



LIFE AND ACCIDENT AND HEALTH COMPANIES—ASSOCIATION EDITION

ANNUAL STATEMENT
FOR THE YEAR ENDED DECEMBER 31, 2011
OF THE CONDITION AND AFFAIRS OF THE
HUMANA INSURANCE OF PUERTO RICO, INC.

NAIC Group Code 0119, 0119 NAIC Company Code 84603 Employer's ID Number 66-0291866
Organized under the Laws of Puerto Rico, State of Domicile or Port of Entry Puerto Rico
Country of Domicile United States
Incorporated/Organized 10/06/1969 Commenced Business 09/22/1971
Statutory Home Office 383 FD Roosevelt Avenue, San Juan, PR 00918-2131
Main Administrative Office 383 FD Roosevelt Avenue, San Juan, PR 00918-2131 787-282-7900
Mail Address 383 FD Roosevelt Avenue, San Juan, PR 00918-2131
Primary Location of Books and Records 383 FD Roosevelt Avenue, San Juan, PR 00918-2131 787-282-7900-5516
Internet Web Site Address
Statutory Statement Contact Dawreen Figueroa, 787-282-7900-5516
dfigueroa@humana.com (E-Mail Address) 866-283-2999 (FAX Number)

OFFICERS

Name Title Name Title
David M. Krebs, President & COO James H. Bloem, Treasurer
María Del Carmen Rosario, Secretary Joan O. Lenahan, Assistant Secretary

OTHER OFFICERS

Thomas J. Liston, Senior Vice President - Senior Products

DIRECTORS OR TRUSTEES

James E. Murray / Chairman, David M. Krebs, Luis Montaner, M.D., P. Anthony Hammond
Vacancy (PR Resident)

State of .....

County of ..... ss

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 (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.

David M. Krebs
President & COO

María del Carmen Rosario
Secretary

James H. Bloem
Treasurer

a. Is this an original filing? Yes [ X ] No [ ]

Subscribed and sworn to before me this
day of ,

b. If no,
1. State the amendment number
2. Date filed
3. Number of pages attached

**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE HUMANA INSURANCE OF PUERTO RICO, INC.**

**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).....	32,062,859		32,062,859	16,730,872
2. Stocks (Schedule D):				
2.1 Preferred stocks .....	0		0	0
2.2 Common stocks .....	0		0	0
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens .....			0	0
3.2 Other than first liens .....			0	0
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$ ..... encumbrances).....			0	0
4.2 Properties held for the production of income (less \$ ..... encumbrances) .....			0	0
4.3 Properties held for sale (less \$ ..... encumbrances) .....			0	0
5. Cash (\$ .....586,304 , Schedule E - Part 1), cash equivalents (\$ .....499,997 , Schedule E - Part 2) and short-term investments (\$ .....35,006,768 , Schedule DA).....	36,093,069		36,093,069	31,478,996
6. Contract loans (including \$ ..... premium notes).....			0	0
7. Derivatives (Schedule DB).....			0	0
8. Other invested assets (Schedule BA) .....	0		0	0
9. Receivables for securities .....			0	0
10. Securities lending reinvested collateral assets (Schedule DL).....			0	0
11. Aggregate write-ins for invested assets .....	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11) .....	68,155,928	0	68,155,928	48,209,868
13. Title plants less \$ ..... charged off (for Title insurers only).....			0	0
14. Investment income due and accrued .....	220,546		220,546	124,067
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection .....	831,562		831,562	2,425,720
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ ..... earned but unbilled premiums).....			0	0
15.3 Accrued retrospective premiums .....	152,615		152,615	32,392
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers .....			0	0
16.2 Funds held by or deposited with reinsured companies .....			0	0
16.3 Other amounts receivable under reinsurance contracts .....			0	0
17. Amounts receivable relating to uninsured plans .....	3,631,200		3,631,200	4,536,497
18.1 Current federal and foreign income tax recoverable and interest thereon .....	288,034		288,034	0
18.2 Net deferred tax asset .....			0	0
19. Guaranty funds receivable or on deposit .....			0	0
20. Electronic data processing equipment and software .....			0	0
21. Furniture and equipment, including health care delivery assets (\$ ..... ) .....			0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates .....			0	0
23. Receivables from parent, subsidiaries and affiliates .....			0	1,842,508
24. Health care (\$ ..... ) and other amounts receivable.....	279,993		279,993	326,854
25. Aggregate write-ins for other than invested assets .....	77,885	77,885	0	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25).....	73,637,763	77,885	73,559,878	57,497,906
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts .....			0	0
28. Total (Lines 26 and 27)	73,637,763	77,885	73,559,878	57,497,906
<b>DETAILS OF WRITE-INS</b>				
1101. ....				
1102. ....				
1103. ....				
1198. Summary of remaining write-ins for Line 11 from overflow page .....	0	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)	0	0	0	0
2501. Prepaid Expenses.....	65,000	65,000	0	0
2502. Prepaid Commissions.....	12,885	12,885	0	0
2503. ....				
2598. Summary of remaining write-ins for Line 25 from overflow page .....	0	0	0	0
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	77,885	77,885	0	0

LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Year	2 Prior Year
1. Aggregate reserve for life contracts \$ .....50,000 (Exhibit 5, Line 9999999) less \$ ..... included in Line 6.3 (including \$ ..... Modco Reserve).....	50,000	53,892
2. Aggregate reserve for accident and health contracts (Exhibit 6, Line 17, Col. 1)(including \$ ..... Modco Reserve).....	21,294	21,579
3. Liability for deposit-type contracts (Exhibit 7, Line 14, Col. 1) (including \$ ..... Modco Reserve).....	0	0
4. Contract claims:		
4.1 Life (Exhibit 8, Part 1, Line 4.4, Col. 1 less sum of Cols. 9, 10 and 11).....	48,967	54,257
4.2 Accident and health (Exhibit 8, Part 1, Line 4.4, sum of Cols. 9, 10 and 11).....	9,995,542	11,133,989
5. Policyholders' dividends \$ ..... and coupons \$ ..... due and unpaid (Exhibit 4, Line 10).....	0	0
6. Provision for policyholders' dividends and coupons payable in following calendar year—estimated amounts:		
6.1 Dividends apportioned for payment (including \$ ..... Modco).....	0	0
6.2 Dividends not yet apportioned (including \$ ..... Modco).....	0	0
6.3 Coupons and similar benefits (including \$ ..... Modco).....	0	0
7. Amount provisionally held for deferred dividend policies not included in Line 6.....	0	0
8. Premiums and annuity considerations for life and accident and health contracts received in advance less \$ ..... discount; including \$ .....1,076,922 accident and health premiums (Exhibit 1, Part 1, Col. 1, sum of Lines 4 and 14).....	1,081,757	812,305
9. Contract liabilities not included elsewhere:		
9.1 Surrender values on canceled contracts.....	0	0
9.2 Provision for experience rating refunds, including the liability of \$ ..... accident and health experience rating refunds of which \$ ..... is for medical loss ratio rebate per the Public Health Service Act.....	6,347,460	24,392
9.3 Other amounts payable on reinsurance, including \$ ..... assumed and \$ .....21 ceded.....	21	0
9.4 Interest Maintenance Reserve (IMR, Line 6).....	211,827	244,993
10. Commissions to agents due or accrued-life and annuity contracts \$ ..... accident and health \$ ..... and deposit-type contract funds \$ .....	144,403	132,452
11. Commissions and expense allowances payable on reinsurance assumed.....	0	0
12. General expenses due or accrued (Exhibit 2, Line 12, Col. 6).....	1,344,523	1,323,836
13. Transfers to Separate Accounts due or accrued (net) (including \$ ..... accrued for expense allowances recognized in reserves, net of reinsured allowances).....	0	2,748
14. Taxes, licenses and fees due or accrued, excluding federal income taxes (Exhibit 3, Line 9, Col. 5).....	3,125	0
15.1 Current federal and foreign income taxes, including \$ ..... on realized capital gains (losses).....	0	234,969
15.2 Net deferred tax liability.....	0	0
16. Unearned investment income.....	0	0
17. Amounts withheld or retained by company as agent or trustee.....	0	0
18. Amounts held for agents' account, including \$ ..... agents' credit balances.....	0	0
19. Remittances and items not allocated.....	18,071	351,967
20. Net adjustment in assets and liabilities due to foreign exchange rates.....	0	0
21. Liability for benefits for employees and agents if not included above.....	0	0
22. Borrowed money \$ ..... and interest thereon \$ .....	0	0
23. Dividends to stockholders declared and unpaid.....	0	0
24. Miscellaneous liabilities:		
24.01 Asset valuation reserve (AVR, Line 16, Col. 7).....	102,205	41,925
24.02 Reinsurance in unauthorized companies.....	0	0
24.03 Funds held under reinsurance treaties with unauthorized reinsurers.....	0	0
24.04 Payable to parent, subsidiaries and affiliates.....	4,056,391	0
24.05 Drafts outstanding.....	0	0
24.06 Liability for amounts held under uninsured plans.....	172,079	710,531
24.07 Funds held under coinsurance.....	0	0
24.08 Derivatives.....	0	0
24.09 Payable for securities.....	0	0
24.10 Payable for securities lending.....	0	0
24.11 Capital notes \$ ..... and interest thereon \$ .....	0	0
25. Aggregate write-ins for liabilities.....	1,169,312	1,407,629
26. Total liabilities excluding Separate Accounts business (Lines 1 to 25).....	24,766,977	16,551,464
27. From Separate Accounts statement.....	0	0
28. Total liabilities (Lines 26 and 27).....	24,766,977	16,551,464
29. Common capital stock.....	2,500,026	2,500,026
30. Preferred capital stock.....	0	0
31. Aggregate write-ins for other than special surplus funds.....	0	0
32. Surplus notes.....	0	0
33. Gross paid in and contributed surplus (Page 3, Line 33, Col. 2 plus Page 4, Line 51.1, Col. 1).....	0	0
34. Aggregate write-ins for special surplus funds.....	0	0
35. Unassigned funds (surplus).....	46,292,875	38,446,415
36. Less treasury stock, at cost:		
36.1 ..... shares common (value included in Line 29 \$ .....)	0	0
36.2 ..... shares preferred (value included in Line 30 \$ .....)	0	0
37. Surplus (Total Lines 31+32+33+34+35-36) ( including \$ ..... in Separate Accounts Statement).....	46,292,875	38,446,415
38. Totals of Lines 29, 30 and 37 (Page 4, Line 55).....	48,792,901	40,946,441
39. Totals of Lines 28 and 38 (Page 2, Line 28, Col. 3).....	73,559,878	57,497,905
<b>DETAILS OF WRITE-INS</b>		
2501. Line 15 from 2000 Annual Statement.....	0	4,857
2502. Unclaimed Funds.....	1,168,107	1,271,117
2503. Miscellaneous Liabilities.....	1,203	131,657
2598. Summary of remaining write-ins for Line 25 from overflow page.....	2	(2)
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above).....	1,169,312	1,407,629
3101. ....	0	0
3102. ....	0	0
3103. ....	0	0
3198. Summary of remaining write-ins for Line 31 from overflow page.....	0	0
3199. Totals (Lines 3101 through 3103 plus 3198)(Line 31 above).....	0	0
3401. ....	0	0
3402. ....	0	0
3403. ....	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 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, less Col. 11)	88,066,396	89,229,845
2. Considerations for supplementary contracts with life contingencies		0
3. Net investment income (Exhibit of Net Investment Income, Line 17)	1,129,681	605,811
4. Amortization of Interest Maintenance Reserve (IMR, Line 5)	42,539	44,558
5. Separate Accounts net gain from operations excluding unrealized gains or losses	0	0
6. Commissions and expense allowances on reinsurance ceded (Exhibit 1, Part 2, Line 26.1, Col. 1)	0	0
7. Reserve adjustments on reinsurance ceded		0
8. Miscellaneous Income:		
8.1 Income from fees associated with 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	10,974	3,680
9. Totals (Lines 1 to 8.3)	89,249,590	89,883,894
10. Death benefits	230,045	72,945
11. Matured endowments (excluding guaranteed annual pure endowments)	0	0
12. Annuity benefits (Exhibit 8, Part 2, Line 6.4, Cols. 4 + 8)	0	0
13. Disability benefits and benefits under accident and health contracts	71,126,450	73,046,675
14. Coupons, guaranteed annual pure endowments and similar benefits		0
15. Surrender benefits and withdrawals for life contracts		0
16. Group conversions		0
17. Interest and adjustments on contract or deposit-type contract funds		0
18. Payments on supplementary contracts with life contingencies		0
19. Increase in aggregate reserves for life and accident and health contracts	(8,930)	4,141
20. Totals (Lines 10 to 19)	71,347,565	73,123,761
21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only) (Exhibit 1, Part 2, Line 31, Col. 1)	3,561,090	4,675,841
22. Commissions and expense allowances on reinsurance assumed (Exhibit 1, Part 2, Line 26.2, Col. 1)	0	0
23. General insurance expenses (Exhibit 2, Line 10, Columns 1, 2, 3 and 4)	5,331,907	2,840,287
24. Insurance taxes, licenses and fees, excluding federal income taxes (Exhibit 3, Line 7, Cols. 1 + 2 + 3)	349,976	132,464
25. Increase in loading on deferred and uncollected premiums		0
26. Net transfers to or (from) Separate Accounts net of reinsurance		0
27. Aggregate write-ins for deductions	0	0
28. Totals (Lines 20 to 27)	80,590,538	80,772,353
29. Net gain from operations before dividends to policyholders and federal income taxes (Line 9 minus Line 28)	8,659,052	9,111,541
30. Dividends to policyholders		0
31. Net gain from operations after dividends to policyholders and before federal income taxes (Line 29 minus Line 30)	8,659,052	9,111,541
32. Federal and foreign income taxes incurred (excluding tax on capital gains)	728,535	1,001,655
33. Net gain from operations after dividends to policyholders and federal income taxes and before realized capital gains or (losses) (Line 31 minus Line 32)	7,930,517	8,109,886
34. Net realized capital gains (losses) (excluding gains (losses) transferred to the IMR) less capital gains tax of \$ ..... (excluding taxes of \$ ..... transferred to the IMR)	5,140	312
35. Net income (Line 33 plus Line 34)	7,935,657	8,110,198
<b>CAPITAL AND SURPLUS ACCOUNT</b>		
36. Capital and surplus, December 31, prior year (Page 3, Line 38, Col. 2)	40,946,441	32,750,720
37. Net income (Line 35)	7,935,657	8,110,198
38. Change in net unrealized capital gains (losses) less capital gains tax of \$		0
39. Change in net unrealized foreign exchange capital gain (loss)		0
40. Change in net deferred income tax		0
41. Change in nonadmitted assets	(28,918)	109,936
42. Change in liability for reinsurance in unauthorized companies	0	0
43. Change in reserve on account of change in valuation basis, (increase) or decrease (Exhibit 5A, Line 9999999, Col. 4)	0	0
44. Change in asset valuation reserve	(60,280)	(24,413)
45. Change in treasury stock (Page 3, Lines 36.1 and 36.2 Col. 2 minus Col. 1)	0	0
46. Surplus (contributed to) withdrawn from Separate Accounts during period		0
47. Other changes in surplus in Separate Accounts statement	0	0
48. Change in surplus notes	0	0
49. Cumulative effect of changes in accounting principles		0
50. Capital changes:		
50.1 Paid in		0
50.2 Transferred from surplus (Stock Dividend)		0
50.3 Transferred to surplus		0
51. Surplus adjustment:		
51.1 Paid in		0
51.2 Transferred to capital (Stock Dividend)		0
51.3 Transferred from capital		0
51.4 Change in surplus as a result of reinsurance		0
52. Dividends to stockholders		0
53. Aggregate write-ins for gains and losses in surplus	0	0
54. Net change in capital and surplus for the year (Lines 37 through 53)	7,846,459	8,195,721
55. Capital and surplus, December 31, current year (Lines 36 + 54) (Page 3, Line 38)	48,792,900	40,946,441
<b>DETAILS OF WRITE-INS</b>		
08.301 Misch Income Round Decimal		(2)
08.302 Miscellaneous Income	10,974	3,682
08.303		
08.398 Summary of remaining write-ins for Line 8.3 from overflow page	0	0
08.399 Totals (Lines 08.301 through 08.303 plus 08.398) (Line 8.3 above)	10,974	3,680
2701. Misch Income Decimal Round		0
2702.		
2703.		
2798. Summary of remaining write-ins for Line 27 from overflow page	0	0
2799. Totals (Lines 2701 through 2703 plus 2798) (Line 27 above)	0	0
5301.		
5302.		
5303.		
5398. Summary of remaining write-ins for Line 53 from overflow page	0	0
5399. Totals (Lines 5301 through 5303 plus 5398) (Line 53 above)	0	0

