All Other Compensation | 6 Totals |
| Chief Executive Officer | 2006 | | | | 0 |
| | 2005 | | | | 0 |
| | 2004 | | | | 0 |
| 1. | 2006 | | | | 0 |
| | 2005 | | | | 0 |
| | 2004 | | | | 0 |
| 2. | 2006 | | | | 0 |
| | 2005 | | | | 0 |
| | 2004 | | | | 0 |
| 3. | 2006 | | | | 0 |
| | 2005 | | | | 0 |
| | 2004 | | | | 0 |
| 4. | 2006 | | | | 0 |
| | 2005 | | | | 0 |
| | 2004 | | | | 0 |
| 5. | 2006 | | | | 0 |
| | 2005 | | | | 0 |
| | 2004 | | | | 0 |
| 6. | 2006 | | | | 0 |
| | 2005 | | | | 0 |
| | 2004 | | | | 0 |
| 7. | 2006 | | | | 0 |
| | 2005 | | | | 0 |
| | 2004 | | | | 0 |
| 8. | 2006 | | | | 0 |
| | 2005 | | | | 0 |
| | 2004 | | | | 0 |
| 9. | 2006 | | | | 0 |
| | 2005 | | | | 0 |
| | 2004 | | | | 0 |

PART 3 - DIRECTOR COMPENSATION

| 1 Name and Principal Position or Occupation | 2 Compensation Paid or Deferred for Services as Director | 3 All Other Compensation Paid or Deferred | 4 Totals |
|--|---|--|-------------|
| Directors | | | |
| 1. | | | 0 |



Trusted Surplus Statement

AFFIDAVIT OF U.S. MANAGERS, GENERAL AGENTS OR ATTORNEYS

_____ being duly sworn, says that he/she is the _____ of the _____, a corporation organized under the laws of _____, entered to transact business in the United States through the State of _____, that this trusted surplus statement together with its related schedules appended hereto is a true statement of the trusted surplus of said corporation, that the several items of assets, as hereinafter enumerated, are the absolute property of said corporation, free and clear from any liens or claims thereon, except as hereinafter stated, and that each and all of the hereinafter mentioned assets are held in the United States by Insurance Departments and Officers of the various States of the United States and Trustees as hereinafter indicated, and that the assets, liabilities and deductions therefrom reported in this statement are in accordance with the instructions accompanying this statement.

Subscribed and sworn to before me this _____ day of _____ A.D., 2007

AFFIDAVIT OF TRUSTEE – SCHEDULE B

_____ being sworn, say that it is the Trustee of the _____, a corporation organized under the laws of _____, entered to transact business in the United States through the State of _____, located at _____, that the assets listed in Schedule B of the following statement are held by it as such Trustee within the United States, and that the said assets are subject to no other claims than those of policyholders and creditors within the United States.

Subscribed and sworn to before me this _____ day of _____ A.D., 2007

AFFIDAVIT OF TRUSTEE – SCHEDULE C

_____ being sworn, say that it is the Trustee of the _____, a corporation organized under the laws of _____, entered to transact business in the United States through the State of _____, located at _____, that the assets listed in Schedule C of the following statement are held by it as such Trustee within the United States, and that the said assets are subject to no other claims than those of policyholders and creditors within the United States.

Subscribed and sworn to before me this _____ day of _____ A.D., 2007

AFFIDAVIT OF TRUSTEE – SCHEDULE D

_____ being sworn, say that it is the Trustee of the _____, a corporation organized under the laws of _____, entered to transact business in the United States through the State of _____, located at _____, that the assets listed in Schedule D of the following statement are held by it as such Trustee within the United States, and that the said assets are subject to no other claims than those of policyholders and creditors within the United States.

Subscribed and sworn to before me this _____ day of _____ A.D., 2007

Trusted Surplus Statement (Continued)

Assets

Schedule A - Deposits with State Officers (Excluding Special Deposits)

| 1 Line Number | 2 Description | 3 Admitted Asset Value | 4 Par Value | 5 Fair Value |
|---------------------|--------------------------------|---------------------------|----------------|-----------------|
| 1.01 | | | | |
| 1.02 | | | | |
| 1.03 | | | | |
| 1.04 | | | | |
| 1.05 | | | | |
| 1.06 | | | | |
| 1.07 | | | | |
| 1.08 | | | | |
| 1.09 | | | | |
| 1.10 | | | | |
| 1.11 | | | | |
| 1.12 | | | | |
| 1.13 | | | | |
| 1.14 | | | | |
| 1.15 | | | | |
| 1.98 | Accrued Investment Income..... | | XXX | XXX |
| 1.99 | Totals..... | 0 | 0 | 0 |

Schedule B - Deposits with United States Trustee

| 1 Line Number | 2 Description | 3 Admitted Asset Value | 4 Par Value | 5 Fair Value |
|---------------------|---|---------------------------|----------------|-----------------|
| 2.01 | Cash..... | | | |
| 2.02 | Bonds..... | | | |
| 2.03 | Preferred Stock..... | | | |
| 2.04 | Common Stock..... | | | |
| 2.05 | Mortgage Loans on Real Estate..... | | | |
| 2.06 | Real Estate..... | | | |
| 2.07 | Short-Term Investments..... | | | |
| 2.08 | Other Invested Assets..... | | | |
| 2.09 | Miscellaneous Assets not included in any of the above categories..... | | | |
| 2.98 | Accrued Investment Income..... | | XXX | XXX |
| 2.99 | Totals..... | 0 | 0 | 0 |

Schedule C - Deposits with United States Trustee

| 1 Line Number | 2 Description | 3 Admitted Asset Value | 4 Par Value | 5 Fair Value |
|---------------------|---|---------------------------|----------------|-----------------|
| 3.01 | Cash..... | | | |
| 3.02 | Bonds..... | | | |
| 3.03 | Preferred Stock..... | | | |
| 3.04 | Common Stock..... | | | |
| 3.05 | Mortgage Loans on Real Estate..... | | | |
| 3.06 | Real Estate..... | | | |
| 3.07 | Short-Term Investments..... | | | |
| 3.08 | Other Invested Assets..... | | | |
| 3.09 | Miscellaneous Assets not included in any of the above categories..... | | | |
| 3.98 | Accrued Investment Income..... | | XXX | XXX |
| 3.99 | Totals..... | 0 | 0 | 0 |

