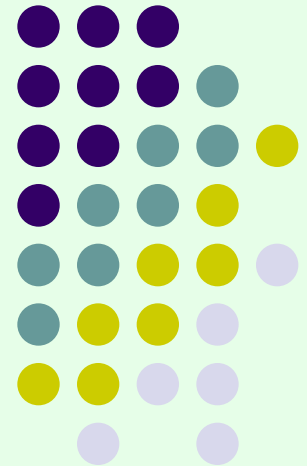


Financial Reporting and Data Collection

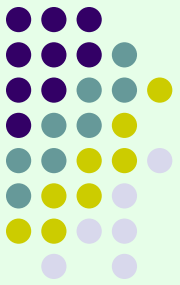
ASSAL – July 2011

Todd Sells

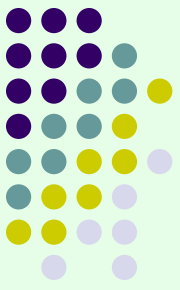
Director, Financial Regulatory Services
NAIC



Outline



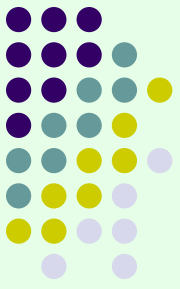
1. Hierarchy of Requirements
2. Blanks Working Group Process
3. Setting Reporting Requirements
4. Filing Periods and Disclosure Rules
5. NAIC Decisions and NAIC Staff Decisions
6. Adaptability of System
7. Maintaining Uniformity



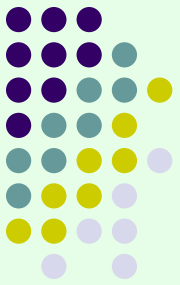
NAIC Statutory Accounting

- Focus on Policyholder Protection
 - Includes Conservatism (e.g., Nonadmitted Assets)
- Statements of Statutory Accounting (SSAP)
Provide the top level requirements for statutory financial statements
 - Issued by SAP WG
 - State statutes and regulations override the SSAP requirements
 - Similarly, a permitted practice granted for a specific insurer overrides the SSAP
 - Material differences from SSAP are required to be disclosed in Note 1 – impact to surplus & income

Accounting Disclosures



- SSAP include disclosure requirements
 - Accomplished as Notes to Financial Statement disclosures, or
 - Through presentation in schedules, exhibits of, or supplements to, the statutory financials
 - Audited portions of statements identified
- SSAP include definitions for accounting that translate to reporting
 - Bonds defined to include commercial paper;
 - Everywhere bonds are reported in the Blanks, commercial paper are included
 - Long-term vs. short-term defined, etc.



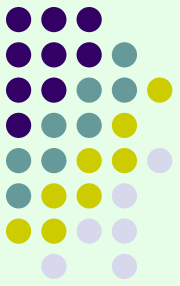
NAIC Blanks

- Separate Blank for each major type of insurance/insurer called a Statement Type:
 - Life (Blue book)
 - Fraternal (Brown book)
 - Property/Casualty (Yellow book)
 - Health (Orange book)
 - Title (Salmon book)
- Annual Statement and Quarterly Statements for first 3 quarters of the year



NAIC Statement Instructions

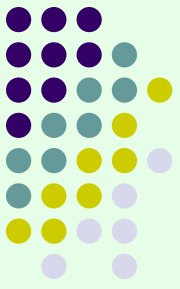
- Each Statement Type Blank has an associated NAIC Statement Instructions manual – Annual and Quarterly versions
- Provides instructional guidance for items not considered self-explanatory and/or not evident from the format and verbiage in the Blank itself
- Provides validation logic (discussed later)



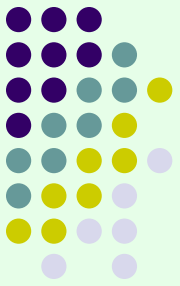
Hierarchy of Standards

- Level 1:
 - SSAP (or state prescribed/permitted practice)
- Level 2:
 - Consensus positions of the Emerging Accounting Issues Working Group (interpretations of SSAP)
- Level 3:
 - NAIC Annual/Quarterly Statement Instructions
 - Purposes & Procedures Manual of SVO (valuation concerns for securities held)