## CASH FLOW

	1 Current Year	2 Prior Year
<b>Cash from Operations</b>		
1. Premiums collected net of reinsurance.....	96,132,851	88,644,828
2. Net investment income.....	1,330,355	627,344
3. Miscellaneous income.....	10,974	3,680
4. Total (Lines 1 through 3).....	97,474,180	89,275,852
5. Benefit and loss related payments.....	72,495,458	72,323,154
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.....	2,748	(2,748)
7. Commissions, expenses paid and aggregate write-ins for deductions.....	8,840,365	7,188,843
8. Dividends paid to policyholders.....	(9,373)	(1,157)
9. Federal and foreign income taxes paid (recovered) net of \$ tax on capital gains (losses).....	1,251,538	582,300
10. Total (Lines 5 through 9).....	82,580,736	80,090,392
11. Net cash from operations (Line 4 minus Line 10).....	14,893,444	9,185,460
<b>Cash from Investments</b>		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds.....	6,629,662	712,596
12.2 Stocks.....	0	0
12.3 Mortgage loans.....	0	0
12.4 Real estate.....	0	0
12.5 Other invested assets.....	0	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments.....	0	0
12.7 Miscellaneous proceeds.....	0	0
12.8 Total investment proceeds (Lines 12.1 to 12.7).....	6,629,662	712,596
13. Cost of investments acquired (long-term only):		
13.1 Bonds.....	22,244,289	12,322,712
13.2 Stocks.....	0	0
13.3 Mortgage loans.....	0	0
13.4 Real estate.....	0	0
13.5 Other invested assets.....	0	0
13.6 Miscellaneous applications.....	9,373	1,154
13.7 Total investments acquired (Lines 13.1 to 13.6).....	22,253,662	12,323,866
14. Net increase (decrease) in contract loans and premium notes.....	0	0
15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14).....	(15,624,000)	(11,611,270)
<b>Cash from Financing and Miscellaneous Sources</b>		
16. Cash provided (applied):		
16.1 Surplus notes, capital notes.....	0	0
16.2 Capital and paid in surplus, less treasury stock.....	0	0
16.3 Borrowed funds.....	0	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities.....	0	0
16.5 Dividends to stockholders.....	0	0
16.6 Other cash provided (applied).....	5,344,629	5,423,890
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6).....	5,344,629	5,423,890
<b>RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS</b>		
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17).....	4,614,073	2,998,080
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year.....	31,478,996	28,480,916
19.2 End of year (Line 18 plus Line 19.1).....	36,093,069	31,478,996

**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE HUMANA INSURANCE OF PUERTO RICO, INC.**

**ANALYSIS OF OPERATIONS BY LINES OF BUSINESS**

	1 Total	2 Industrial Life	Ordinary			6 Credit Life (Group and Individual)	Group		Accident and Health		12 Aggregate of All Other Lines of Business
			3 Life Insurance	4 Individual Annuities	5 Supplementary Contracts		7 Life Insurance (a)	8 Annuities	9 Group	10 Credit (Group and Individual)	
1. Premiums and annuity considerations for life and accident and health contracts	88,066,396	.0	.0	.0	.0	.0	400,038	.0	87,666,358	.0	.0
2. Considerations for supplementary contracts with life contingencies	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. Net investment income	1,129,682	.0	.0	.0	.0	.0	5,132	.0	1,124,550	.0	.0
4. Amortization of Interest Maintenance Reserve (IMR)	42,539	.0	.0	.0	.0	.0	193	.0	42,346	.0	.0
5. Separate Accounts net gain from operations excluding unrealized gains or losses	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
6. Commissions and expense allowances on reinsurance ceded	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
7. Reserve adjustments on reinsurance ceded	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
8. Miscellaneous income:											
8.1 Fees associated with income from investment management, administration and contract guarantees from Separate Accounts	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
8.2 Charges and fees for deposit-type contracts	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
8.3 Aggregate write-ins for miscellaneous income	10,974	.0	.0	.0	.0	.0	50	.0	10,924	.0	.0
9. Totals (Lines 1 to 8.3)	89,249,591	.0	.0	.0	.0	.0	405,413	.0	88,844,178	.0	.0
10. Death benefits	230,045	.0	8,545	.0	.0	.0	221,500	.0	.0	.0	.0
11. Matured endowments (excluding guaranteed annual pure endowments)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
12. Annuity benefits	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
13. Disability benefits and benefits under accident and health contracts	71,126,450	.0	.0	.0	.0	.0	.0	.0	71,126,450	.0	.0
14. Coupons, guaranteed annual pure endowments and similar benefits	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15. Surrender benefits and withdrawals for life contracts	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
16. Group conversions	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
17. Interest and adjustments on contract or deposit-type contract funds	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
18. Payments on supplementary contracts with life contingencies	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
19. Increase in aggregate reserves for life and accident and health contracts	(8,931)	.0	(3,543)	.0	.0	.0	(1,748)	.0	(3,640)	.0	.0
20. Totals (Lines 10 to 19)	71,347,564	.0	5,002	.0	.0	.0	219,752	.0	71,122,810	.0	.0
21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only)	3,561,090	.0	.0	.0	.0	.0	16,176	.0	3,544,914	.0	.0
22. Commissions and expense allowances on reinsurance assumed	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
23. General insurance expenses	5,331,908	.0	.0	.0	.0	.0	39,181	.0	5,292,727	.0	.0
24. Insurance taxes, licenses and fees, excluding federal income taxes	349,976	.0	.0	.0	.0	.0	1,590	.0	348,386	.0	.0
25. Increase in loading on deferred and uncollected premiums	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
26. Net transfers to or (from) Separate Accounts net of reinsurance	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
27. Aggregate write-ins for deductions	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
28. Totals (Lines 20 to 27)	80,590,538	.0	5,002	.0	.0	.0	276,699	.0	80,308,837	.0	.0
29. Net gain from operations before dividends to policyholders and federal income taxes (Line 9 minus Line 28)	8,659,053	.0	(5,002)	.0	.0	.0	128,714	.0	8,535,341	.0	.0
30. Dividends to policyholders	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
31. Net gain from operations after dividends to policyholders and before federal income taxes (Line 29 minus Line 30)	8,659,053	.0	(5,002)	.0	.0	.0	128,714	.0	8,535,341	.0	.0
32. Federal income taxes incurred (excluding tax on capital gains)	728,535	.0	.0	.0	.0	.0	3,309	.0	725,226	.0	.0
33. Net gain from operations after dividends to policyholders and federal income taxes and before realized capital gains or (losses) (Line 31 minus Line 32)	7,930,518	.0	(5,002)	.0	.0	.0	125,405	.0	7,810,115	.0	.0
<b>DETAILS OF WRITE-INS</b>											
08.301. Miscellaneous Income	10,974	.0	.0	.0	.0	.0	50	.0	10,924	.0	.0
08.302.	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
08.303.	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
08.398. Summary of remaining write-ins for Line 8.3 from overflow page	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
08.399. Total (Lines 08.301 through 08.303 plus 08.398) (Line 8.3 above)	10,974	.0	.0	.0	.0	.0	50	.0	10,924	.0	.0
2701.	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2702.	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2703.	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2798. Summary of remaining write-ins for Line 27 from overflow page	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2799. Total (Lines 2701 through 2703 plus 2798) (Line 27 above)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0

(a) Includes the following amounts for FEGLI/SGLI: Line 1 ..... Line 10 ..... Line 16 ..... Line 23 ..... Line 24 .....

**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE HUMANA INSURANCE OF PUERTO RICO, INC.**

**ANALYSIS OF INCREASE IN RESERVES DURING THE YEAR**

	1 Total	2 Industrial Life	Ordinary			6 Credit Life (Group and Individual)	Group	
			3 Life Insurance	4 Individual Annuities	5 Supplementary Contracts		7 Life Insurance	8 Annuities
<b>Involving Life or Disability Contingencies (Reserves)</b> (Net of Reinsurance Ceded)								
1. Reserve December 31, prior year .....	53,892	0	53,892	0	0	0	0	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 .....	(3,892)		(3,892)					
7. Other increases (net) .....	0							
8. Totals (Lines 1 to 7) .....	50,000	0	50,000	0	0	0	0	0
9. Tabular cost .....	0				XXX			
10. Reserves released by death .....	0			XXX	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	0	0	0	0
15. Reserve December 31, current year	50,000	0	50,000	0	0	0	0	0

7

**EXHIBIT OF NET INVESTMENT INCOME**

	1 Collected During Year	2 Earned During Year
1. U.S. Government bonds	(a) 1,774	1,774
1.1 Bonds exempt from U.S. tax	(a) 116,588	134,396
1.2 Other bonds (unaffiliated)	(a) 886,687	965,358
1.3 Bonds of affiliates	(a) 0	
2.1 Preferred stocks (unaffiliated)	(b) 0	
2.11 Preferred stocks of affiliates	(b) 0	
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) 27,940	27,940
7. Derivative instruments	(f)	
8. Other invested assets		
9. Aggregate write-ins for investment income	0	213
10. Total gross investment income	1,032,989	1,129,681
11. Investment expenses		(g) 0
12. Investment taxes, licenses and fees, excluding federal income taxes		(g) 0
13. Interest expense		(h)
14. Depreciation on real estate and other invested assets		(i)
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)		1,129,681
<b>DETAILS OF WRITE-INS</b>		
0901. Other Investment Income		213
0902.		
0903.		
0998. Summary of remaining write-ins for Line 9 from overflow page	0	0
0999. Totals (Lines 0901 through 0903) plus 0998 (Line 9 above)	0	213
1501.		
1502.		
1503.		
1598. Summary of remaining write-ins for Line 15 from overflow page		0
1599. Totals (Lines 1501 through 1503) plus 1598 (Line 15 above)		0

- (a) Includes \$ 1,220 accrual of discount less \$ 298,373 amortization of premium and less \$ 52,357 paid for accrued interest on purchases.
- (b) Includes \$ accrual of discount less \$ 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 \$ paid for accrued interest on purchases.
- (d) Includes \$ for company's occupancy of its own buildings; and excludes \$ interest on encumbrances.
- (e) Includes \$ 1,563 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.