Schedule D - Deposits with United States Trustee

| 1 Line Number | 2 Description | 3 Admitted Asset Value | 4 Par Value | 5 Fair Value |
|---------------------|---|---------------------------|----------------|-----------------|
| 4.01 | Cash..... | | | |
| 4.02 | Bonds..... | | | |
| 4.03 | Preferred Stock..... | | | |
| 4.04 | Common Stock..... | | | |
| 4.05 | Mortgage Loans on Real Estate..... | | | |
| 4.06 | Real Estate..... | | | |
| 4.07 | Short-Term Investments..... | | | |
| 4.08 | Other Invested Assets..... | | | |
| 4.09 | Miscellaneous Assets not included in any of the above categories..... | | | |
| 4.98 | Accrued Investment Income..... | | XXX | XXX |
| 4.99 | Totals..... | 0 | 0 | 0 |



Trusteed Surplus Statement (Continued)

Liabilities and Trusteed Surplus

| | 1 Current Year |
|---|-------------------|
| 1. Total liabilities..... | ..... |
| ADDITIONS TO LIABILITIES: | |
| 2. Aggregate write-ins for additions to liabilities..... |0 |
| 3. Totals (Lines 1 + 2)..... |0 |
| DEDUCTIONS FROM LIABILITIES: | |
| 4. Amounts Recoverable From Reinsurers: | |
| 4.1 Authorized Companies..... | ..... |
| 4.2 Unauthorized Companies..... | ..... |
| 5. Special State Deposits, not exceeding net liabilities carried: | |
| 5.1 Special State Deposits (submit schedule)..... | ..... |
| 5.2 Accrued interest on special state deposits..... | ..... |
| 6. Life insurance premiums and annuity considerations deferred and uncollected..... | ..... |
| 7. Accident and health premiums due and unpaid..... | ..... |
| 8. Policy loans and premium notes: | |
| 8.1 Policy loans not exceeding reserves carried on such policies..... | ..... |
| 8.2 Premium notes..... | ..... |
| 8.3 Interest due and accrued on policy loans and premium notes..... | ..... |
| 9. Aggregate write-ins for other deductions from liabilities..... |0 |
| 10. Total Deductions (Lines 4.1 thru 9)..... |0 |
| 11. Total Adjusted Liabilities (Line 3 minus Line 10)..... |0 |
| 12. Trusteed Surplus..... | ..... |
| 13. Total..... |0 |

DETAILS OF WRITE-INS

| | |
|---|--------|
| 0201. .... | ..... |
| 0202. .... | ..... |
| 0203. .... | ..... |
| 0298. Summary of remaining write-ins for Line 2 from overflow page..... |0 |
| 0299. Totals (Lines 0201 thru 0203 plus 0298) (Line 2 above)..... |0 |
| 0901. .... | ..... |
| 0902. .... | ..... |
| 0903. .... | ..... |
| 0998. Summary of remaining write-ins for Line 9 from overflow page..... |0 |
| 0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9 above)..... |0 |

INTERROGATORIES TO BE COMPLETED BY FRATERNAL ORGANIZATIONS ONLY

- | | | |
|---|---------|--------|
| 1.1 Have there been any changes made to any of the trust indentures during the year?..... | Yes [] | No [] |
| 1.2 If yes, has the domiciliary or entry state approved the change?..... | Yes [] | No [] |



Overflow Page for Write-Ins

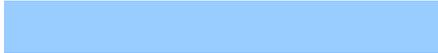


ACCIDENT AND HEALTH POLICY EXPERIENCE EXHIBIT FOR YEAR

| | 1 Premiums Earned | 2 Incurred Claim Amounts | 3 Change in Contract Reserves | 4 Loss Ratio (2 + 3) / 1 | 5 Number of Policies or Certificates as of December 31 | 6 Number of Covered Lives as of December 31 | 7 Member Months |
|--------------------------------------|-------------------------|--------------------------------|-------------------------------------|--------------------------------|---|--|-----------------------|
| A. INDIVIDUAL BUSINESS | | | | | | | |
| 1. Comprehensive Major Medical | | | | | | | |
| 1.1 With contract reserves..... | | | | .000 | | | |
| 1.2 Without contract reserves..... | | | | .000 | | | |
| 1.3 Subtotal..... | .0 | .0 | .0 | .000 | .0 | .0 | .0 |
| 2. Short-Term Medical | | | | | | | |
| 2.1 With contract reserves..... | | | | .000 | | | |
| 2.2 Without contract reserves..... | | | | .000 | | | |
| 2.3 Subtotal..... | .0 | .0 | .0 | .000 | .0 | .0 | .0 |
| 3. Other Medical (Non-Comprehensive) | | | | | | | |
| 3.1 With contract reserves..... | | | | .000 | | | |
| 3.2 Without contract reserves..... | | | | .000 | | | |
| 3.3 Subtotal..... | .0 | .0 | .0 | .000 | .0 | .0 | .0 |
| 4. Specified/Named Disease | | | | | | | |
| 4.1 With contract reserves..... | | | | .000 | | | |
| 4.2 Without contract reserves..... | | | | .000 | | | |
| 4.3 Subtotal..... | .0 | .0 | .0 | .000 | .0 | .0 | .0 |
| 5. Limited Benefit | | | | | | | |
| 5.1 With contract reserves..... | | | | .000 | | | |
| 5.2 Without contract reserves..... | | | | .000 | | | |
| 5.3 Subtotal..... | .0 | .0 | .0 | .000 | .0 | .0 | .0 |
| 6. Student | | | | | | | |
| 6.1 With contract reserves..... | | | | .000 | | | |
| 6.2 Without contract reserves..... | | | | .000 | | | |
| 6.3 Subtotal..... | .0 | .0 | .0 | .000 | .0 | .0 | .0 |
| 7. Accident Only or AD&D | | | | | | | |
| 7.1 With contract reserves..... | | | | .000 | | | |
| 7.2 Without contract reserves..... | | | | .000 | | | |
| 7.3 Subtotal..... | .0 | .0 | .0 | .000 | .0 | .0 | .0 |
| 8. Disability Income - Short Term | | | | | | | |
| 8.1 With contract reserves..... | | | | .000 | | | |
| 8.2 Without contract reserves..... | | | | .000 | | | |
| 8.3 Subtotal..... | .0 | .0 | .0 | .000 | .0 | .0 | .0 |