Blanks Working Group



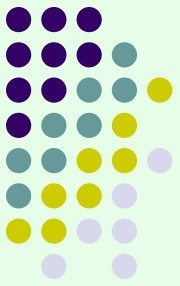
- Charged with improvements and revisions to the Blank to promote uniformity in reporting
- 21 States are members
- Meet at the 3 national meetings and an interim call in June (maintaining quarterly work schedule)
- Other charges:
 - Monitor state filing checklists (example later)
 - Monitor quality of data and recommend instructions to improve quality



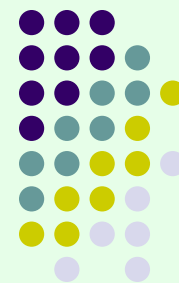
Blanks WG Process

- Automatic consideration of SSAP notes disclosure requirements
- Blanks Proposals Submitted for Changes
 - Referrals from other technical groups, e.g., FAWG, LHATF, Capital Adequacy TF
 - Non-member insurance regulator proposals
 - Industry proposals
 - Other regulatory agency proposals, e.g., Centers for Medicare & Medicaid Services, HHS

Blanks Proposal Requirements

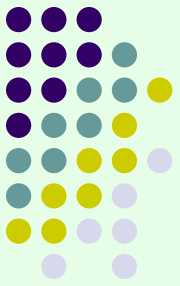


- Developed specific requirements for Blanks Proposals
 - Information required to be included in the Blanks Proposal includes implementation cost comment
 - Deadline for submission to NAIC staff to be considered under normal process for an upcoming meeting (set to accommodate all stakeholders)
 - Emergency process procedure for shorter timeframe considerations (bypass exposure)



Blanks Proposal Deadlines

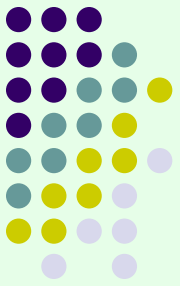
- For the 2010 annual statement, proposals under the normal process must be adopted on the June 2010 conference call meeting
 - This would include being adopted for exposure (comment period) at the March national meeting
- For the 2011 quarterly statements, proposals under the normal process must be adopted at the August 2010 national meeting
 - This would include being adopted for exposure at the June 2010 conference call meeting



Annual and Quarterly Filings

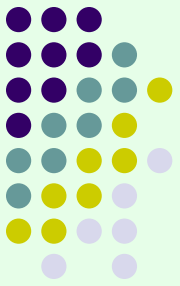
- Blanks proposals indicate whether Annual and/or Quarterly filing
 - Annual statement for 1/1/xxxx thru 12/31xxxx due on 3/1/xxxx+1
 - Quarterly statements for 1st three quarters of year
 - 1/1/xxxx thru 3/31/xxxx due on 5/15/xxxx
 - 4/1/xxxx thru 6/30/xxxx due on 8/15/xxxx
 - 7/1/xxxx thru 9/30/xxxx due on 11/15/xxxx

Annual/Quarterly Statement



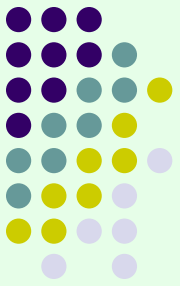
- Jurat Page
 - Demographic Information, Attestation
- Balance Sheet, Income Statement and Cash Flow Statement
- Exhibits and Schedules provide more detail to various balance sheet and income statement items
 - Schedule T and State Page
 - Schedule Y organizational chart and affiliated transaction listings

Annual/Quarterly tables



- Single schedule can include 1 or more tables for database purposes
 - Assets Page includes:
 - Main table (View actual page in the blank)
 - Write-ins table
- All tables must be addressed
 - “None” schedule utilized if not applicable/zero
 - Some columns of data are electronic only
- Numeric, code, text – all types of data included as needed

Supplemental Filings



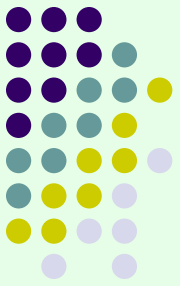
- Differences for a supplement to the Annual or Quarterly Statement
 - Not required to be bound in the actual Annual or Quarterly Statement
 - Supplemental filings can have different filing deadlines than the Annual/Quarterly Statement
 - Management's Discussion & Analysis is a supplement to the Annual Statement, but due 4/1/xxxx+1
 - Supplemental filings can be optional
 - Credit Insurance Experience Exhibit only if write credit insurance