**EXHIBIT OF CAPITAL GAINS (LOSSES)**

	1 Realized Gain (Loss) On Sales or Maturity	2 Other Realized Adjustments	3 Total Realized Capital Gain (Loss) (Columns 1 + 2)	4 Change in Unrealized Capital Gain (Loss)	5. Change in Unrealized Foreign Exchange Capital Gain (Loss)
1. U.S. Government bonds			0		
1.1 Bonds exempt from U.S. tax			0		
1.2 Other bonds (unaffiliated)	14,513		14,513		
1.3 Bonds of affiliates	0	0	0	0	0
2.1 Preferred stocks (unaffiliated)	0	0	0	0	0
2.11 Preferred stocks of affiliates	0	0	0	0	0
2.2 Common stocks (unaffiliated)	0	0	0	0	0
2.21 Common stocks of affiliates	0	0	0	0	0
3. Mortgage loans	0	0	0	0	0
4. Real estate	0	0	0	0	0
5. Contract loans	0	0	0	0	0
6. Cash, cash equivalents and short-term investments	0	0	0	0	0
7. Derivative instruments	0	0	0	0	0
8. Other invested assets	0	0	0	0	0
9. Aggregate write-ins for capital gains (losses)	0	0	0	0	0
10. Total capital gains (losses)	14,513	0	14,513	0	0
<b>DETAILS OF WRITE-INS</b>					
0901.					
0902.					
0903.					
0998. Summary of remaining write-ins for Line 9 from overflow page	0	0	0	0	0
0999. Totals (Lines 0901 through 0903) plus 0998 (Line 9 above)	0	0	0	0	0

**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE HUMANA INSURANCE OF PUERTO RICO, INC.**

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

	1		2		3		4		5		6		7		8		9		10		11	
	Total	Industrial Life	Life Insurance	Individual Annuities	Credit Life (Group and Individual)	Life Insurance	Annuities	Group	Credit (Group and Individual)	Other	Aggregate of All Other Lines of Business											
<b>FIRST YEAR (other than single)</b>																						
1. Uncollected	267,384					3,040		264,344														
2. Deferred and accrued	0																					
3. Deferred, accrued and uncollected:																						
3.1 Direct	267,384					3,040		264,344														
3.2 Reinsurance assumed	0																					
3.3 Reinsurance ceded	0																					
3.4 Net (Line 1 + Line 2)	267,384	0	0	0	0	3,040	0	264,344	0	0												
4. Advance	312,410	0	0	0	0	1,987	0	310,423	0	0												
5. Line 3.4 - Line 4	(45,026)	0	0	0	0	1,053	0	(46,079)	0	0												
6. Collected during year:																						
6.1 Direct	8,159,719					39,082		8,120,637														
6.2 Reinsurance assumed	0																					
6.3 Reinsurance ceded	0																					
6.4 Net	8,159,719	0	0	0	0	39,082	0	8,120,637	0	0												
7. Line 5 + Line 6.4	8,114,693	0	0	0	0	40,135	0	8,074,558	0	0												
8. Prior year (uncollected + deferred and accrued - advance)	398,662	0	0	0	0	3,128	0	395,534	0	0												
9. First year premiums and considerations:																						
9.1 Direct	7,716,031	0	0	0	0	37,007	0	7,679,024	0	0												
9.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0												
9.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0												
9.4 Net (Line 7 - Line 8)	7,716,031	0	0	0	0	37,007	0	7,679,024	0	0												
<b>SINGLE</b>																						
10. Single premiums and considerations:																						
10.1 Direct	0																					
10.2 Reinsurance assumed	0																					
10.3 Reinsurance ceded	0																					
10.4 Net	0	0	0	0	0	0	0	0	0	0												
<b>RENEWAL</b>																						
11. Uncollected	564,178					51,424		512,754														
12. Deferred and accrued	0																					
13. Deferred, accrued and uncollected:																						
13.1 Direct	564,178					51,424		512,754														
13.2 Reinsurance assumed	0																					
13.3 Reinsurance ceded	0																					
13.4 Net (Line 11 + Line 12)	564,178	0	0	0	0	51,424	0	512,754	0	0												
14. Advance	769,347	0	0	0	0	2,848	0	766,499	0	0												
15. Line 13.4 - Line 14	(205,169)	0	0	0	0	48,576	0	(253,745)	0	0												
16. Collected during year:																						
16.1 Direct	81,770,287					342,170		81,428,117														
16.2 Reinsurance assumed	0																					
16.3 Reinsurance ceded	0																					
16.4 Net	81,770,287	0	0	0	0	342,170	0	81,428,117	0	0												
17. Line 15 + Line 16.4	81,565,118	0	0	0	0	390,746	0	81,174,372	0	0												
18. Prior year (uncollected + deferred and accrued - advance)	1,214,753	0	0	0	0	27,715	0	1,187,038	0	0												
19. Renewal premiums and considerations:																						
19.1 Direct	80,350,365	0	0	0	0	363,031	0	79,987,334	0	0												
19.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0												
19.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0												
19.4 Net (Line 17 - Line 18)	80,350,365	0	0	0	0	363,031	0	79,987,334	0	0												
<b>TOTAL</b>																						
20. Total premiums and annuity considerations:																						
20.1 Direct	88,066,396	0	0	0	0	400,038	0	87,666,358	0	0												
20.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0												
20.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0												
20.4 Net (Lines 9.4 + 10.4 + 19.4)	88,066,396	0	0	0	0	400,038	0	87,666,358	0	0												

6

**EXHIBIT 1 - PART 2 - DIVIDENDS AND COUPONS APPLIED, REINSURANCE COMMISSIONS AND EXPENSE ALLOWANCES AND COMMISSIONS INCURRED (Direct Business Only)**

	1 Total	2 Industrial Life	3 Ordinary		5 Credit Life (Group and Individual)	6 Group		8 Accident and Health			11 Aggregate of All Other Lines of Business
			3 Life Insurance	4 Individual Annuities		6 Life Insurance	7 Annuities	8 Group	9 Credit (Group and Individual)	10 Other	
<b>DIVIDENDS AND COUPONS APPLIED (included in Part 1)</b>											
21. To pay renewal premiums .....	.0										
22. All other .....	.0										
<b>REINSURANCE COMMISSIONS AND EXPENSE ALLOWANCES INCURRED</b>											
23. First year (other than single):											
23.1 Reinsurance ceded .....	.0										
23.2 Reinsurance assumed .....	.0										
23.3 Net ceded less assumed .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
24. Single:											
24.1 Reinsurance ceded .....	.0										
24.2 Reinsurance assumed .....	.0										
24.3 Net ceded less assumed .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
25. Renewal:											
25.1 Reinsurance ceded .....	.0										
25.2 Reinsurance assumed .....	.0										
25.3 Net ceded less assumed .....	.0	.0	.0	.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	.0	.0	.0
26.2 Reinsurance assumed (Page 6, Line 22) .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
26.3 Net ceded less assumed .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
<b>COMMISSIONS INCURRED (direct business only)</b>											
27. First year (other than single) .....	323,125					1,658		321,467			
28. Single .....	.0										
29. Renewal .....	3,237,965					14,518		3,223,447			
30. Deposit-type contract funds .....	0										
31. Totals (to agree with Page 6, Line 21) .....	3,561,090	0	0	0	0	16,176	0	3,544,914	0	0	0

**EXHIBIT 2 - GENERAL EXPENSES**

	Insurance				5 Investment	6 Total
	1 Life	Accident and Health		4 All Other Lines of Business		
		2 Cost Containment	3 All Other			
1. Rent	3,501		767,138			770,639
2. Salaries and wages	17,411	194,843	3,620,676			3,832,930
3.11 Contributions for benefit plans for employees	812		177,985			178,797
3.12 Contributions for benefit plans for agents						0
3.21 Payments to employees under non-funded benefit plans						0
3.22 Payments to agents under non-funded benefit plans						0
3.31 Other employee welfare	7,033		1,541,341			1,548,374
3.32 Other agent welfare						0
4.1 Legal fees and expenses	114		25,058			25,172
4.2 Medical examination fees						0
4.3 Inspection report fees						0
4.4 Fees of public accountants and consulting actuaries	207		45,316			45,523
4.5 Expense of investigation and settlement of policy claims						0
5.1 Traveling expenses	1,055		231,156			232,211
5.2 Advertising	3,602		789,448			793,050
5.3 Postage, express, telegraph and telephone	1,291		282,841			284,132
5.4 Printing and stationery	588		128,751			129,339
5.5 Cost or depreciation of furniture and equipment	314		68,919			69,233
5.6 Rental of equipment	416		91,231			91,647
5.7 Cost or depreciation of EDP equipment and software	1,628		356,759			358,387
6.1 Books and periodicals	86		18,738			18,824
6.2 Bureau and association fees						0
6.3 Insurance, except on real estate	41		8,942			8,983
6.4 Miscellaneous losses						0
6.5 Collection and bank service charges						0
6.6 Sundry general expenses	919		201,367			202,286
6.7 Group service and administration fees						0
6.8 Reimbursements by uninsured plans			(3,812,158)			(3,812,158)
7.1 Agency expense allowance						0
7.2 Agents' balances charged off (less \$ recovered)						0
7.3 Agency conferences other than local meetings						0
9.1 Real estate expenses						0
9.2 Investment expenses not included elsewhere						0
9.3 Aggregate write-ins for expenses	163	124,730	429,645	0	0	554,538
10. General expenses incurred	39,181	319,573	4,973,153	0	0	(a) 5,331,907
11. General expenses unpaid December 31, prior year	6,815	0	1,317,021	0	0	1,323,836
12. General expenses unpaid December 31, current year	6,107	0	1,338,416	0	0	1,344,523
13. Amounts receivable relating to uninsured plans, prior year	0	0	0	0	0	0
14. Amounts receivable relating to uninsured plans, current year						0
15. General expenses paid during year (Lines 10+11-12-13+14)	39,889	319,573	4,951,758	0	0	5,311,220
<b>DETAILS OF WRITE-INS</b>						
09.301. LAE Reserve	(121)		(26,542)			(26,663)
09.302. Outside Services	284	124,730	456,187			581,201
09.303.						0
09.398. Summary of remaining write-ins for Line 9.3 from overflow page	0	0	0	0	0	0
09.399. Totals (Lines 09.301 through 09.303 + 09.398) (Line 9.3 above)	163	124,730	429,645	0	0	554,538

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

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

	Insurance			4 Investment	5 Total
	1 Life	2 Accident and Health	3 All Other Lines of Business		
1. Real estate taxes					0
2. State insurance department licenses and fees	1,590	348,386			349,976
3. State taxes on premiums					0
4. Other state taxes, incl. \$ for employee benefits					0
5. U.S. Social Security taxes					0
6. All other taxes					0
7. Taxes, licenses and fees incurred	1,590	348,386	0	0	349,976
8. Taxes, licenses and fees unpaid December 31, prior year	0	0	0	0	0
9. Taxes, licenses and fees unpaid December 31, current year	14	3,111			3,125
10. Taxes, licenses and fees paid during year (Lines 7 + 8 - 9)	1,576	345,275	0	0	346,851

**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 through 4	0	0
6. Paid - in cash		
7. Left on deposit		
8. Aggregate write-ins for dividend or refund options	0	0
9. Total Lines 5 through 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	0	0
17. Total dividends or refunds (Lines 9 + 15 - 16)	0	0
<b>DETAILS OF WRITE-INS</b>		
0801.		
0802.		
0803.		
0898. Summary of remaining write-ins for Line 8 from overflow page	0	0
0899. Totals (Line 0801 through 0803 + 0898) (Line 8 above)	0	0

**NONE**

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

1	2	3	4	5	6
Valuation Standard	Total	Industrial	Ordinary	Credit (Group and Individual)	Group
<b>LIFE INSURANCE</b>					
0100001 58 CSO 4%CRVM.....	50,000		50,000		
0100002 58 CSO 3%CRVM.....	0				
0100003 60 CSG 3%SP.....	0				
0199997 Totals (Gross)	50,000	0	50,000	0	0
0199998 Reinsurance ceded	0				
0199999 Totals (Net)	50,000	0	50,000	0	0
<b>ANNUITIES (excluding supplementary contracts with life contingencies):</b>					
0299997 Totals (Gross)	0	XXX	0	XXX	0
0299998 Reinsurance ceded	0	XXX		XXX	
0299999 Totals (Net)	0	XXX	0	XXX	0
<b>SUPPLEMENTARY CONTRACTS WITH LIFE CONTINGENCIES:</b>					
0399997 Totals (Gross)	0	0	0	0	0
0399998 Reinsurance ceded	0				
0399999 Totals (Net)	0	0	0	0	0
<b>ACCIDENTAL DEATH BENEFITS:</b>					
0499997 Totals (Gross)	0	0	0	0	0
0499998 Reinsurance ceded	0				
0499999 Totals (Net)	0	0	0	0	0
<b>DISABILITY-ACTIVE LIVES:</b>					
0599997 Totals (Gross)	0	0	0	0	0
0599998 Reinsurance ceded	0				
0599999 Totals (Net)	0	0	0	0	0
<b>DISABILITY-DISABLED LIVES:</b>					
0699997 Totals (Gross)	0	0	0	0	0
0699998 Reinsurance ceded	0				
0699999 Totals (Net)	0	0	0	0	0
<b>MISCELLANEOUS RESERVES</b>					
0799997 Totals (Gross)	0	0	0	0	0
0799998 Reinsurance ceded	0				
0799999 Totals (Net)	0	0	0	0	0
9999999 Totals (Net) - Page 3, Line 1	50,000	0	50,000	0	0



ANNUAL STATEMENT FOR THE YEAR 2011 OF THE HUMANA INSURANCE OF PUERTO RICO, INC.