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ACCIDENT AND HEALTH POLICY EXPERIENCE EXHIBIT FOR YEAR

| | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
|---|--------------------|---------------------------|--------------------------------|---------------------------|--|---|------------------|
| | Premiums Earned | Incurred Claim Amounts | Change in Contract Reserves | Loss Ratio (2 + 3) / 1 | Number of Policies or Certificates as of December 31 | Number of Covered Lives as of December 31 | Member Months |
| A. INDIVIDUAL BUSINESS (Continued) | | | | | | | |
| 9. Disability Income - Long-Term | | | | | | | |
| 9.1 With contract reserves..... | | | | .000 | | | |
| 9.2 Without contract reserves..... | | | | .000 | | | |
| 9.3 Subtotal..... | 0 | 0 | 0 | .000 | 0 | 0 | 0 |
| 10. Long-Term Care | | | | | | | |
| 10.1 With contract reserves..... | | | | .000 | | | |
| 10.2 Without contract reserves..... | | | | .000 | | | |
| 10.3 Subtotal..... | 0 | 0 | 0 | .000 | 0 | 0 | 0 |
| 11. Medicare Supplement (Medigap) | | | | | | | |
| 11.1 With contract reserves..... | | | | .000 | | | |
| 11.2 Without contract reserves..... | | | | .000 | | | |
| 11.3 Subtotal..... | 0 | 0 | 0 | .000 | 0 | 0 | 0 |
| 12. Dental | | | | | | | |
| 12.1 With contract reserves..... | | | | .000 | | | |
| 12.2 Without contract reserves..... | | | | .000 | | | |
| 12.3 Subtotal..... | 0 | 0 | 0 | .000 | 0 | 0 | 0 |
| 13. State Children's Health Insurance Program | | | | | | | |
| 13.1 With contract reserves..... | | | | .000 | | | |
| 13.2 Without contract reserves..... | | | | .000 | | | |
| 13.3 Subtotal..... | 0 | 0 | 0 | .000 | 0 | 0 | 0 |
| 14. Medicare | | | | | | | |
| 14.1 With contract reserves..... | | | | .000 | | | |
| 14.2 Without contract reserves..... | | | | .000 | | | |
| 14.3 Subtotal..... | 0 | 0 | 0 | .000 | 0 | 0 | 0 |
| 15. Medicaid | | | | | | | |
| 15.1 With contract reserves..... | | | | .000 | | | |
| 15.2 Without contract reserves..... | | | | .000 | | | |
| 15.3 Subtotal..... | 0 | 0 | 0 | .000 | 0 | 0 | 0 |
| 16. Other Individual Business | | | | | | | |
| 16.1 With contract reserves..... | | | | .000 | | | |
| 16.2 Without contract reserves..... | | | | .000 | | | |
| 16.3 Subtotal..... | 0 | 0 | 0 | .000 | 0 | 0 | 0 |
| 17. Total Individual Business | | | | | | | |
| 17.1 With contract reserves..... | 0 | 0 | 0 | .000 | 0 | 0 | 0 |
| 17.2 Without contract reserves..... | 0 | 0 | 0 | .000 | 0 | 0 | 0 |
| 18. Grand Total Individual..... | 0 | 0 | 0 | .000 | 0 | 0 | 0 |

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ACCIDENT AND HEALTH POLICY EXPERIENCE EXHIBIT FOR YEAR

| | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
|--|--------------------|---------------------------|--------------------------------|---------------------------|--|---|------------------|
| | Premiums Earned | Incurred Claim Amounts | Change in Contract Reserves | Loss Ratio (2 + 3) / 1 | Number of Policies or Certificates as of December 31 | Number of Covered Lives as of December 31 | Member Months |
| B. GROUP BUSINESS | | | | | | | |
| Comprehensive Medical | | | | | | | |
| 1. Single Employer | | | | | | | |
| 1.1 Small employer..... | | | | .000 | | | |
| 1.2 Other employer..... | | | | .000 | | | |
| 1.3 Single employer subtotal..... | .0 | .0 | .0 | .000 | .0 | .0 | .0 |
| 2. Multiple Employer Associations and Trusts..... | | | | .000 | | | |
| 3. Other Associations and Discretionary Trusts..... | | | | .000 | | | |
| 4. Other Comprehensive Major Medical..... | | | | .000 | | | |
| 5. Comprehensive/Major Medical Subtotal..... | .0 | .0 | .0 | .000 | .0 | .0 | .0 |
| Other Medical (Non-Comprehensive) | | | | | | | |
| 6. Specified/Names Disease..... | | | | .000 | | | |
| 7. Limited Benefit..... | | | | .000 | | | |
| 8. Student..... | | | | .000 | | | |
| 9. Accident Only or AD&D..... | | | | .000 | | | |
| 10. Disability Income - Short-Term..... | | | | .000 | | | |
| 11. Disability Income - Long-Term..... | | | | .000 | | | |
| 12. Long-Term Care..... | | | | .000 | | | |
| 13. Medicare Supplement (Medigap)..... | | | | .000 | | | |
| 14. Federal Employees Health Benefit Plans..... | | | | .000 | | | |
| 15. Tricare..... | | | | .000 | | | |
| 16. Dental..... | | | | .000 | | | |
| 17. Other Group Care..... | | | | .000 | | | |
| 18. Grand Total Group Business..... | .0 | .0 | .0 | .000 | .0 | .0 | .0 |
| C. OTHER BUSINESS | | | | | | | |
| 1. Credit (Individual and Group)..... | | | | .000 | | | |
| 2. Stop Loss/Excess Loss..... | | | | .000 | | | |
| 3. Administrative Services Only..... | .XXX | .XXX | .XXX | .000 | | | |
| 4. Administrative Services Contracts..... | .XXX | .XXX | .XXX | .000 | | | |
| 5. Grand Total Other Business..... | .0 | .0 | .0 | .000 | .0 | .0 | .0 |
| D. TOTAL BUSINESS | | | | | | | |
| 1. Total Non-U.S. Policy Forms..... | | | | .000 | | | |
| 2. Grand Total Individual, Group and Other Business..... | .0 | .0 | .0 | .000 | .0 | .0 | .0 |