Annual Supplement Deadlines



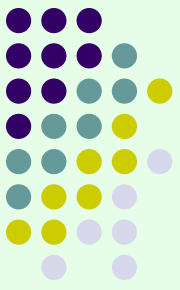
- Required Supplements (not dependent upon business)
 - March 1 deadline
 - Actuarial Opinion
 - Risk-Based Capital
 - Supplemental Compensation (regulator only in hard copy)
 - April 1 deadline
 - Investment Risk Interrogatories
 - Management's Discussion & Analysis
 - Insurance Expense Exhibit
 - May 1 deadline
 - Combined Annual Statement
 - June 1 deadline
 - Accountants Letter of Qualification
 - CPA Audit Report

Annual Supplement Deadlines

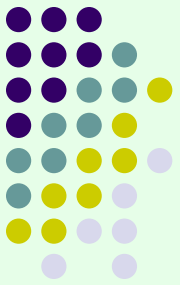


- Only file if applicable
 - March 1 deadline
 - Financial Guarantee Insurance Exhibit
 - Medicate Supplement Insurance Exhibit
 - Trusteed Surplus Statement
 - Bail Bond Supplement
 - Actuarial Opinion Summary (regulator only hard copy)
 - April 1 deadline
 - Credit Insurance Experience Exhibit
 - A&H Policy Experience Exhibit
 - Long-term Care Experience Reporting Forms

Filing Requirements from State

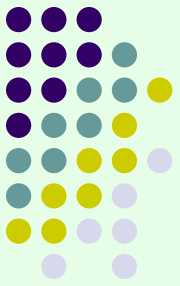


- State Filing Checklists direct insurers:
 - What to file to the State and how many copies
 - What to file to the NAIC and how many copies
 - Format - Electronic, hard copy or both (see example)
- Filings with the NAIC reflect the state of domicile's prescribed and permitted accounting rules
 - Differences are in Note 1 so licensed states know the impact of any difference
 - Licensure states typically rely upon NAIC electronic copy rather than requiring separate hard copy filings



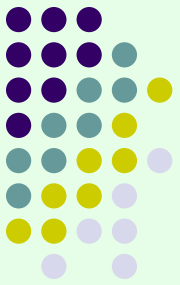
State Waivers

- States can waive an insurer from electronic filing with the NAIC
 - Typically for financial burden rationale
 - Small, single-state insurers
- States can waive an insurer from specific filings
 - Waive Insurance Expense Exhibit for example
- States can also extend deadlines by filing



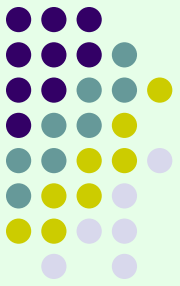
Electronic Filings Only

- Previously, NAIC supported manual entry of hard copy filings
- In 1999, the requirement changed to electronic only filings
 - Regulator group approved the decision
 - Rationale to support:
 - Computer usage was common enough to warrant the change
 - The few companies where it would still be a concern would not be material to the industry totals



Format Decisions

- Annual and Quarterly Statements are captured in electronic data format and PDF version that should be identical to hard copy
 - Some notes and explanation fields are PDF only
- Nature of supplement dictates format
 - All text document with very different responses and formats for each insurer = PDF
 - All numbers, codes, etc. = electronic data and PDF to match hard copy of entire filing

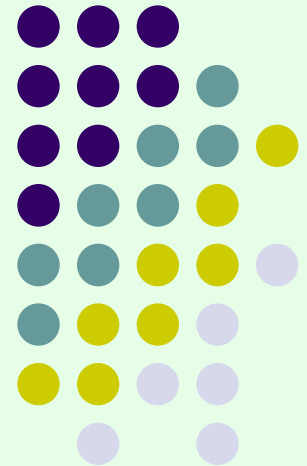


3rd Party Vendors Utilized

- Create software that meets NAIC specification and testing requirements
- Include state only filing requirements as needed for their customers
- Sell the software to the insurers
- Blanks WG timelines and process take into consideration the vendors' development cycle
- Vendors add bells and whistles for higher end

Data Captured

Financial Data Repository (FDR)
Database

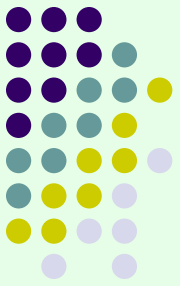


Demographic Information from Jurat Page



- NAIC Company Code (unique identifier)
- Legal Name
- State of Domicile
- Commenced Business Date/Incorporated Date
- Addresses of Books/Records, Admin Office
- Statement Contact Person Information
- Officers and Directors or Trustees