**EXHIBIT 5 - INTERROGATORIES**

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

**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	
<b>LIFE CONTRACTS (Including supplementary contracts set upon a basis other than that used to determine benefits) (Exhibit 5)</b>			
0199999 Subtotal (Page 7, Line 6)	XXX	XXX	
<b>ACCIDENT AND HEALTH CONTRACTS (Exhibit 6)</b>			
0299999 Subtotal	XXX	XXX	
<b>DEPOSIT-TYPE CONTRACTS (Exhibit 7)</b>			
<b>NONE</b>			
0399999 Subtotal	XXX	XXX	
9999999 TOTAL (Column 4 only)			

**EXHIBIT 6 - AGGREGATE RESERVES FOR ACCIDENT AND HEALTH CONTRACTS**

	1 Total	2 Group Accident and Health	3 Credit Accident and Health (Group and Individual)	4 Collectively Renewable	Other Individual Contracts				
					5 Non-Cancelable	6 Guaranteed Renewable	7 Non-Renewable for Stated Reasons Only	8 Other Accident Only	9 All Other
<b>ACTIVE LIFE RESERVE</b>									
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. Reserve for rate credits .....	0								
6. Aggregate write-ins for reserves .....	0	0	0	0	0	0	0	0	0
7. Totals (Gross) .....	0	0	0	0	0	0	0	0	0
8. Reinsurance ceded .....	0								
9. Totals (Net) .....	0	0	0	0	0	0	0	0	0
<b>CLAIM RESERVE</b>									
10. Present value of amounts not yet due on claims .....	21,294	21,294							
11. Additional actuarial reserves-Asset/Liability analysis .....	0								
12. Reserve for future contingent benefits .....	0								
13. Aggregate write-ins for reserves .....	0	0	0	0	0	0	0	0	0
14. Totals (Gross) .....	21,294	21,294	0	0	0	0	0	0	0
15. Reinsurance ceded .....	0								
16. Totals (Net) .....	21,294	21,294	0	0	0	0	0	0	0
17. <b>TOTAL (Net)</b> .....	21,294	21,294	0	0	0	0	0	0	0
18. <b>TABULAR FUND INTEREST</b> .....	0								
<b>DETAILS OF WRITE-INS</b>									
0601. ....									
0602. ....									
0603. ....									
0698. Summary of remaining write-ins for Line 6 from overflow page .....	0	0	0	0	0	0	0	0	0
0699. Totals (Lines 0601 through 0603 plus 0698) (Line 6 above) .....	0	0	0	0	0	0	0	0	0
1301. ....									
1302. ....									
1303. ....									
1398. Summary of remaining write-ins for Line 13 from overflow page .....	0	0	0	0	0	0	0	0	0
1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above) .....	0	0	0	0	0	0	0	0	0

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

**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 the 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 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

**NONE**

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE HUMANA INSURANCE OF PUERTO RICO, INC.

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 .....	2,157,856								2,157,856		
1.2 Reinsurance assumed .....	0										
1.3 Reinsurance ceded .....	0										
1.4 Net .....	2,157,856	0	0	0	0	0	0	0	2,157,856	0	0
2. In course of settlement:											
2.1 Resisted .....											
2.11 Direct .....	286,655								286,655		
2.12 Reinsurance assumed .....	0										
2.13 Reinsurance ceded .....	0										
2.14 Net .....	286,655	0	(b) 0	(b) 0	0	(b) 0	(b) 0	0	286,655	0	0
2.2 Other .....											
2.21 Direct .....	2,023,409								2,023,409		
2.22 Reinsurance assumed .....	0										
2.23 Reinsurance ceded .....	0										
2.24 Net .....	2,023,409	0	(b) 0	(b) 0	0	(b) 0	(b) 0	0	2,023,409	(b) 0	(b) 0
3. Incurred but unreported:											
3.1 Direct .....	5,576,589		33,652				15,315		5,527,622		
3.2 Reinsurance assumed .....	0										
3.3 Reinsurance ceded .....	0										
3.4 Net .....	5,576,589	0	(b) 33,652	(b) 0	0	(b) 0	(b) 15,315	0	5,527,622	(b) 0	(b) 0
4. TOTALS .....											
4.1 Direct .....	10,044,509	0	33,652	0	0	0	15,315	0	9,995,542	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 .....	10,044,509	(a) 0	(a) 33,652	0	0	0	(a) 15,315	0	9,995,542	0	0

(a) Including matured endowments (but not guaranteed annual pure endowments) unpaid amounting to \$ ..... in Column 2, \$ ..... in Column 3 and \$ ..... 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 \$ .....  
 Individual Annuities \$ ....., Credit Life (Group and Individual) \$ ....., and Group Life \$ ....., are included in Page 3, Line 1, (See Exhibit 5, Section on Disability Disabled Lives); and for Group Accident and Health \$ .....  
 Credit (Group and Individual) Accident and Health \$ ....., and Other Accident and Health \$ ..... are included in Page 3, Line 2 (See Exhibit 6, Claim Reserve).

16

**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE HUMANA INSURANCE OF PUERTO RICO, INC.**

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

**PART 2 - Incurred During the Year**

	1 Total	2 Industrial Life (a)	Ordinary			6 Credit Life (Group and Individual)	Group		Accident and Health		
			3 Life Insurance (b)	4 Individual Annuities	5 Supplementary Contracts		7 Life Insurance (c)	8 Annuities	9 Group	10 Credit (Group and Individual)	11 Other
1. Settlements during the year:											
1.1 Direct	72,491,687		3,542				223,248		72,264,897		
1.2 Reinsurance assumed	.0										
1.3 Reinsurance ceded	(8,545)		(8,545)								
1.4 Net	72,500,232		12,087				223,248		72,264,897		
2. Liability December 31, current year from Part 1:											
2.1 Direct	10,044,509		33,652				15,315		9,995,542		
2.2 Reinsurance assumed	.0										
2.3 Reinsurance ceded	.0										
2.4 Net	10,044,509		33,652				15,315		9,995,542		
3. Amounts recoverable from reinsurers December 31, current year	.0										
4. Liability December 31, prior year:											
4.1 Direct	11,188,246		37,194				17,063		11,133,989		
4.2 Reinsurance assumed	.0										
4.3 Reinsurance ceded	.0										
4.4 Net	11,188,246		37,194				17,063		11,133,989		
5. Amounts recoverable from reinsurers December 31, prior year	0	0	0	0	0	0	0	0	0	0	0
6. Incurred benefits:											
6.1 Direct	71,347,950						221,500		71,126,450		
6.2 Reinsurance assumed	.0										
6.3 Reinsurance ceded	(8,545)		(8,545)								
6.4 Net	71,356,495		8,545				221,500		71,126,450		

- (a) Including matured endowments (but not guaranteed annual pure endowments) amounting to \$ ..... in Line 1.1, \$ ..... in Line 1.4.  
 \$ ..... in Line 6.1 and \$ ..... in Line 6.4.
- (b) Including matured endowments (but not guaranteed annual pure endowments) amounting to \$ ..... in Line 1.1, \$ ..... in Line 1.4.  
 \$ ..... in Line 6.1 and \$ ..... in Line 6.4.
- (c) Including matured endowments (but not guaranteed annual pure endowments) amounting to \$ ..... in Line 1.1, \$ ..... in Line 1.4.  
 \$ ..... in Line 6.1 and \$ ..... in Line 6.4.
- (d) Includes \$ ..... premiums waived under total and permanent disability benefits.

**EXHIBIT OF NONADMITTED ASSETS**

	1	2	3
	Current Year Total Nonadmitted Assets	Prior Year Nonadmitted Assets	Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1. Bonds (Schedule D).....	0	0	0
2. Stocks (Schedule D):			
2.1 Preferred stocks .....	0	0	0
2.2 Common stocks .....	0	0	0
3. Mortgage loans on real estate (Schedule B):			
3.1 First liens .....	0	0	0
3.2 Other than first liens .....	0	0	0
4. Real estate (Schedule A):			
4.1 Properties occupied by the company .....	0	0	0
4.2 Properties held for the production of income.....	0	0	0
4.3 Properties held for sale .....	0	0	0
5. Cash (Schedule E - Part 1), cash equivalents (Schedule E - Part 2) and short-term investments (Schedule DA).....	0	0	0
6. Contract loans .....	0	0	0
7. Derivatives (Schedule DB).....	0	0	0
8. Other invested assets (Schedule BA) .....	0	0	0
9. Receivables for securities .....	0	0	0
10. Securities lending reinvested collateral assets (Schedule DL).....	0	0	0
11. Aggregate write-ins for invested assets .....	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11) .....	0	0	0
13. Title plants (for Title insurers only).....	0	0	0
14. Investment income due and accrued .....	0	0	0
15. Premiums and considerations:			
15.1 Uncollected premiums and agents' balances in the course of collection .....	0	0	0
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due.....	0	0	0
15.3 Accrued retrospective premiums.....	0	0	0
16. Reinsurance:			
16.1 Amounts recoverable from reinsurers .....	0	0	0
16.2 Funds held by or deposited with reinsured companies .....	0	0	0
16.3 Other amounts receivable under reinsurance contracts .....	0	0	0
17. Amounts receivable relating to uninsured plans .....	0	0	0
18.1 Current federal and foreign income tax recoverable and interest thereon .....	0	0	0
18.2 Net deferred tax asset.....	0	0	0
19. Guaranty funds receivable or on deposit .....	0	0	0
20. Electronic data processing equipment and software.....	0	0	0
21. Furniture and equipment, including health care delivery assets.....	0	0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates .....	0	0	0
23. Receivables from parent, subsidiaries and affiliates .....	0	0	0
24. Health care and other amounts receivable.....	0	0	0
25. Aggregate write-ins for other than invested assets .....	77,885	48,967	(28,918)
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25).....	77,885	48,967	(28,918)
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....	0	0	0
28. Total (Lines 26 and 27)	77,885	48,967	(28,918)
<b>DETAILS OF WRITE-INS</b>			
1101. Other Security Deposits.....	0	0	0
1102. ....			
1103. ....			
1198. Summary of remaining write-ins for Line 11 from overflow page .....	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)	0	0	0
2501. Utility Deposit.....	65,000	0	(65,000)
2502. Prepaid Other.....	12,885	38,333	25,448
2503. Receivable from stock issue.....	0	10,634	10,634
2598. Summary of remaining write-ins for Line 25 from overflow page .....	0	0	0
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	77,885	48,967	(28,918)

## NOTES TO FINANCIAL STATEMENTS

# 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 [  ] NA [  ]
- 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. ....12/31/2006
- 3.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. ....12/31/2006
- 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). ....12/31/2006
- 3.4 By what department or departments? The Puerto Rico Commissioner of Insurance.....
- 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 [  ] NA [  ]
- 3.6 Have all of the recommendations within the latest financial examination report been complied with? ..... Yes [  ] No [  ] NA [  ]
- 4.1 During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity) receive credit or commissions for 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 Company 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(s) of the foreign person(s) or entity(s); or if the entity is a mutual or reciprocal, the nationality of its manager or attorney - in - fact and identify the type of entity(s) (e.g., individual, corporation, government, manager or attorney - in - fact).

1 Nationality	2 Type of Entity
.....	.....
.....	.....
.....	.....
.....	.....

GENERAL INTERROGATORIES

- 8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board? ..... Yes [ ] No [ X ]
- 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 [ X ]
- 8.4 If response to 8.3 is yes, please provide the names and locations (city and state of the main office) of any affiliates regulated by a federal financial regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the 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?  
Pricewaterhouse Cooper LLP
- 10.1 Has the insurer been granted any exemptions to the prohibited non-audit services provided by the certified independent public accountant requirements as allowed in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Rule), or substantially similar state law or regulation? ..... Yes [ ] No [ X ]
- 10.2 If the response to 10.1 is yes, provide information related to this exemption:
- 10.3 Has the insurer been granted any exemptions related to the other requirements of the Annual Financial Reporting Model Regulation as allowed for in Section 17A of the Model Regulation, or substantially similar state law or regulation? ..... Yes [ ] No [ X ]
- 10.4 If the response to 10.3 is yes, provide information related to this exemption:
- 10.5 Has the reporting entity established an Audit Committee in compliance with the domiciliary state insurance laws? ..... Yes [ X ] No [ ] NA [ ]
- 10.6 If the response to 10.5 is no or n/a, please explain
- 11. What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification? .....  
P. Anthony Hammond Vice President and Chief Actuary
- 12.1 Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly? ..... Yes [ ] No [ X ]
  - 12.11 Name of real estate holding company .....
  - 12.12 Number of parcels involved.....
  - 12.13 Total book/adjusted carrying value ..... \$.....
- 12.2 If yes, provide explanation
- 13. FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:
- 13.1 What changes have been made during the year in the United States manager or the United States trustees of the reporting entity?
- 13.2 Does this statement contain all business transacted for the reporting entity through its United States Branch on risks wherever located? ..... Yes [ ] No [ X ]
- 13.3 Have there been any changes made to any of the trust indentures during the year? ..... Yes [ ] No [ X ]
- 13.4 If answer to (13.3) is yes, has the domiciliary or entry state approved the changes? ..... Yes [ ] No [ ] NA [ X ]
- 14.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? ..... Yes [ X ] No [ ]
  - Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
  - a. Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
  - b. Compliance with applicable governmental laws, rules and regulations;
  - c. The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
  - d. Accountability for adherence to the code.
  - e.
- 14.11 If the response to 14.1 is no, please explain:
- 14.2 Has the code of ethics for senior managers been amended? ..... Yes [ ] No [ X ]
- 14.21 If the response to 14.2 is yes, provide information related to amendment(s).
- 14.3 Have any provisions of the code of ethics been waived for any of the specified officers? ..... Yes [ ] No [ X ]
- 14.31 If the response to 14.3 is yes, provide the nature of any waiver(s).