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ACCIDENT AND HEALTH POLICY EXPERIENCE EXHIBIT FOR YEAR

PART 1 - INDIVIDUAL POLICIES SUMMARY

| | 1 Premiums Earned | 2 Incurred Claims Amount | 3 Change in Contract Reserves | 4 Loss Ratio (2 + 3) / 1 |
|-------------------------------------|-------------------------|-----------------------------------|--|--------------------------------|
| 1. U.S. forms direct business..... | | | | .000 |
| 2. Other forms direct business..... | | | | .000 |
| 3. Total direct business..... | 0 | 0 | 0 | .000 |
| 4. Reinsurance Assumed..... | | | | .000 |
| 5. Less Reinsurance Ceded..... | | | | .000 |
| 6. Total..... | 0 | 0 | 0 | .000 |

PART 2 - GROUP POLICIES SUMMARY

| | 1 Premiums Earned | 2 Incurred Claims Amount | 3 Change in Contract Reserves | 4 Loss Ratio (2 + 3) / 1 |
|-------------------------------------|-------------------------|-----------------------------------|--|--------------------------------|
| 1. U.S. forms direct business..... | | | | .000 |
| 2. Other forms direct business..... | | | | .000 |
| 3. Total direct business..... | 0 | 0 | 0 | .000 |
| 4. Reinsurance Assumed..... | | | | .000 |
| 5. Less Reinsurance Ceded..... | | | | .000 |
| 6. Total..... | 0 | 0 | 0 | .000 |

PART 3 - CREDIT POLICIES (Individual and Group) SUMMARY

| | 1 Premiums Earned | 2 Incurred Claims Amount | 3 Change in Contract Reserves | 4 Loss Ratio (2 + 3) / 1 |
|-------------------------------------|-------------------------|-----------------------------------|--|--------------------------------|
| 1. U.S. forms direct business..... | | | | .000 |
| 2. Other forms direct business..... | | | | .000 |
| 3. Total direct business..... | 0 | 0 | 0 | .000 |
| 4. Reinsurance Assumed..... | | | | .000 |
| 5. Less Reinsurance Ceded..... | | | | .000 |
| 6. Total..... | 0 | 0 | 0 | .000 |

PART 4 - ALL INDIVIDUAL, GROUP AND CREDIT POLICIES SUMMARY

| | 1 Premiums Earned | 2 Incurred Claims Amount | 3 Change in Contract Reserves | 4 Loss Ratio (2 + 3) / 1 |
|-------------------------------------|-------------------------|-----------------------------------|--|--------------------------------|
| 1. U.S. forms direct business..... | 0 | 0 | 0 | .000 |
| 2. Other forms direct business..... | 0 | 0 | 0 | .000 |
| 3. Total direct business..... | 0 | 0 | 0 | .000 |
| 4. Reinsurance Assumed..... | 0 | 0 | 0 | .000 |
| 5. Less Reinsurance Ceded..... | 0 | 0 | 0 | .000 |
| 6. Total..... | 0 | 0 | 0 | .000 |

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FRATERNAL INTEREST SENSITIVE LIFE INSURANCE PRODUCTS REPORT

For the year ended December 31, 2006

(To be Filed by April 1)

Of The.....Insurance Company

Address (City, State and Zip Code).....

NAIC Group Code.....0 NAIC Company Code.....55301 Employer's I.D. Number.....



ANALYSIS OF OPERATION BY LINES OF BUSINESS (Gain and Loss Exhibit) (Excluding Capital Gains and Losses)

| | Life Insurance | | |
|--|-------------------------|-----------------------------|------------|
| | 1 Interest Sensitive | 2 Non-Interest Sensitive | 3 Total |
| 1. Premiums and annuity considerations for life and accident and health contracts..... | | | .0 |
| 2. Considerations for supplementary contracts with life contingencies..... | | | .0 |
| 3. Net investment income..... | | | .0 |
| 4. Amortization of interest maintenance reserve (IMR)..... | | | .0 |
| 5. Separate Accounts net gain from operations excluding unrealized gains or losses..... | | | .0 |
| 6. Commissions and expense allowances on reinsurance ceded..... | | | .0 |
| 7. Reserve adjustments on reinsurance ceded..... | | | .0 |
| 8. Miscellaneous income: | | | |
| 8.1 Fees associated with income from investment management, administration and contract guarantees from Separate Accounts..... | | | .0 |
| 8.2 Charges and fees for deposit-type contracts..... | | | .0 |
| 8.3 Aggregate write-ins for miscellaneous income..... | .0 | .0 | .0 |
| 9. Totals (Lines 1 to 8.3)..... | .0 | .0 | .0 |
| 10. Death Benefits..... | | | .0 |
| 11. Matured endowments..... | | | .0 |
| 12. Annuity and old age benefits..... | | | .0 |
| 13. Disability, accident and health benefits, including premiums waived \$.....0..... | | | .0 |
| 14. Surrender benefits and withdrawals for life contracts..... | | | .0 |
| 15. Interest and adjustments on certificates or deposit-type contract funds..... | | | .0 |
| 16. Payments on supplementary contracts with life contingencies..... | | | .0 |
| 17. Increase in aggregate reserve for life and accident and health certificates and contracts..... | | | .0 |
| 18. Totals (Lines 10 thru 17)..... | .0 | .0 | .0 |
| 19. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only)..... | | | .0 |
| 20. Commissions and expense allowances on reinsurance assumed..... | | | .0 |
| 21. General insurance expenses and fraternal expenses..... | | | .0 |
| 22. Insurance taxes, licenses and fees..... | | | .0 |
| 23. Increase in loading on deferred and uncollected premiums..... | | | .0 |
| 24. Net transfers to or (from) Separate Accounts net of reinsurance..... | | | .0 |
| 25. Aggregate write-ins for deductions..... | .0 | .0 | .0 |
| 26. Totals (Lines 18 to 25)..... | .0 | .0 | .0 |
| 27. Net gain from operations before refunds to members (Line 9 minus Line 26)..... | .0 | .0 | .0 |
| 28. Refunds to members..... | | | .0 |
| 29. Net gain from operations after refunds to members and before realized capital gains or (losses) (Line 27 minus Line 28)..... | .0 | .0 | .0 |