Blanks Walk Through



- Jurat Page
- Assets Page
- Liabilities Page
- Exhibit of Net Investment Income
- 5-Year Historical Data Exhibit
- State Page
- General Interrogatories
- Schedule D, Part 1
- Schedule T

ANNUAL STATEMENT

For the Year Ended December 31, 2010

OF THE CONDITION AND AFFAIRS OF THE

NAIC Group Code _____ (Current Period) / _____ (Prior Period) NAIC Company Code _____ Employer's ID Number _____
 Organized under the Laws of _____, State of Domicile or Part of Entry _____
 Country of Domicile _____
 Incorporated/Organized _____ Commenced Business _____
 Statutory Home Office _____ (Street and Number) _____ (City or Town, State and Zip Code) _____
 Main Administrative Office _____ (Street and Number) _____ (City or Town, State and Zip Code) _____
 _____ (City or Town, State and Zip Code) _____ (Area Code) _____ (Telephone Number) _____
 Mail Address _____ (Street and Number or P.O. Box) _____ (City or Town, State and Zip Code) _____
 Primary Location of Books and Records _____ (Street and Number) _____ (City or Town, State and Zip Code) _____
 _____ (City or Town, State and Zip Code) _____ (Area Code) _____ (Telephone Number) _____
 Internet Web Site Address _____
 Statutory Statement Contact _____ (Name) _____ (Area Code) _____ (Telephone Number) _____ (Extension) _____
 _____ (E-Mail Address) _____ (Fax Number) _____

OFFICERS				
	Name	Title	Name	Title
1.	_____	_____	_____	_____
2.	_____	_____	Other	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____

DIRECTORS OR TRUSTEES

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

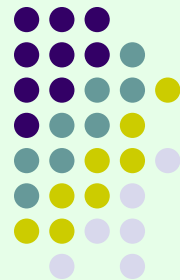
State of _____
 County of _____

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 deduction 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 (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

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

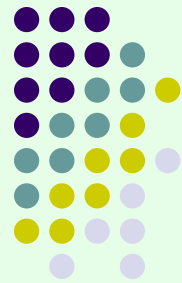
Subscribed and sworn to before me
 this _____ day of _____, 2011

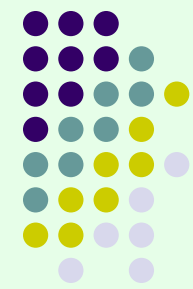
a. Is this an original filing? Yes [] No []
 b. If so: 1. State the amendment number _____
 2. Date filed _____
 3. Number of pages attached _____



ASSETS

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

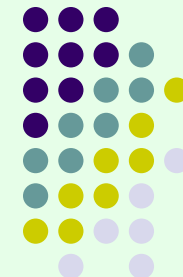




LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Year	2 Prior Year
1. Aggregate reserve for life contracts \$ (Exhibit 5, Line 9999999) less \$ included in Line 6.3 (including \$ Modco Reserve)
2. Aggregate reserve for accident and health contracts (Exhibit 6, Line 17, Col. 1) (including \$ Modco Reserve).....
3. Liability for deposit-type contracts (Exhibit 7, Line 14, Col. 1) (including \$ Modco Reserve)
4. Contract claims:		
4.1 Life (Exhibit 8, Part 1, Line 4.4, Col. 1 less sum of Cols. 9, 10 and 11).....
4.2 Accident and health (Exhibit 8, Part 1, Line 4.4, sum of Cols. 9, 10 and 11).....
5. Policyholders' dividends \$..... and coupons \$..... due and unpaid (Exhibit 4, Line 10)
6. Provision for policyholders' dividends and coupons payable in following calendar year—estimated amounts:		
6.1 Dividends apportioned for payment (including \$ Modco)
6.2 Dividends not yet apportioned (including \$ Modco).....
6.3 Coupons and similar benefits (including \$ Modco).....
7. Amount provisionally held for deferred dividend policies not included in Line 6.....
8. Premiums and annuity considerations for life and accident and health contracts received in advance less \$..... discount; including \$..... accident and health premiums (Exhibit 1, Part 1, Col. 1, sum of Lines 4 and 14)
9. Contract liabilities not included elsewhere:		
9.1 Surrender values on canceled contracts
9.2 Provision for experience rating refunds, including \$..... accident and health experience rating refunds.....
9.3 Other amounts payable on reinsurance, including \$..... assumed and \$..... ceded
9.4 Interest Maintenance Reserve (IMR, Line 6)
10. Commissions to agents due or accrued-life and annuity contracts \$..... accident and health \$..... and deposit-type contract funds \$
11. Commissions and expense allowances payable on reinsurance assumed.....
12. General expenses due or accrued (Exhibit 2, Line 12, Col. 6).....
13. Transfers to Separate Accounts due or accrued (net) (including \$..... accrued for expense allowances recognized in reserves, net of reinsured allowances)
14. Taxes, licenses and fees due or accrued, excluding federal income taxes (Exhibit 3, Line 9, Col. 5)
15.1 Current federal and foreign income taxes, including \$..... on realized capital gains (losses).....
15.2 Net deferred tax liability.....
16. Unearned investment income
17. Amounts withheld or retained by company as agent or trustee
18. Amounts held for agents' account, including \$..... agents' credit balances
19. Remittances and items not allocated
20. Net adjustment in assets and liabilities due to foreign exchange rates
21. Liability for benefits for employees and agents if not included above.....
22. Borrowed money \$..... and interest thereon \$
23. Dividends to stockholders declared and unpaid.....
24. Miscellaneous liabilities:		
24.01 Asset valuation reserve (AVR, Line 16, Col. 7).....
24.02 Reinsurance in unauthorized companies.....
24.03 Funds held under reinsurance treaties with unauthorized reinsurers.....
24.04 Payable to parent, subsidiaries and affiliates
24.05 Drafts outstanding.....
24.06 Liability for amounts held under uninsured plans
24.07 Funds held under coinsurance.....