# GENERAL INTERROGATORIES

## BOARD OF DIRECTORS

- 15.1 Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance with a NAIC rating of 3 or below?..... Yes [ ] No [ X ]
- 15.2 If the response to 15.1 is yes, indicate the American Bankers Association (ABA) Routing Number and the name of the issuing or confirming bank of the Letter of Credit and describe the circumstances in which the Letter of Credit is triggered.

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

16. 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 [ X ] No [ ]
17. Does the reporting entity keep a complete permanent record of the proceedings of its board of directors and all subordinate committees thereof?..... Yes [ X ] No [ ]
18. 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 [ X ] No [ ]

## FINANCIAL

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

## INVESTMENT

- 24.1 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? (other than securities lending programs addressed in 24.3)..... Yes [ X ] No [ ]
- 24.2 If no, give full and complete information, relating thereto
- 24.3 For security lending programs, provide a description of the program including value for collateral and amount of loaned securities, and whether collateral is carried on or off-balance sheet. (an alternative is to reference Note 17 where this information is also provided)
- 24.4 Does the company's security lending program meet the requirements for a conforming program as outlined in the Risk-Based Capital Instructions?..... Yes [ ] No [ ] NA [ X ]
- 24.5 If answer to 24.4 is yes, report amount of collateral for conforming programs. .... \$ .....
- 24.6 If answer to 24.4 is no, report amount of collateral for other programs. .... \$ .....
- 24.7 Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract?..... Yes [ ] No [ ] NA [ X ]
- 24.8 Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%?..... Yes [ ] No [ ] NA [ X ]
- 24.9 Does the reporting entity or the reporting entity's securities lending agent utilize the Master Securities Lending Agreement (MSLA) to conduct securities lending?..... Yes [ ] No [ ] NA [ X ]

## GENERAL INTERROGATORIES

- 25.1 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 or has the reporting entity sold or transferred any assets subject to a put option contract that is currently in force? (Exclude securities subject to Interrogatory 21.1 and 24.3) ..... Yes [  ] No [  ]
- 25.2 If yes, state the amount thereof at December 31 of the current year:
- |  |       |   |    |           |
|--|-------|---|----|-----------|
|  | 25.21 | Subject to repurchase agreements .....                | \$ |           |
|  | 25.22 | Subject to reverse repurchase agreements.....         | \$ |           |
|  | 25.23 | Subject to dollar repurchase agreements.....          | \$ |           |
|  | 25.24 | Subject to reverse dollar repurchase agreements.....  | \$ |           |
|  | 25.25 | Pledged as collateral.....                            | \$ |           |
|  | 25.26 | Placed under option agreements.....                   | \$ |           |
|  | 25.27 | Letter stock or securities restricted as to sale..... | \$ |           |
|  | 25.28 | On deposit with state or other regulatory body.....   | \$ | 1,512,926 |
|  | 25.29 | Other.....  | \$ |           |

25.3 For category (25.27) provide the following:

1 Nature of Restriction	2 Description	3 Amount

- 26.1 Does the reporting entity have any hedging transactions reported on Schedule DB? ..... Yes [  ] No [  ]
- 26.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? ..... Yes [  ] No [  ] NA [  ]  
If no, attach a description with this statement.
- 27.1 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 [  ]
- 27.2 If yes, state the amount thereof at December 31 of the current year. .... \$.....

28. Excluding items in Schedule E-Part 3-Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III – General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping agreements of the NAIC *Financial Condition Examiners Handbook*? ..... Yes [  ] No [  ]

28.01 For agreements that comply with the requirements of the NAIC *Financial Condition Examiners Handbook*, complete the following:

1 Name of Custodian(s)	2 Custodian's Address
CITIBANK.....	PO BOX 70301 SAN JUAN PR 00936-70301.....

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

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

- 28.03 Have there been any changes, including name changes, in the custodian(s) identified in 28.01 during the current year? ..... Yes [  ] No [  ]
- 28.04 If yes, give full and complete information relating thereto:

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

28.05 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
CENTRAL REGISTRATION DEPOSITORY # 107105.....	BLACKROCK, INC.....	40 EAST 52ND STREET, NEW YORK, NY 10022.....

## GENERAL INTERROGATORIES

29.1 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 [ X ]

29.2 If yes, complete the following schedule:

1 CUSIP #	2 Name of Mutual Fund	3 Book/Adjusted Carrying Value
.....	.....	.....
.....	.....	.....
29.2999 TOTAL		0

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

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

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

	1 Statement (Admitted) Value	2 Fair Value	3 Excess of Statement over Fair Value (-) or Fair Value over Statement (+)
30.1 Bonds.....	67,569,623	68,615,217	1,045,594
30.2 Preferred Stocks.....	0	0	0
30.3 Totals	67,569,623	68,615,217	1,045,594

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

Fair value of actively trade debt and equity securities are based on quoted prices. Fair value of inactively trade debt securities are based on quoted market prices of identical or similar securities or based on observable inputs like interest rates using either a market or income valuation approach.....

31.1 Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D?..... Yes [ ] No [ X ]

31.2 If the answer to 31.1 is yes, does the reporting entity have a copy of the broker's or custodian's pricing policy (hard copy or electronic copy) for all brokers or custodians used as a pricing source?..... Yes [ ] No [ ]

31.3 If the answer to 31.2 is no, describe the reporting entity's process for determining a reliable pricing source for purposes of disclosure of fair value for Schedule D:

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

32.2 If no, list exceptions:

## GENERAL INTERROGATORIES

### OTHER

33.1 Amount of payments to Trade associations, service organizations and statistical or rating bureaus, if any?.....\$ .....

33.2 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
.....	.....
.....	.....

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

34.2 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
.....	.....
.....	.....

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

35.2 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 - LIFE INTERROGATORIES

1.1 Does the reporting entity have any direct Medicare Supplement Insurance in force? ..... Yes [ ] No [ X ]  
 1.2 If yes, indicate premium earned on U. S. business only ..... \$ .....0  
 1.3 What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit? ..... \$ .....0  
     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. .... \$ .....0

1.6 Individual policies:

Most current three years:

1.61 Total premium earned ..... \$ .....0  
 1.62 Total incurred claims ..... \$ .....0  
 1.63 Number of covered lives .....0  
 All years prior to most current three years:  
 1.64 Total premium earned ..... \$ .....0  
 1.65 Total incurred claims ..... \$ .....0  
 1.66 Number of covered lives .....0

1.7 Group policies:

Most current three years:

1.71 Total premium earned ..... \$ .....0  
 1.72 Total incurred claims ..... \$ .....0  
 1.73 Number of covered lives .....0  
 All years prior to most current three years:  
 1.74 Total premium earned ..... \$ .....0  
 1.75 Total incurred claims ..... \$ .....0  
 1.76 Number of covered lives .....0

2. Health Test:

		1 Current Year	2 Prior Year
2.1	Premium Numerator	\$ .....87,399,009	\$ .....88,518,266
2.2	Premium Denominator	\$ .....88,066,396	\$ .....89,229,845
2.3	Premium Ratio (2.1/2.2)	.....0.992	.....0.992
2.4	Reserve Numerator	\$ .....9,995,542	\$ .....11,133,989
2.5	Reserve Denominator	\$ .....10,115,803	\$ .....11,263,717
2.6	Reserve Ratio (2.4/2.5)	.....0.988	.....0.988

3.1 Does this reporting entity have Separate Accounts? ..... Yes [ ] No [ X ]  
 3.2 If yes, has a Separate Accounts statement been filed with this Department? ..... Yes [ ] No [ ] NA [ X ]  
 3.3 What portion of capital and surplus funds of the reporting entity covered by assets in the Separate Accounts statement, is not currently distributable from the Separate Accounts to the general account for use by the general account? ..... \$ .....  
 3.4 State the authority under which Separate Accounts are maintained: .....

3.5 Was any of the reporting entity's Separate Accounts business reinsured as of December 31? ..... Yes [ ] No [ X ]  
 3.6 Has the reporting entity assumed by reinsurance any Separate Accounts business as of December 31? ..... Yes [ ] No [ X ]

3.7 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)? ..... \$ .....

4.1 Are personnel or facilities of this reporting entity used by another entity or entities or are personnel or facilities of another entity or entities used by this reporting entity (except for activities such as administration of jointly underwritten group contracts and joint mortality or morbidity studies)? ..... Yes [ ] No [ X ]

4.2 Net reimbursement of such expenses between reporting entities:

4.21 Paid: ..... \$ .....  
 4.22 Received: ..... \$ .....

5.1 Does the reporting entity write any guaranteed interest contracts? ..... Yes [ ] No [ X ]

5.2 If yes, what amount pertaining to these items is included in: .....  
     5.21 Page 3, Line 1 ..... \$ .....  
     5.22 Page 4, Line 1 ..... \$ .....

6. For stock reporting entities only:

6.1 Total amount paid in by stockholders as surplus funds since organization of the reporting entity: ..... \$ .....

7. Total dividends paid stockholders since organization of the reporting entity:  
     7.11 Cash ..... \$ .....  
     7.12 Stock ..... \$ .....

## GENERAL INTERROGATORIES

8.1 Does the company reinsure any Workers' Compensation Carve-Out business defined as: ..... Yes [ ] No [ X ]  
 Reinsurance (including retrocessional reinsurance) assumed by life and health insurers of medical, wage loss and death benefits of the occupational illness and accident exposures, but not the employers liability exposures, of business originally written as workers' compensation insurance.

8.2 If yes, has the reporting entity completed the Workers Compensation Carve-Out Supplement to the Annual Statement? ..... Yes [ ] No [ ]

8.3 If 8.1 is yes, the amounts of earned premiums and claims incurred in this statement are:

		1 Reinsurance Assumed	2 Reinsurance Ceded	3 Net Retained
8.31	Earned premium.....			
8.32	Paid claims.....			
8.33	Claim liability and reserve (beginning of year).....			
8.34	Claim liability and reserve (end of year).....			
8.35	Incurred claims.....			

8.4 If reinsurance assumed included amounts with attachment points below \$1,000,000, the distribution of the amounts reported in Lines 8.31 and 8.34 for Column 1 are:

	Attachment Point	1 Earned Premium	2 Claim Liability And Reserve
8.41	<\$25,000	.....	.....
8.42	\$25,000 – 99,999	.....	.....
8.43	\$100,000 – 249,999	.....	.....
8.44	\$250,000 – 999,999	.....	.....
8.45	\$1,000,000 or more	.....	.....

8.5 What portion of earned premium reported in 8.31, Column 1 was assumed from pools? ..... \$.....

9.1 Does the company have variable annuities with guaranteed benefits? ..... Yes [ ] No [ X ]

9.2 If 9.1 is yes, complete the following table for each type of guaranteed benefit.

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

10 For reporting entities having sold annuities to another insurer where the insurer purchasing the annuities has obtained a release of liability from the claimant (payee) as the result of the purchase of an annuity from the reporting entity only:

10.1 Amount of loss reserves established by these annuities during the current year: ..... \$.....

10.2 List the name and location of the insurance company purchasing the annuities and the statement value on the purchase date of the annuities.

1 P&C Insurance Company and Location	2 Statement Value on Purchase Date of Annuities (i.e. Present Value)
.....	.....
.....	.....