DETAILS OF WRITE-INS

| | | | |
|---|----|----|----|
| 08.301. | | | .0 |
| 08.302. | | | .0 |
| 08.303. | | | .0 |
| 08.398. Summary of remaining write-ins for Line 8.3 from overflow page..... | .0 | .0 | .0 |
| 08.399. Totals (Lines 08.301 thru 08.303 plus 08.398 above) (Line 8.3 above)..... | .0 | .0 | .0 |
| 2501. | | | .0 |
| 2502. | | | .0 |
| 2503. | | | .0 |
| 2598. Summary of remaining write-ins for Line 25 from overflow page..... | .0 | .0 | .0 |
| 2599. Totals (Lines 2501 thru 2503 plus 2598 above) (Line 25 above)..... | .0 | .0 | .0 |

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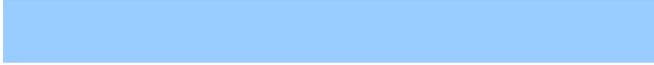
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ANALYSIS OF INCREASE IN RESERVES DURING THE YEAR

| | Life Insurance | | |
|--|-------------------------|-----------------------------|------------|
| | 1 Interest Sensitive | 2 Non-Interest Sensitive | 3 Total |
| Involving Life or Disability Contingencies (Reserves) | | | |
| (Net of Reinsurance Ceded) | | | |
| 1. Reserve December 31, prior year..... | | | .0 |
| 2. Tabular net premiums or considerations..... | | | .0 |
| 3. Present value of disability claims incurred..... | | | .0 |
| 4. Tabular interest..... | | | .0 |
| 5. Tabular less actual reserve released..... | | | .0 |
| 6. Increase in reserve on account of change in valuation basis..... | | | .0 |
| 7. Other increases (Net)..... | | | .0 |
| 8. Total (Lines 1 to 7)..... | .0 | .0 | .0 |
| 9. Tabular cost..... | | | .0 |
| 10. Reserves released by death..... | | | .0 |
| 11. Reserves released by other terminations (net)..... | | | .0 |
| 12. Annuity, supplementary contract, and disability payments involving life contingencies..... | | | .0 |
| 13. Net transfers to or (from) Separate Accounts..... | | | .0 |
| 14. Total deductions (Lines 9 to 13)..... | .0 | .0 | .0 |
| 15. Reserve December 31, current year..... | .0 | .0 | .0 |

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SUPPLEMENTAL INVESTMENT RISKS INTERROGATORIES

Due April 1

For the year ended December 31, 2006

Of

Address (City, State, Zip Code):

NAIC Group Code.....0

NAIC Company Code.....55301

Employer's ID Number.....

The Investment Risks Interrogatories are to be filed by April 1. They are also to be included with the Audited Statutory Financial Statements. Answer the following interrogatories by reporting the applicable U.S. dollar amounts and percentages of the reporting entity's total admitted assets held in that category of investments.

1. Reporting entity's total admitted assets as reported on Page 2 of this annual statement. \$.....0

2. Ten largest exposures to a single issuer/borrower/investment.

| | 1 | 2 | 3 | 4 |
|------|--------|-------------------------|---------|-------------------------------------|
| | Issuer | Description of Exposure | Amount | Percentage of Total Admitted Assets |
| 2.01 | | | \$..... | 0.000 % |
| 2.02 | | | \$..... | 0.000 % |
| 2.03 | | | \$..... | 0.000 % |
| 2.04 | | | \$..... | 0.000 % |
| 2.05 | | | \$..... | 0.000 % |
| 2.06 | | | \$..... | 0.000 % |
| 2.07 | | | \$..... | 0.000 % |
| 2.08 | | | \$..... | 0.000 % |
| 2.09 | | | \$..... | 0.000 % |
| 2.10 | | | \$..... | 0.000 % |

3. Amounts and percentages of the reporting entity's total admitted assets held in bonds and preferred stocks by NAIC rating.

| <u>Bonds</u> | | 1 | 2 |
|-------------------------|-------------|---------|---------|
| 3.01 | NAIC-1..... | \$..... | 0.000 % |
| 3.02 | NAIC-2..... | \$..... | 0.000 % |
| 3.03 | NAIC-3..... | \$..... | 0.000 % |
| 3.04 | NAIC-4..... | \$..... | 0.000 % |
| 3.05 | NAIC-5..... | \$..... | 0.000 % |
| 3.06 | NAIC-6..... | \$..... | 0.000 % |
| <u>Preferred Stocks</u> | | 3 | 4 |
| 3.07 | P/RP-1..... | \$..... | 0.000 % |
| 3.08 | P/RP-2..... | \$..... | 0.000 % |
| 3.09 | P/RP-3..... | \$..... | 0.000 % |
| 3.10 | P/RP-4..... | \$..... | 0.000 % |
| 3.11 | P/RP-5..... | \$..... | 0.000 % |
| 3.12 | P/RP-6..... | \$..... | 0.000 % |

4. Assets held in foreign investments:

| | Yes [] | No [] |
|------|--|----------------|
| 4.01 | Are assets held in foreign investments less than 2.5% of the reporting entity's total admitted assets? | |
| 4.02 | Total admitted assets held in foreign investments | \$.....0.000 % |
| 4.03 | Foreign-currency-denominated investments | \$.....0.000 % |
| 4.04 | Insurance liabilities denominated in that same foreign currency | \$.....0.000 % |

If response to 4.01 above is yes, responses are not required for interrogatories 5-10.

5. Aggregate foreign investment exposure categorized by NAIC sovereign rating:

| | 1 | 2 |
|------|--------------------------------------|----------------|
| 5.01 | Countries rated NAIC-1..... | \$.....0.000 % |
| 5.02 | Countries rated NAIC-2..... | \$.....0.000 % |
| 5.03 | Countries rated NAIC-3 or below..... | \$.....0.000 % |

6. Two largest foreign investment exposures to a single country, categorized by the country's NAIC sovereign rating:

| | 1 | 2 |
|-------------------------|----------------|----------------|
| Countries rated NAIC-1: | | |
| 6.01 | Country: | \$.....0.000 % |
| 6.02 | Country: | \$.....0.000 % |
| Countries rated NAIC-2: | | |
| 6.03 | Country: | \$.....0.000 % |
| 6.04 | Country: | \$.....0.000 % |