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.....	.....	.....
10. Total gross investment income.....	.....	.....
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).....
15. Aggregate write-ins for deductions from investment income.....	.....	.....
16. Total deductions (Lines 11 through 15).....	.....	.....
17. Net investment income (Line 10 minus Line 16)	.....	.....
DETAILS OF WRITE-INS		
0901. ....	.....	.....
0902. ....	.....	.....
0903. ....	.....	.....
0998. Summary of remaining write-ins for Line 9 from overflow page.....	.....	.....
0999. Totals (Lines 0901 through 0903) plus 0998 (Line 9 above)	.....	.....
1501. ....	.....	.....
1502. ....	.....	.....
1503. ....	.....	.....
1598. Summary of remaining write-ins for Line 15 from overflow page.....	.....	.....
1599. Totals (Lines 1501 through 1503) plus 1598 (Line 15 above)	.....	.....

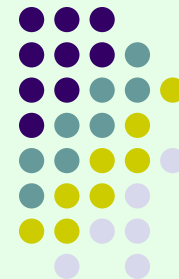
- (a) Includes \$ _____ accrual of discount less \$ _____ amortization of premium and less \$ _____ paid for accrued interest on purchases.
- (b) Includes \$ _____ accrual of discount less \$ _____ amortization of premium and less \$ _____ paid for accrued dividends on purchases.
- (c) Includes \$ _____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

FIVE-YEAR HISTORICAL DATA

Show amounts in whole dollars only, no cents; show percentages to one decimal place, i.e., 17.6.

Show amounts of life insurance in this exhibit in thousands (OMIT \$000)

	1 2010	2 2009	3 2008	4 2007	5 2006
Life Insurance in Force (Exhibit of Life Insurance)					
1. Ordinary-whole life and endowment (Line 34, Col. 4).....
2. Ordinary-term (Line 21, Col. 4, less Line 34, Col. 4).....
3. Credit life (Line 21, Col. 6).....
4. Group, excluding FEGLI/SGLI (Line 21, Col. 9 less Lines 43 & 44, Col. 4).....
5. Industrial (Line 21, Col. 2).....
6. FEGLI/SGLI (Lines 43 & 44, Col. 4).....
7. Total (Line 21, Col. 10).....
New Business Issued (Exhibit of Life Insurance)					
8. Ordinary-whole life and endowment (Line 34, Col. 2).....
9. Ordinary-term (Line 2, Col. 4, less Line 34, Col. 2).....
10. Credit life (Line 2, Col. 6).....
11. Group (Line 2, Col. 9).....
12. Industrial (Line 2, Col. 2).....
13. Total (Line 2, Col. 10).....
Premium Income-Lines of Business (Exhibit 1 - Part 1)					
14. Industrial life (Line 20.4, Col. 2).....
15.1 Ordinary life insurance (Line 20.4, Col. 3).....
15.2 Ordinary individual annuities (Line 20.4, Col. 4).....
16. Credit life, (group and individual) (Line 20.4, Col. 5).....
17.1 Group life insurance (Line 20.4, Col. 6).....
17.2 Group annuities (Line 20.4, Col. 7).....
18.1 A & H-group (Line 20.4, Col. 8).....
18.2 A & H-credit (group and individual) (Line 20.4, Col. 9).....
18.3 A & H-other (Line 20.4, Col. 10).....
19. Aggregate of all other lines of business (Line 20.4, Col. 11).....
20. Total.....
Balance Sheet (Pages 2 and 3)					
21. Total admitted assets excluding Separate Accounts business (Page 2, Line 26, Col. 3).....
22. Total liabilities excluding Separate Accounts business (Page 3, Line 26).....
23. Aggregate life reserves (Page 3, Line 1).....
24. Aggregate A & H reserves (Page 3, Line 2).....
25. Deposit-type contract funds (Page 3, Line 3).....
26. Asset valuation reserve (Page 3, Line 24.01).....
27. Capital (Page 3, Lines 29 & 30).....
28. Surplus (Page 3, Line 37).....