11.1 Do you act as a custodian for health savings accounts? ..... Yes [ ] No [ X ]

11.2 If yes, please provide the amount of custodial funds held as of the reporting date. .... \$.....

11.3 Do you act as an administrator for health savings accounts? ..... Yes [ ] No [ X ]

11.4 If yes, please provide the balance of the funds administered as of the reporting date. .... \$.....

**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 2011	2 2010	3 2009	4 2008	5 2007
<b>Life Insurance in Force</b>					
(Exhibit of Life Insurance)					
1. Ordinary - whole life and endowment (Line 34, Col. 4)	1,500	2,383	2,383	2,290	2,289
2. Ordinary - term (Line 21, Col. 4, less Line 34, Col. 4)	0	0	0	0	1
3. Credit life (Line 21, Col. 6)	0	0	0	0	0
4. Group, excluding FEGLI/SGLI (Line 21, Col. 9 less Lines 43 & 44, Col. 4)	93,684	106,101	133,839	149,560	121,585
5. Industrial (Line 21, Col. 2)	0	0	0	0	0
6. FEGLI/SGLI (Lines 43 & 44, Col. 4)	0	0	0	0	0
7. Total (Line 21, Col. 10)	95,184	108,484	136,222	151,850	123,875
<b>New Business Issued</b>					
(Exhibit of Life Insurance)					
8. Ordinary - whole life and endowment (Line 34, Col. 2)	0	0	0	0	0
9. Ordinary - term (Line 2, Col. 4, less Line 34, Col. 2)	(883)	1	99	0	0
10. Credit life (Line 2, Col. 6)	0	0	0	0	0
11. Group (Line 2, Col. 9)	(12,194)	(27,666)	(15,474)	28,134	0
12. Industrial (Line 2, Col. 2)	0	0	0	0	0
13. Total (Line 2, Col. 10)	(13,077)	(27,665)	(15,375)	28,134	0
<b>Premium Income - Lines of Business</b>					
(Exhibit 1 - Part 1)					
14. Industrial life (Line 20.4, Col. 2)	0	0	0	0	0
15.1 Ordinary life insurance (Line 20.4, Col. 3)	0	4,721	4,178	6,776	12,378
15.2 Ordinary individual annuities (Line 20.4, Col. 4)	0	0	0	0	0
16. Credit life, (group and individual) (Line 20.4, Col. 5)	0	0	0	0	0
17.1 Group life insurance (Line 20.4, Col. 6)	400,038	454,655	525,807	533,300	349,406
17.2 Group annuities (Line 20.4, Col. 7)	0	0	0	0	0
18.1 A & H-group (Line 20.4, Col. 8)	87,666,358	88,770,469	80,052,272	76,668,073	65,205,702
18.2 A & H-credit (group and individual) (Line 20.4, Col. 9)	0	0	0	0	0
18.3 A & H-other (Line 20.4, Col. 10)	0	0	0	0	0
19. Aggregate of all other lines of business (Line 20.4, Col. 11)	0	0	0	0	0
20. Total	88,066,396	89,229,845	80,582,257	77,208,149	65,567,486
<b>Balance Sheet</b>					
(Pages 2 and 3)					
21. Total admitted assets excluding Separate Accounts business (Page 2, Line 26, Col. 3)	73,559,878	57,497,906	49,792,971	44,129,053	36,235,946
22. Total liabilities excluding Separate Accounts business (Page 3, Line 26)	24,766,977	16,551,464	17,042,251	13,031,019	12,628,371
23. Aggregate life reserves (Page 3, Line 1)	50,000	53,892	52,835	50,319	47,923
24. Aggregate A & H reserves (Page 3, Line 2)	21,294	21,579	18,495	17,829	43,505
25. Deposit-type contract funds (Page 3, Line 3)	0	0	0	0	0
26. Asset valuation reserve (Page 3, Line 24.01)	102,205	41,925	17,512	14,541	22,197
27. Capital (Page 3, Lines 29 & 30)	2,500,026	2,500,026	2,500,026	2,160,030	2,160,030
28. Surplus (Page 3, Line 37)	46,292,875	38,446,415	30,250,694	28,938,004	21,447,544
<b>Cash Flow (Page 5)</b>					
29. Net cash from operations (Line 11)	14,893,444	9,185,460	3,860,290	6,622,306	7,087,271
<b>Risk-Based Capital Analysis</b>					
30. Total adjusted capital	48,895,106	40,988,366	32,768,232	31,112,575	23,629,771
31. Authorized control level risk - based capital	2,602,304	4,264,657	4,047,506	3,447,905	3,048,237
<b>Percentage Distribution of Cash, Cash Equivalents and Invested Assets</b>					
(Page 2, Col. 3) (Line No. / Page 2, Line 12, Col. 3) x 100.0					
32. Bonds (Line 1)	47.0	34.7	15.4	10.3	24.1
33. Stocks (Lines 2.1 and 2.2)	0.0	0.0	0.0	0.4	0.0
34. Mortgage loans on real estate (Lines 3.1 and 3.2)	0.0	0.0	0.0	0.0	0.0
35. Real estate (Lines 4.1, 4.2 and 4.3)	0.0	0.0	0.0	0.0	0.0
36. Cash, cash equivalents and short - term investments (Line 5)	53.0	65.3	84.6	89.3	75.9
37. Contract loans (Line 6)	0.0	0.0	0.0	0.0	0.0
38. Derivatives (Page 2, Line 7)	0	0	XXX	XXX	XXX
39. Other invested assets (Line 8)	0.0	0.0	0.0	0.0	0.0
40. Receivables for securities (Line 9)	0.0	0.0	0.0	0.0	0.0
41. Securities lending reinvested collateral assets (Line 10)	0	0	XXX	XXX	XXX
42. Aggregate write-ins for invested assets (Line 11)	0.0	0.0	0.0	0.0	0.0
43. Cash, cash equivalents and invested assets (Line 12)	100.0	100.0	100.0	100.0	100.0

**FIVE-YEAR HISTORICAL DATA**

(Continued)

	1 2011	2 2010	3 2009	4 2008	5 2007
<b>Investments in Parent, Subsidiaries and Affiliates</b>					
44. Affiliated bonds (Sch. D Summary, Line 12, Col. 1)	0	0	0	0	0
45. Affiliated preferred stocks (Sch. D Summary, Line 18, Col. 1)	0	0	0	0	0
46. Affiliated common stocks (Sch. D Summary, Line 24, Col. 1)	0	0	0	0	0
47. Affiliated short-term investments (subtotal included in Schedule DA Verification, Col. 5, Line 10)	0	0	0	0	0
48. Affiliated mortgage loans on real estate	0	0	0	0	0
49. All other affiliated	0	0	0	0	0
50. Total of above Lines 44 to 49	0	0	0	0	0
<b>Total Nonadmitted and Admitted Assets</b>					
51. Total nonadmitted assets (Page 2, Line 28, Col. 2)	77,885	48,967	158,903	192,985	480,422
52. Total admitted assets (Page 2, Line 28, Col. 3)	73,559,878	57,497,906	49,792,971	44,129,053	36,235,946
<b>Investment Data</b>					
53. Net investment income (Exhibit of Net Investment Income)	1,129,681	605,811	263,781	582,310	1,133,836
54. Realized capital gains (losses) (Page 4, Line 34, Column 1)	5,140	0	0	0	0
55. Unrealized capital gains (losses) (Page 4, Line 38, Column 1)	0	0	0	0	0
56. Total of above Lines 53, 54 and 55	1,134,821	605,811	263,781	582,310	1,133,836
<b>Benefits and Reserve Increase (Page 6)</b>					
57. Total contract benefits - life (Lines 10, 11, 12, 13, 14 and 15, Col.1 minus Lines 10, 11, 12, 13, 14, and 15, Cols. 9, 10 and 11)	230,045	72,945	253,293	160,819	51,914
58. Total contract benefits - A & H (Lines 13 & 14, Cols. 9, 10 & 11)	71,126,450	73,046,675	68,929,413	60,362,916	52,445,141
59. Increase in life reserves - other than group and annuities (Line 19, Cols. 2 & 3)	(3,543)	1,057	4,252	2,396	2,282
60. Increase in A & H reserves (Line 19, Cols. 9, 10 & 11)	(3,640)	3,084	666	141	0
61. Dividends to policyholders (Line 30, Col. 1)	0	0	0	0	0
<b>Operating Percentages</b>					
62. Insurance expense percent (Page 6, Col. 1, Lines 21, 22 & 23, less Line 6)/ (Page 6, Col.1, Line 1 plus Exhibit 7, Col. 2, Line 2) x 100.00	10.1	8.4	10.9	12.4	11.6
63. Lapse percent (ordinary only). [(Exhibit of Life Insurance, Column 4, Lines 14 & 15) / 1/2 (Exhibit of Life Insurance, Column 4, Lines 1 & 21)] x 100.00	0.0	0.0	0.0	0.0	0.0
64. A & H loss percent (Schedule H, Part 1, Lines 5 & 6, Col. 2)	81.4	82.3	86.1	78.7	80.3
65. A & H cost containment percent (Schedule H, Part 1, Line 4, Col. 2)	0.0	0.0	0.0	0.0	0.0
66. A & H expense percent excluding cost containment expenses (Schedule H, Part 1, Line 10, Col. 2)	10.5	8.5	11.0	12.5	11.7
<b>A &amp; H Claim Reserve Adequacy</b>					
67. Incurred losses on prior years' claims - group health (Sch. H, Part 3, Line 3.1, Col. 2)	7,637,055	9,280,070	8,275,232	5,959,741	8,434,715
68. Prior years' claim liability and reserve - group health (Sch. H, Part 3, Line 3.2, Col. 2)	11,133,988	10,338,526	8,216,166	7,756,344	9,338,624
69. Incurred losses on prior years' claims-health other than group (Sch. H, Part 3, Line 3.1, Col. 1 less Col. 2)	0	0	0	0	0
70. Prior years' claim liability and reserve-health other than group (Sch. H, Part 3, Line 3.2 Col. 1 less Col. 2)	0	0	0	0	0
<b>Net Gains From Operations After Federal Income Taxes by Lines of Business (Page 6, Line 33)</b>					
71. Industrial life (Col. 2)	0	0	0	0	0
72. Ordinary - life (Col. 3)	(5,002)	2,505	(5,914)	2,269	8,206
73. Ordinary - individual annuities (Col. 4)	0	0	0	0	0
74. Ordinary-supplementary contracts (Col. 5)	0	0	0	0	0
75. Credit life (Col. 6)	0	0	0	0	10,792
76. Group life (Col. 7)	125,405	320,914	182,504	247,816	209,712
77. Group annuities (Col. 8)	0	0	0	0	0
78. A & H-group (Col. 9)	7,810,115	7,786,467	1,106,390	6,935,570	5,785,193
79. A & H-credit (Col. 10)	0	0	0	0	0
80. A & H-other (Col. 11)	0	0	0	0	0
81. Aggregate of all other lines of business (Col. 12)	0	0	0	0	0
82. Total (Col. 1)	7,930,518	8,109,886	1,282,980	7,185,655	6,013,903

NOTE: If a party to a merger, have the two most recent years of this exhibit been restated due to a merger in compliance with the disclosure requirements of SSAP No. 3, Accounting Changes and Correction of Errors?

Yes [ ] No [ ]

If no, please explain

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE HUMANA INSURANCE OF PUERTO RICO, INC.

EXHIBIT OF LIFE INSURANCE

	Industrial		Ordinary		Credit Life (Group and Individual)		Group			10 Total Amount of Insurance (a)
	1	2	3	4	5	6	Number of		9	
	Number of Policies	Amount of Insurance (a)	Number of Policies	Amount of Insurance (a)	Number of Individual Policies and Group Certificates	Amount of Insurance (a)	7 Policies	8 Certificates	Amount of Insurance (a)	
1. In force end of prior year	.0	.0	.50	2,383	.0	.0	.0	10,097	106,101	108,484
2. Issued during year		.0	(33)	(883)		.0		(343)	(12,194)	(13,077)
3. Reinsurance assumed										
4. Revived during year										
5. Increased during year (net)										
6. Subtotals, Lines 2 to 5	.0	.0	(33)	(883)	.0	.0	.0	(343)	(12,194)	(13,077)
7. Additions by dividends during year	XXX		XXX		XXX		XXX	XXX		
8. Aggregate write-ins for increases	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
9. Totals (Lines 1 and 6 to 8)	.0	.0	17	1,500	.0	.0	.0	9,754	93,907	95,407
Deductions during year:										
10. Death							XXX	18	223	223
11. Maturity							XXX			.0
12. Disability							XXX			.0
13. Expiry										.0
14. Surrender										.0
15. Lapse										.0
16. Conversion							XXX	XXX	XXX	.0
17. Decreased (net)										.0
18. Reinsurance										.0
19. Aggregate write-ins for decreases	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
20. Totals (Lines 10 to 19)	.0	.0	.0	.0	.0	.0	.0	18	223	223
21. In force end of year (Line 9 minus Line 20)	.0	.0	17	1,500	.0	.0	.0	9,736	93,684	95,184
22. Reinsurance ceded end of year	XXX		XXX		XXX		XXX	XXX		.0
23. Line 21 minus Line 22	XXX	.0	XXX	1,500	XXX	(b)	XXX	XXX	93,684	95,184
<b>DETAILS OF WRITE-INS</b>										
0801.										
0802.										
0803.										
0898. Summary of remaining write-ins for Line 8 from overflow page	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
0899. Totals (Lines 0801 through 0803 plus 0898) (Line 8 above)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
1901.										
1902.										
1903.										
1998. Summary of remaining write-ins for Line 19 from overflow page	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
1999. Totals (Lines 1901 through 1903 plus 1998) (Line 19 above)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0

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

(b) Group \$ .....; Individual \$ .....