Countries rated NAIC-3 or below:

| | | | |
|------|----------------|---------|---------|
| 6.05 | Country: | \$..... | 0.000 % |
| 6.06 | Country: | \$..... | 0.000 % |

| | | | |
|----|---|---------|---------|
| 7. | Aggregate unhedged foreign currency exposure: | 1 | 2 |
| | | \$..... | 0.000 % |

| | | | |
|------|--|---------|---------|
| 8. | Aggregate unhedged foreign currency exposure categorized by NAIC sovereign rating: | | |
| 8.01 | Countries rated NAIC-1..... | \$..... | 0.000 % |
| 8.02 | Countries rated NAIC-2..... | \$..... | 0.000 % |
| 8.03 | Countries rated NAIC-3 or below..... | \$..... | 0.000 % |

| | | | |
|------|--|---------|---------|
| 9. | Two largest unhedged foreign currency exposures to a single country, categorized by the country's NAIC sovereign rating: | 1 | 2 |
| | | | |
| | Countries rated NAIC-1: | | |
| 9.01 | Country: | \$..... | 0.000 % |
| 9.02 | Country: | \$..... | 0.000 % |
| | Countries rated NAIC-2: | | |
| 9.03 | Country: | \$..... | 0.000 % |
| 9.04 | Country: | \$..... | 0.000 % |
| | Countries rated NAIC-3 or below: | | |
| 9.05 | Country: | \$..... | 0.000 % |
| 9.06 | Country: | \$..... | 0.000 % |

| | | | | | |
|-------|---|--------|-------------|---------|---------|
| 10. | Ten largest non-sovereign (i.e. non-governmental) foreign issues: | | | | |
| | | 1 | 2 | 3 | 4 |
| | | Issuer | NAIC Rating | | |
| 10.01 | ..... |  |  | \$..... | 0.000 % |
| 10.02 | ..... |  |  | \$..... | 0.000 % |
| 10.03 | ..... |  |  | \$..... | 0.000 % |
| 10.04 | ..... |  |  | \$..... | 0.000 % |
| 10.05 | ..... |  |  | \$..... | 0.000 % |
| 10.06 | ..... |  |  | \$..... | 0.000 % |
| 10.07 | ..... |  |  | \$..... | 0.000 % |
| 10.08 | ..... |  |  | \$..... | 0.000 % |
| 10.09 | ..... |  |  | \$..... | 0.000 % |
| 10.10 | ..... |  |  | \$..... | 0.000 % |

| | | | |
|-------|---|---------|----------------|
| 11. | Amounts and percentages of the reporting entity's total admitted assets held in Canadian investments and unhedged Canadian currency exposure: | | |
| 11.01 | Are assets held in Canadian investments less than 2.5% of the reporting entity's total admitted assets? | | Yes [] No [] |
| | If response to 11.01 is yes, detail is not required for the remainder of Interrogatory 11. | | |
| 11.02 | Total admitted assets held in Canadian Investments | \$..... | 0.000 % |
| 11.03 | Canadian currency-denominated investments | \$..... | 0.000 % |
| 11.04 | Canadian-denominated insurance liabilities | \$..... | 0.000 % |
| 11.05 | Unhedged Canadian currency exposure | \$..... | 0.000 % |

| | | | |
|-------|---|---------|----------------|
| 12. | Report aggregate amounts and percentages of the reporting entity's total admitted assets held in investments with contractual sales restrictions. | | |
| 12.01 | Are assets held in investments with contractual sales restrictions less than 2.5% of the reporting entity's total admitted assets? | | Yes [] No [] |
| | If response to 12.01 is yes, responses are not required for the remainder of Interrogatory 12. | | |
| 12.02 | Aggregate statement value of investments with contractual sales restrictions: | 1 | 2 |
| | | \$..... | 0.000 % |
| | Largest 3 investments with contractual sales restrictions: | | |
| 12.03 | ..... | \$..... | 0.000 % |
| 12.04 | ..... | \$..... | 0.000 % |
| 12.05 | ..... | \$..... | 0.000 % |

| | | | |
|-------|--|----------------|----------------|
| 13. | Amounts and percentages of admitted assets held in the largest 10 equity interests: | | |
| 13.01 | Are assets held in equity interest less than 2.5% of the reporting entity's total admitted assets? | | Yes [] No [] |
| | If response to 13.01 above is yes, responses are not required for the remainder of Interrogatory 13. | | |
| | | 1 | 2 |
| | | Name of Issuer | 3 |
| 13.02 | ..... | \$..... | 0.000 % |
| 13.03 | ..... | \$..... | 0.000 % |
| 13.04 | ..... | \$..... | 0.000 % |
| 13.05 | ..... | \$..... | 0.000 % |

| | | |
|-------|---------|---------|
| 13.06 | \$..... | 0.000 % |
| 13.07 | \$..... | 0.000 % |
| 13.08 | \$..... | 0.000 % |
| 13.09 | \$..... | 0.000 % |
| 13.10 | \$..... | 0.000 % |
| 13.11 | \$..... | 0.000 % |

14. Amounts and percentages of the reporting entity's total admitted assets held in nonaffiliated, privately placed equities:

14.01 Are assets held in nonaffiliated, privately placed equities less than 2.5% of the reporting entity's total admitted assets? Yes [] No []

If response to 14.01 above is yes, responses are not required for the remainder of Interrogatory 14.

| | 1 | 2 | 3 |
|--|---|---------|---------|
| 14.02 Aggregate statement value of investments held in nonaffiliated, privately placed equities: | | \$..... | 0.000 % |
| Largest 3 investments held in nonaffiliated, privately placed equities: | | | |
| 14.03 | | \$..... | 0.000 % |
| 14.04 | | \$..... | 0.000 % |
| 14.05 | | \$..... | 0.000 % |

15. Amounts and percentages of the reporting entity's total admitted assets held in general partnership interests:

15.01 Are assets held in general partnership interests less than 2.5% of the reporting entity's total admitted assets? Yes [] No []

If response to 15.01 above is yes, responses are not required for the remainder of Interrogatory 15.

| | 1 | 2 | 3 |
|---|---|---------|---------|
| 15.02 Aggregate statement value of investments held in general partnership interests: | | \$..... | 0.000 % |
| Largest 3 investments in general partnership interests: | | | |
| 15.03 | | \$..... | 0.000 % |
| 15.04 | | \$..... | 0.000 % |
| 15.05 | | \$..... | 0.000 % |

16. Amounts and percentages of the reporting entity's total admitted assets held in mortgage loans:

16.01 Are mortgage loans reported in Schedule B less than 2.5% of the reporting entity's total admitted assets? Yes [] No []