DIRECT BUSINESS IN THE STATE OF

DURING THE YEAR

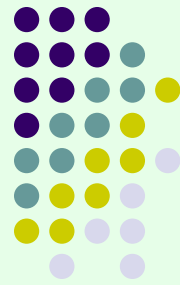
NAIC Group Code.....

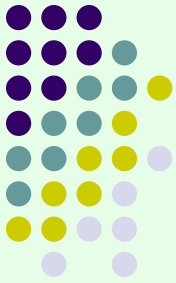
LIFE INSURANCE

NAIC Company Code.....

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary		2 Credit Life (Group and Individual)		3 Group		4 Industrial		5 Total	
	1. Life Insurance.....									
2. Annuity considerations.....										
3. Deposit-type contract funds.....			XXX				XXX			
4. Other considerations.....										
5. Totals (Sum of Lines 1 to 4)										
DIRECT DIVIDENDS TO POLICYHOLDERS										
Life Insurance:										
6.1 Paid in cash or left on deposit.....										
6.2 Applied to pay renewal premiums.....										
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....										
6.4 Other.....										
6.5 Totals (Sum of Lines 6.1 to 6.4)										
Annuities:										
7.1 Paid in cash or left on deposit.....										
7.2 Applied to provide paid-up annuities.....										
7.3 Other.....										
7.4 Totals (Sum of Lines 7.1 to 7.3)										
8. Grand Totals (Lines 6.5 + 7.4)										
DIRECT CLAIMS AND BENEFITS PAID										
9. Death benefits.....										
10. Matured endowments.....										
11. Annuity benefits.....										
12. Surrender values and withdrawals for life contracts.....										
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....										
14. All other benefits, except accident and health.....										
15. Totals.....										
DETAILS OF WRITE-INS										
1301.										
1302.										
1303.										
1308. Summary of remaining write-ins for Line 13 from overflow page.....										
1399. Total (Lines 1301 through 1303 + 1308) (Line 13 above)										
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year.....										
17. Incurred during current year.....										
Settled during current year:										
18.1 By payment in full.....										
18.2 By payment on compromised claims.....										
18.3 Totals paid.....										
18.4 Reduction by compromise.....										
18.5 Amount rejected.....										
18.6 Total settlements.....										
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)										
POLICY EXHIBIT										
20. In force December 31, prior year.....				(a)	No. of Policies					
21. Issued during year.....										
22. Other changes to in force (Net).....										
23. In force December 31 of current year.....				(a)						

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





GENERAL INTERROGATORIES

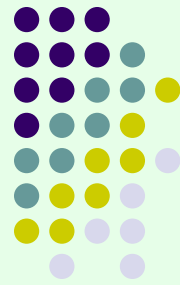
PART 1 – COMMON INTERROGATORIES

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?
- 3.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? Yes No N/A
- 3.6 Have all of the recommendations within the latest financial examination report been complied with? Yes No N/A
- 4.1 During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity) receive credit or commissions for 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.

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

States, Etc.	1 Active States	Direct Business Only					
		Life Contracts		4 Accident and Health Insurance Premiums, Including Policy, Membership and Other Fees	5 Other Considerations	6 Total Columns 2 through 5	7 Deposit-Type Contracts
		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					
59. Subtotal	(a)	XXX					
90. Reporting entity contributions for employee benefits plans		XXX					
91. Dividends or refunds applied to purchase paid-up additions and annuities		XXX					



Questions?