**EXHIBIT OF LIFE INSURANCE (Continued)**

**ADDITIONAL INFORMATION ON INSURANCE IN FORCE END OF YEAR**

	Industrial		Ordinary	
	1 Number of Policies	2 Amount of Insurance (a)	3 Number of Policies	4 Amount of Insurance (a)
24. Additions by dividends .....			XXX	
25. Other paid-up insurance .....				
26. Debit ordinary insurance .....	XXX	XXX		

**ADDITIONAL INFORMATION ON ORDINARY INSURANCE**

Term Insurance Excluding Extended Term Insurance	Issued During Year (Included in Line 2)		In Force End of Year (Included in Line 21)	
	1 Number of Policies	2 Amount of Insurance (a)	3 Number of Policies	4 Amount of Insurance (a)
27. Term policies - decreasing .....	(33)	(883)		
28. Term policies - other .....				
29. Other term insurance - decreasing .....	XXX		XXX	
30. Other term insurance .....	XXX		XXX	
31. Totals, (Lines 27 to 30) .....	(33)	(883)	0	0
Reconciliation to Lines 2 and 21:				
32. Term additions .....	XXX		XXX	
33. Totals, extended term insurance .....	XXX	XXX		
34. Totals, whole life and endowment .....			17	1,500
35. Totals (Lines 31 to 34) .....	(33)	(883)	17	1,500

**CLASSIFICATION OF AMOUNT OF INSURANCE (a) BY PARTICIPATING STATUS**

	Issued During Year (Included in Line 2)		In Force End of Year (Included in Line 21)	
	1 Non-Participating	2 Participating	3 Non-Participating	4 Participating
36. Industrial .....				
37. Ordinary .....		(883)		1,500
38. Credit Life (Group and Individual) .....				
39. Group .....		(12,194)		93,685
40. Totals (Lines 36 to 39) .....	0	(13,077)	0	95,185

**ADDITIONAL INFORMATION ON CREDIT LIFE AND GROUP INSURANCE**

	Credit Life		Group	
	1 Number of Individual Policies and Group Certificates	2 Amount of Insurance (a)	3 Number of Certificates	4 Amount of Insurance (a)
41. Amount of insurance included in Line 2 ceded to other companies .....	XXX		XXX	
42. Number in force end of year if the number under shared groups is counted on a pro-rata basis .....		XXX		XXX
43. Federal Employees' Group Life Insurance included in Line 21 .....				
44. Servicemen's Group Life Insurance included in Line 21 .....				
45. Group Permanent Insurance included in Line 21 .....				

**ADDITIONAL ACCIDENTAL DEATH BENEFITS**

46. Amount of additional accidental death benefits in force end of year under ordinary policies (a)	
---	--

**BASIS OF CALCULATION OF DEERLY TERM INSURANCE**

47. State basis of calculation of (47.1) decreasing term insurance combined with Family Income Mortgage Protection, etc., policies and riders and of (47.2) term insurance on wife and children under Family, Parent and Children, etc. policies and riders included above	
47.1 .....	
47.2 .....	

**POLICIES WITH DISABILITY PROVISIONS**

Disability Provision	Industrial		Ordinary		Credit		Group	
	1 Number of Policies	2 Amount of Insurance (a)	3 Number of Policies	4 Amount of Insurance (a)	5 Number of Policies	6 Amount of Insurance (a)	7 Number of Certificates	8 Amount of Insurance (a)
48. Waiver of Premium .....								
49. Disability Income .....								
50. Extended Benefits .....			XXX	XXX				
51. Other .....								
52. Total .....	0 <sup>(b)</sup>	0	0 <sup>(b)</sup>	0	0 <sup>(b)</sup>	0	0 <sup>(b)</sup>	0

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

(b) See Paragraph 9 of the Annual Audited Financial Reports in the General section of the annual statement instructions.

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

**SUPPLEMENTARY CONTRACTS**

	Ordinary		Group	
	1 Involving Life Contingencies	2 Not Involving Life Contingencies	3 Involving Life Contingencies	4 Not Involving Life Contingencies
1. In force end of prior year	0	0	0	0
2. Issued during year				
3. Reinsurance assumed				
4. Increased during year (net)				
5. Total (Lines 1 to 4)	0	0	0	0
Deductions during year:				
6. Decreased (net)				
7. Reinsurance ceded				
8. Totals (Lines 6 and 7)	0	0	0	0
9. In force end of year	0	0	0	0
10. Amount on deposit		(a)		(a)
11. Income now payable				
12. Amount of income payable	(a)	(a)	(a)	(a)

**NONE**

**ANNUITIES**

	Ordinary		Group	
	1 Immediate	2 Deferred	3 Contracts	4 Certificates
1. In force end of prior year	0	0	0	0
2. Issued during year				
3. Reinsurance assumed				
4. Increased during year (net)				
5. Total (Lines 1 to 4)	0	0	0	0
Deductions during year:				
6. Decreased (net)				
7. Reinsurance ceded				
8. Totals (Lines 6 and 7)	0	0	0	0
9. In force end of year	0	0	0	0
Income now payable:				
10. Amount of income payable	(a)	XXX	XXX	(a)
Deferred fully paid:				
11. Account balance	XXX	(a)	XXX	(a)
Deferred not fully paid:				
12. Account balance	XXX	(a)	XXX	(a)

**NONE**

**ACCIDENT AND HEALTH INSURANCE**

	Group		Credit		Other	
	1 Certificates	2 Premiums in Force	3 Policies	4 Premiums in Force	5 Policies	6 Premiums in Force
1. In force end of prior year	0	0	0	0	0	0
2. Issued during year						
3. Reinsurance assumed						
4. Increased during year (net)		XXX		XXX		XXX
5. Total (Lines 1 to 4)	0	XXX	0	XXX	0	XXX
Deductions during year:						
6. Conversions		XXX	XXX	XXX	XXX	XXX
7. Decreased (net)		XXX		XXX		XXX
8. Reinsurance ceded		XXX		XXX		XXX
9. Total (Lines 6 to 8)	0	XXX	0	XXX	0	XXX
10. In force end of year	0	(a)	0	(a)	0	(a)

**NONE**

**DEPOSIT FUNDS AND DIVIDEND ACCUMULATIONS**

	1	2
	Deposit Funds Contracts	Dividend Accumulations Contracts
1. In force end of prior year	0	0
2. Issued during year		
3. Reinsurance assumed		
4. Increased during year (net)		
5. Total (Lines 1 to 4)	0	0
Deductions during year:		
6. Decreased (net)		
7. Reinsurance ceded		
8. Total (Lines 6 and 7)	0	0
9. In force end of year	0	0
10. Amount of account balance	(a)	(a)

**NONE**

(a) See Paragraph 9 of the Annual Audited Financial Reports in the General section of the annual statement instructions.

**SCHEDULE T—PREMIUMS AND ANNUITY CONSIDERATIONS**

Allocated by States and Territories

States, Etc.	1	Direct Business Only						
		Life Contracts		4	5	6	7	
		2	3					
	Active Status	Life Insurance Premiums	Annuity Considerations	Accident and Health Insurance Premiums, Including Policy, Membership and Other Fees	Other Considerations	Total Columns 2 Through 5	Deposit-Type Contracts	
1. Alabama	AL	N	0	0	0	0	0	0
2. Alaska	AK	N	0	0	0	0	0	0
3. Arizona	AZ	N	0	0	0	0	0	0
4. Arkansas	AR	N	0	0	0	0	0	0
5. California	CA	N	0	0	0	0	0	0
6. Colorado	CO	N	0	0	0	0	0	0
7. Connecticut	CT	N	0	0	0	0	0	0
8. Delaware	DE	N	0	0	0	0	0	0
9. District of Columbia	DC	N	0	0	0	0	0	0
10. Florida	FL	N	0	0	0	0	0	0
11. Georgia	GA	N	0	0	0	0	0	0
12. Hawaii	HI	N	0	0	0	0	0	0
13. Idaho	ID	N	0	0	0	0	0	0
14. Illinois	IL	N	0	0	0	0	0	0
15. Indiana	IN	N	0	0	0	0	0	0
16. Iowa	IA	N	0	0	0	0	0	0
17. Kansas	KS	N	0	0	0	0	0	0
18. Kentucky	KY	N	0	0	0	0	0	0
19. Louisiana	LA	N	0	0	0	0	0	0
20. Maine	ME	N	0	0	0	0	0	0
21. Maryland	MD	N	0	0	0	0	0	0
22. Massachusetts	MA	N	0	0	0	0	0	0
23. Michigan	MI	N	0	0	0	0	0	0
24. Minnesota	MN	N	0	0	0	0	0	0
25. Mississippi	MS	N	0	0	0	0	0	0
26. Missouri	MO	N	0	0	0	0	0	0
27. Montana	MT	N	0	0	0	0	0	0
28. Nebraska	NE	N	0	0	0	0	0	0
29. Nevada	NV	N	0	0	0	0	0	0
30. New Hampshire	NH	N	0	0	0	0	0	0
31. New Jersey	NJ	N	0	0	0	0	0	0
32. New Mexico	NM	N	0	0	0	0	0	0
33. New York	NY	N	0	0	0	0	0	0
34. North Carolina	NC	N	0	0	0	0	0	0
35. North Dakota	ND	N	0	0	0	0	0	0
36. Ohio	OH	N	0	0	0	0	0	0
37. Oklahoma	OK	N	0	0	0	0	0	0
38. Oregon	OR	N	0	0	0	0	0	0
39. Pennsylvania	PA	N	0	0	0	0	0	0
40. Rhode Island	RI	N	0	0	0	0	0	0
41. South Carolina	SC	N	0	0	0	0	0	0
42. South Dakota	SD	N	0	0	0	0	0	0
43. Tennessee	TN	N	0	0	0	0	0	0
44. Texas	TX	N	0	0	0	0	0	0
45. Utah	UT	N	0	0	0	0	0	0
46. Vermont	VT	N	0	0	0	0	0	0
47. Virginia	VA	N	0	0	0	0	0	0
48. Washington	WA	N	0	0	0	0	0	0
49. West Virginia	WV	N	0	0	0	0	0	0
50. Wisconsin	WI	N	0	0	0	0	0	0
51. Wyoming	WY	N	0	0	0	0	0	0
52. American Samoa	AS	N	0	0	0	0	0	0
53. Guam	GU	N	0	0	0	0	0	0
54. Puerto Rico	PR	L	400,039	0	87,666,357	0	88,066,396	0
55. US Virgin Islands	VI	N	0	0	0	0	0	0
56. Northern Mariana Islands	MP	N	0	0	0	0	0	0
57. Canada	CN	N	0	0	0	0	0	0
58. Aggregate Other Alien	OT	XXX	0	0	0	0	0	0
59. Subtotal	(a)	1	400,039	0	87,666,357	0	88,066,396	0
90. Reporting entity contributions for employee benefits plans	XXX						0	
91. Dividends or refunds applied to purchase paid-up additions and annuities	XXX						0	
92. Dividends or refunds applied to shorten endowment or premium paying period	XXX						0	
93. Premium or annuity considerations waived under disability or other contract provisions	XXX						0	
94. Aggregate other amounts not allocable by State	XXX		0	0	0	0	0	0
95. Totals (Direct Business)	XXX		400,039	0	87,666,357	0	88,066,396	0
96. Plus reinsurance assumed	XXX						0	
97. Totals (All Business)	XXX		400,039	0	87,666,357	0	88,066,396	0
98. Less reinsurance ceded	XXX						0	
99. Totals (All Business) less Reinsurance Ceded	XXX		400,039	0	(b) 87,666,357	0	88,066,396	0
<b>DETAILS OF WRITE-INS</b>								
5801.	XXX							
5802.	XXX							
5803.	XXX							
5898. Summary of remaining write-ins for Line 58 from overflow page	XXX		0	0	0	0	0	0
5899. Total (Lines 5801 through 5803 + 5898)(Line 58 above)	XXX		0	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	0
9499. Total (Lines 9401 through 9403 + 9498)(Line 94 above)	XXX		0	0	0	0	0	0

(L) Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) Registered - Non-domiciled RRGs; (Q) Qualified - Qualified or Accredited Reinsurer; (E) Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state; (N) None of the above - Not allowed to write business in the state.