If response to 16.01 above is yes, responses are not required for the remainder of Interrogatory 16 and Interrogatory 17.

| | 1 | 2 | 3 |
|---|---|---------|---------|
| <u>Type (Residential, Commercial, Agricultural)</u> | | | |
| 16.02 | | \$..... | 0.000 % |
| 16.03 | | \$..... | 0.000 % |
| 16.04 | | \$..... | 0.000 % |
| 16.05 | | \$..... | 0.000 % |
| 16.06 | | \$..... | 0.000 % |
| 16.07 | | \$..... | 0.000 % |
| 16.08 | | \$..... | 0.000 % |
| 16.09 | | \$..... | 0.000 % |
| 16.10 | | \$..... | 0.000 % |
| 16.11 | | \$..... | 0.000 % |

Amount and percentage of the reporting entity's total admitted assets held in the following categories of mortgage loans:

| | Loans | |
|---|---------|---------|
| 16.12 Construction loans..... | \$..... | 0.000 % |
| 16.13 Mortgage loans over 90 days past due..... | \$..... | 0.000 % |
| 16.14 Mortgage loans in the process of foreclosure..... | \$..... | 0.000 % |
| 16.15 Mortgage loans foreclosed..... | \$..... | 0.000 % |
| 16.16 Restructured mortgage loans..... | \$..... | 0.000 % |

17. Aggregate mortgage loans having the following loan-to-value ratios as determined from the most current appraisal as of the annual statement date:

| Loan-to-Value | <u>Residential</u> | | <u>Commercial</u> | | <u>Agricultural</u> | |
|-----------------------|--------------------|---------|-------------------|---------|---------------------|---------|
| | 1 | 2 | 3 | 4 | 5 | 6 |
| 17.01 above 95%..... | \$..... | 0.000 % | \$..... | 0.000 % | \$..... | 0.000 % |
| 17.02 91% to 95%..... | \$..... | 0.000 % | \$..... | 0.000 % | \$..... | 0.000 % |
| 17.03 81% to 90%..... | \$..... | 0.000 % | \$..... | 0.000 % | \$..... | 0.000 % |
| 17.04 71% to 80%..... | \$..... | 0.000 % | \$..... | 0.000 % | \$..... | 0.000 % |
| 17.05 below 70%..... | \$..... | 0.000 % | \$..... | 0.000 % | \$..... | 0.000 % |

18. Amounts and percentages of the reporting entity's total admitted assets held in each of the five largest investments in real estate:

18.01 Are assets held in real estate reported less than 2.5% of the reporting entity's total admitted assets? Yes [] No []

If response to 18.01 above is yes, responses are not required for the remainder of Interrogatory 18.

Largest five investments in any one parcel or group of contiguous parcels of real estate.

| Description | 2 | 3 |
|-------------|---------|--------------|
| 18.02 | \$..... |0.000 % |
| 18.03 | \$..... |0.000 % |
| 18.04 | \$..... |0.000 % |
| 18.05 | \$..... |0.000 % |
| 18.06 | \$..... |0.000 % |

19. Report aggregate amounts and percentages of the reporting entity's total admitted assets held in mezzanine real estate loans.

19.01 Are assets held in investments held in mezzanine real estate loans less than 2.5% of the reporting entity's admitted assets? Yes [] No []

Is response to 19.01 is yes, responses are not required for the remainder of Interrogatory 19.

| | 1 | 2 | 3 |
|--|---|---------|--------------|
| 19.02 Aggregate statement value of investments held in mezzanine real estate loans | | \$..... |0.000 % |
| Largest three investments held in mezzanine real estate loans. | | | |
| 19.03 | | \$..... |0.000 % |
| 19.04 | | \$..... |0.000 % |
| 19.05 | | \$..... |0.000 % |

20. Amounts and percentages of the reporting entity's total admitted assets subject to the following types of agreements:

| | At Year-End | | At End of Each Quarter | | |
|---|-------------|--------------|------------------------|---------|---------|
| | | | 1st Qtr | 2nd Qtr | 3rd Qtr |
| | 1 | 2 | 3 | 4 | 5 |
| 20.01 Securities lending (do not include assets held as collateral for such transactions) | \$..... |0.000 % | \$..... | \$..... | \$..... |
| 20.02 Repurchase agreements | \$..... |0.000 % | \$..... | \$..... | \$..... |
| 20.03 Reverse repurchase agreements | \$..... |0.000 % | \$..... | \$..... | \$..... |
| 20.04 Dollar repurchase agreements | \$..... |0.000 % | \$..... | \$..... | \$..... |
| 20.05 Dollar reverse repurchase agreements | \$..... |0.000 % | \$..... | \$..... | \$..... |

21. Amounts and percentages indicated below for warrants not attached to other financial instruments, options, caps and floors:

| | Owned | | Written | |
|-------------------------|---------|--------------|---------|--------------|
| | | | | |
| | 1 | 2 | 3 | 4 |
| 21.01 Hedging | \$..... |0.000 % | \$..... |0.000 % |
| 21.02 Income generation | \$..... |0.000 % | \$..... |0.000 % |
| 21.03 Other | \$..... |0.000 % | \$..... |0.000 % |

22. Amounts and percentages of the reporting entity's total admitted assets of potential exposure for collars, swaps, and forwards:

| | At Year-End | | At End of Each Quarter | | |
|-------------------------|-------------|--------------|------------------------|---------|---------|
| | | | 1st Qtr | 2nd Qtr | 3rd Qtr |
| | 1 | 2 | 3 | 4 | 5 |
| 22.01 Hedging | \$..... |0.000 % | \$..... | \$..... | \$..... |
| 22.02 Income generation | \$..... |0.000 % | \$..... | \$..... | \$..... |
| 22.03 Replications | \$..... |0.000 % | \$..... | \$..... | \$..... |
| 22.04 Other | \$..... |0.000 % | \$..... | \$..... | \$..... |

23. Amounts and percentages of the reporting entity's total admitted assets of potential exposure for futures contracts:

| | At Year-End | | At End of Each Quarter | | |
|-------------------------|-------------|--------------|------------------------|---------|---------|
| | | | 1st Qtr | 2nd Qtr | 3rd Qtr |
| | 1 | 2 | 3 | 4 | 5 |
| 23.01 Hedging | \$..... |0.000 % | \$..... | \$..... | \$..... |
| 23.02 Income generation | \$..... |0.000 % | \$..... | \$..... | \$..... |
| 23.03 Replications | \$..... |0.000 % | \$..... | \$..... | \$..... |
| 23.04 Other | \$..... |0.000 % | \$..... | \$..... | \$..... |

LONG-TERM CARE (LTC) EXPERIENCE REPORTING FORM-A NATIONWIDE EXPERIENCE



NAIC Group Code.....0

CLAIM EXPERIENCE BY CALENDAR DURATION (TO BE FILED BY APRIL 1)

NAIC Company Code.....55301

PART 1 - LTC INSURANCE EXPERIENCE BY CALENDAR DURATION

| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 |
|-------------------|-------------|-------------------|-----------------------------|-------------------|---------------------------------|-----------------------|--|---|-------------------------|
| Calendar Duration | Policy Form | First Year Issued | Earned Premiums by Duration | Incurred and Paid | Reserve for Incurred But Unpaid | Total Incurred Claims | Change in Policy (Active Life) Reserves Over the Experience Period | Anticipated Calendar Duration Loss Percentage | Number of Insured Lives |
| | | | | | | | | | |

PART 2 - LTC INSURANCE EXPERIENCE BY LINE OF BUSINESS

| | 1 | 2 | 3 | 4 |
|----------------------------------|-----------------------------|-------------------|---------------------------------|-----------------------|
| | Earned Premiums by Duration | Incurred and Paid | Reserve for Incurred But Unpaid | Total Incurred Claims |
| 1. Individual..... | | | | |
| 2. Group direct response..... | | | | |
| 3. Other group..... | | | | |
| 4. Total (sum lines 1 to 3)..... | .0 | .0 | .0 | .0 |

PART 3 - EXPERIENCE FOR PRODUCTS PROVIDING LTC INSURANCE OTHER THAN ON A STAND-ALONE BASIS

| | Premiums and Annuity Considerations | | Benefits | |
|---|-------------------------------------|----------------------------------|----------|--|
| | 1 | 2 | 3 | 4 |
| | Total | Long-Term Care Benefit Component | Total | Applied to Provide Long-Term Care Benefits |
| A. Products Providing LTC Benefits With Distinct LTC Premiums | | | | |
| 1. Individual -- Life..... | | | | |
| 2. Individual -- Annuity..... | | | | |
| 3. Individual -- Disability..... | | | | |
| 4. Individual -- Other..... | | | | |
| 5. Group -- Life..... | | | | |
| 6. Group -- Annuity..... | | | | |
| 7. Group -- Disability..... | | | | |
| 8. Group -- Other..... | | | | |
| B. Products Providing LTC Benefits Without Distinct LTC Premiums | | | | |
| 1. Individual -- Life..... | | | | |
| 2. Individual -- Annuity..... | | | | |
| 3. Individual -- Disability..... | | | | |
| 4. Individual -- Other..... | | | | |
| 5. Group -- Life..... | | | | |
| 6. Group -- Annuity..... | | | | |
| 7. Group -- Disability..... | | | | |
| 8. Group -- Other..... | | | | |

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LONG-TERM CARE EXPERIENCE REPORTING FORM-B NATIONWIDE EXPERIENCE

CUMULATIVE CLAIM EXPERIENCE
(TO BE FILED BY APRIL 1)

NAIC Group Code.....0

NAIC Company Code.....55301

| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
|----------------------|----------------|----------------------|------------------------------|------------------------------|----------------------------------|----------------------------------|--------------------|-------------------------------|
| Calendar Duration | Policy Form | First Year Issued | Actual Earned Premiums | Actual Incurred Claims | Anticipated Earned Premium | Anticipated Incurred Claim | Policy Reserves | Number of Insured Lives |

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| | 3 | 4 | 5 | 6 | 7 | 8 |
|---|----|----|------|------|------|------|
| 1. Individual..... | | | .XXX | .XXX | .XXX | .XXX |
| 2. Group direct response..... | | | .XXX | .XXX | .XXX | .XXX |
| 3. Other group..... | | | .XXX | .XXX | .XXX | .XXX |
| 4. Total (Sum Lines 1 to 3)..... | .0 | .0 | .XXX | .XXX | .XXX | .XXX |
| 5. Actual total reported experience through statement year..... | | | .XXX | .XXX | .XXX | .XXX |
| 6. Actual total reported experience through prior year..... | | | .XXX | .XXX | .XXX | .XXX |
| 7. Calendar year reported experience (Lines 5 minus 6)..... | .0 | .0 | .XXX | .XXX | .XXX | .XXX |

Note: (a) Was experience prior to 1991 used in preparing this form? Yes [] No []

(b) If yes, indicate the calendar years that were included:.....



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LONG-TERM CARE EXPERIENCE REPORTING FORM-C EXPERIENCE IN THE STATE OF ALABAMA

CUMULATIVE CLAIM EXPERIENCE

(TO BE FILED BY APRIL 1)

NAIC Group Code.....0

NAIC Company Code.....55301

| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
|-------------------|-------------|-------------------|------------------------|------------------------|----------------------------|----------------------------|-----------------|-------------------------|
| Calendar Duration | Policy Form | First Year Issued | Actual Earned Premiums | Actual Incurred Claims | Anticipated Earned Premium | Anticipated Incurred Claim | Policy Reserves | Number of Insured Lives |

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| | 3 | 4 | 5 | 6 | 7 | 8 |
|---|----|----|------|-----|------|-----|
| 1. Individual..... | | | .XXX | XXX | .XXX | XXX |
| 2. Group direct response..... | | | .XXX | XXX | .XXX | XXX |
| 3. Other group..... | | | .XXX | XXX | .XXX | XXX |
| 4. Total (Sum Lines 1 to 3)..... | .0 | .0 | .XXX | XXX | .XXX | XXX |
| 5. Actual total reported experience through statement year..... | | | .XXX | XXX | .XXX | XXX |
| 6. Actual total reported experience through prior year..... | | | .XXX | XXX | .XXX | XXX |
| 7. Calendar year reported experience (Lines 5 minus 6)..... | .0 | .0 | .XXX | XXX | .XXX | XXX |

Note: (a) Was experience prior to 1991 used in preparing this form? Yes [] No []

(b) If yes, indicate the calendar years that were included:.....



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MANAGEMENT'S DISCUSSION AND ANALYSIS



AUDITED FINANCIAL REPORT