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

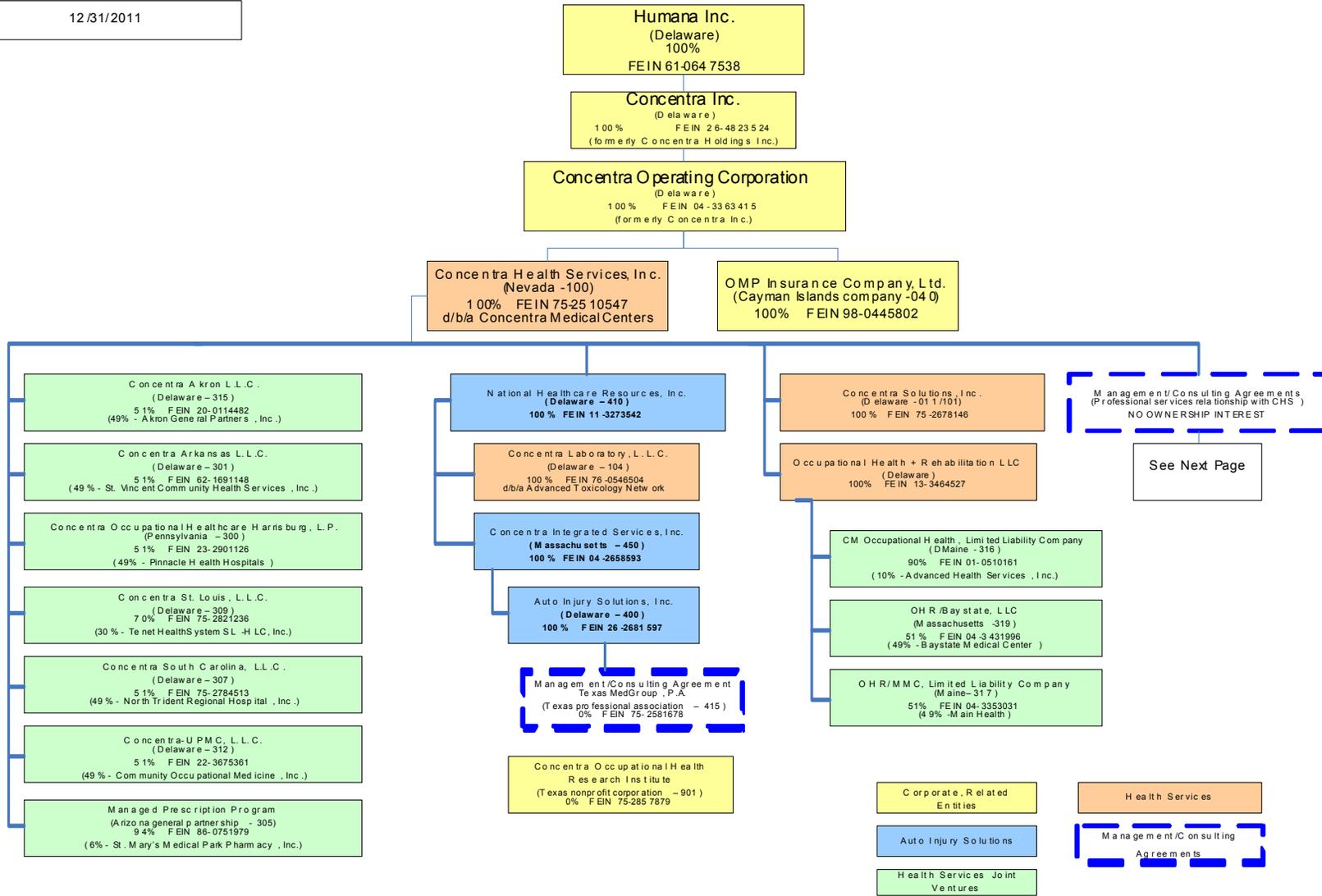
(a) Insert the number of L responses except for Canada and Other Alien.

(b) Column 4 should balance with Exhibit 1, Lines 6.4, 10.4 and 16.4, Cols. 8, 9 and 10, or with Schedule H, Part 1, Column 1, Line 1, indicate which: .

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

**PART 1 - ORGANIZATIONAL CHART**

12/31/2011



50

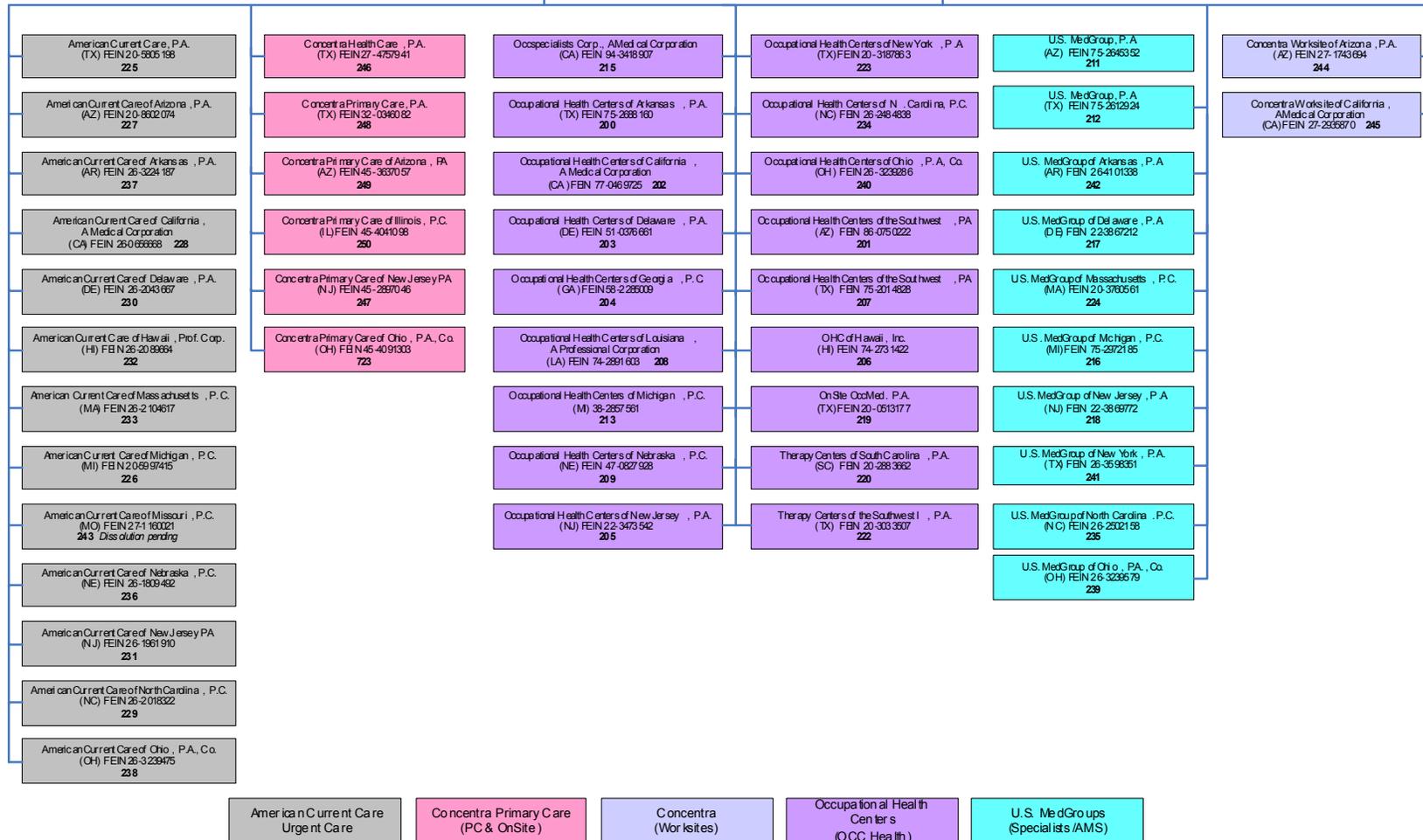


# SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

## PART 1 - ORGANIZATIONAL CHART

12/31/2011

Management/Consulting Agreements  
(Professional services relationship with CHS)  
  
NO OWNERSHIP INTEREST

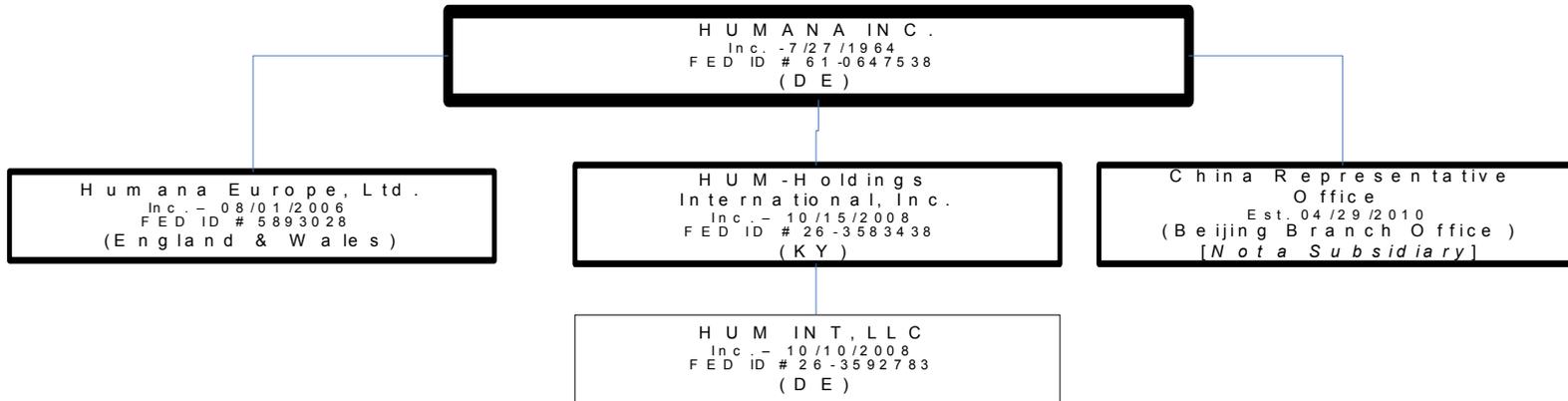


50.2

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

## PART 1 - ORGANIZATIONAL CHART

H U M A N A I N T E R N A T I O N A L S U B S I D I A R I E S



A s o f 1 2 / 3 1 / 2 0 1 1

# ALPHABETICAL INDEX

## ANNUAL STATEMENT BLANK

Analysis of Increase in Reserves During The Year	7
Analysis of Operations By Lines of Business	6
Asset Valuation Reserve Default Component	30
Asset Valuation Reserve Equity	32
Asset Valuation Reserve Replications (Synthetic) Assets	35
Asset Valuation Reserve	29
Assets	2
Cash Flow	5
Exhibit 1 – Part 1 – Premiums and Annuity Considerations for Life and Accident and Health Contracts	9
Exhibit 1 – Part 2 – Dividends and Coupons Applied, Reinsurance Commissions and Expense	10
Exhibit 2 – General Expenses	11
Exhibit 3 – Taxes, Licenses and Fees (Excluding Federal Income Taxes)	11
Exhibit 4 – Dividends or Refunds	11
Exhibit 5 – Aggregate Reserve for Life Contracts	12
Exhibit 5 – Interrogatories	13
Exhibit 5A – Changes in Bases of Valuation During The Year	13
Exhibit 6 – Aggregate Reserves for Accident and Health Contracts	14
Exhibit 7 – Deposit-Type Contracts	15
Exhibit 8 – Claims for Life and Accident and Health Contracts – Part 1	16
Exhibit 8 – Claims for Life and Accident and Health Contracts – Part 2	17
Exhibit of Capital Gains (Losses)	8
Exhibit of Life Insurance	25
Exhibit of Net Investment Income	8
Exhibit of Nonadmitted Assets	18
Exhibit of Number of Policies, Contracts, Certificates, Income Payable and Account Values	27
Five-Year Historical Data	22
Form for Calculating the Interest Maintenance Reserve (IMR)	28
General Interrogatories	20
Jurat Page	1
Liabilities, Surplus and Other Funds	3
Life Insurance (State Page)	24
Notes to Financial Statements	19
Overflow Page for Write-ins	54
Schedule A – Part 1	E01
Schedule A – Part 2	E02

# ALPHABETICAL INDEX

## ANNUAL STATEMENT BLANK (Continued)

Schedule A – Part 3	E03
Schedule A – Verification Between Years	SI02
Schedule B – Part 1	E04
Schedule B – Part 2	E05
Schedule B – Part 3	E06
Schedule B – Verification Between Years	SI02
Schedule BA – Part 1	E07
Schedule BA – Part 2	E08
Schedule BA – Part 3	E09
Schedule BA – Verification Between Years	SI03
Schedule D – Part 1	E10
Schedule D – Part 1A – Section 1	SI05
Schedule D – Part 1A – Section 2	SI08
Schedule D – Part 2 – Section 1	E11
Schedule D – Part 2 – Section 2	E12
Schedule D – Part 3	E13
Schedule D – Part 4	E14
Schedule D – Part 5	E15
Schedule D – Part 6 – Section 1	E16
Schedule D – Part 6 – Section 2	E16
Schedule D – Summary By Country	SI04
Schedule D – Verification Between Years	SI03
Schedule DA – Part 1	E17
Schedule DA – Verification Between Years	SI10
Schedule DB – Part A – Section 1	E18
Schedule DB – Part A – Section 2	E19
Schedule DB – Part A – Verification Between Years	SI11
Schedule DB – Part B – Section 1	E20
Schedule DB – Part B – Section 2	E21
Schedule DB – Part B – Verification Between Years	SI11
Schedule DB – Part C – Section 1	SI12
Schedule DB – Part C – Section 2	SI13
Schedule DB – Part D	E22
Schedule DB – Verification	SI14
Schedule DL - Part 1	E23
Schedule DL - Part 2	E24
Schedule E – Part 1 – Cash	E25
Schedule E – Part 2 – Cash Equivalents	E26
Schedule E – Part 3 – Special Deposits	E27

# ALPHABETICAL INDEX

---

## ANNUAL STATEMENT BLANK (Continued)

Schedule E – Verification Between Years	SI15
Schedule F	36
Schedule H – Accident and Health Exhibit – Part 1	37
Schedule H – Part 2, Part 3, and Part 4	38
Schedule H – Part 5 – Health Claims	39
Schedule S – Part 1 – Section 1	40
Schedule S – Part 1 – Section 2	41
Schedule S – Part 2	42
Schedule S – Part 3 – Section 1	43
Schedule S – Part 3 – Section 2	44
Schedule S – Part 4	45
Schedule S – Part 5	46
Schedule S – Part 6	47
Schedule T – Part 2 Interstate Compact	49
Schedule T – Premiums and Annuity Considerations	48
Schedule Y – Information Concerning Activities of Insurer Members of a Holding Company Group	50
Schedule Y – Part 1A - Detail of Insurance Holding Company System	51
Schedule Y – Part 2 – Summary of Insurer’s Transactions With Any Affiliates	52
Summary Investment Schedule	SI01
Summary of Operations	4
Supplemental Exhibits and Schedules Interrogatories	53

