



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

ANNUAL STATEMENT

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

STARMOUNT LIFE INSURANCE COMPANY

NAIC Group Code 0565 (Current) 0565 (Prior) NAIC Company Code 68985 Employer's ID Number 72-0977315

Organized under the Laws of MAINE State of Domicile or Port of Entry ME

Country of Domicile United States of America

Licensed as business type: Life, Accident and Health [X] Fraternal Benefit Societies []

Incorporated/Organized 08/24/1983 Commenced Business 08/25/1983

Statutory Home Office 2211 CONGRESS STREET (Street and Number) PORTLAND, ME, US 04122 (City or Town, State, Country and Zip Code)

Main Administrative Office 8485 GOODWOOD BLVD. (Street and Number) BATON ROUGE, LA, US 70806 (City or Town, State, Country and Zip Code) 225-926-2888 (Area Code) (Telephone Number)

Mail Address P.O. BOX 98100 (Street and Number or P.O. Box) BATON ROUGE, LA, US 70898-9100 (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 2211 CONGRESS STREET (Street and Number) PORTLAND, ME, US 04122 (City or Town, State, Country and Zip Code) 207-575-2211 (Area Code) (Telephone Number)

Internet Website Address www.starmountlife.com

Statutory Statement Contact JONATHAN SANFORD (Name) 423-294-1882 (Area Code) (Telephone Number) jsanford@unum.com (E-mail Address) 423-287-8597 (FAX Number)

OFFICERS

Chairman, President and Chief Executive Officer MICHAEL QUINN SIMONDS Executive Vice President TIMOTHY GERALD ARNOLD
Executive Vice President, Finance STEVEN ANDREW ZABEL Executive Vice President, General Counsel LISA GONZALEZ IGLESIAS
Senior Vice President, Chief Accounting Officer and Head of Treasury CHERIE ANTOINETTE PASHLEY Executive Vice President, Chief Information and Digital Officer PUNEET BHASIN
Senior Vice President, Global Financial Planning and Analysis DANIEL JASON WAXENBERG Vice President, Managing Counsel and Corporate Secretary JEAN PAUL JULLIENNE
Vice President, Treasurer BENJAMIN SETH KATZ Assistant Vice President, Finance Lead, Dental and Vision JEFFREY GLENN WILD

DIRECTORS OR TRUSTEES

DANIEL JASON WAXENBERG # LISA GONZALEZ IGLESIAS CHRISTOPHER WALLACE PYNE #
PUNEET BHASIN STEVEN ANDREW ZABEL MICHAEL QUINN SIMONDS
TIMOTHY GERALD ARNOLD

State of Tennessee SS:
County of Hamilton

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.

Signature of Michael Quinn Simonds
MICHAEL QUINN SIMONDS
President and Chief Executive Officer

Signature of Jean Paul Jullienne
JEAN PAUL JULLIENNE
Vice President, Managing Counsel and Corporate Secretary

Signature of Benjamin Seth Katz
BENJAMIN SETH KATZ
Vice President, Treasurer

Subscribed and sworn to before me this 15 day of February 2021

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

Signature of Janna Thomas
Janna Thomas
My Commission Expires: September 24, 2023



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

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)	87,261,347		87,261,347	48,303,567
2. Stocks (Schedule D):				
2.1 Preferred stocks				
2.2 Common stocks	10,000		10,000	38,200
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens				
3.2 Other than first liens				
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$0 encumbrances)	5,265,382		5,265,382	5,389,211
4.2 Properties held for the production of income (less \$ encumbrances)				
4.3 Properties held for sale (less \$ encumbrances)				
5. Cash (\$8,945,399 , Schedule E - Part 1), cash equivalents (\$8,032,186 , Schedule E - Part 2) and short-term investments (\$0 , Schedule DA)	16,977,585		16,977,585	34,197,733
6. Contract loans (including \$0 premium notes)	1,035,557		1,035,557	967,522
7. Derivatives (Schedule DB)				
8. Other invested assets (Schedule BA)				
9. Receivables for securities	5,000		5,000	0
10. Securities lending reinvested collateral assets (Schedule DL)				
11. Aggregate write-ins for invested assets				
12. Subtotals, cash and invested assets (Lines 1 to 11)	110,554,870		110,554,870	88,896,233
13. Title plants less \$ charged off (for Title insurers only)				
14. Investment income due and accrued	718,593		718,593	451,827
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection	9,409,945	1,024,747	8,385,198	9,186,217
15.2 Deferred premiums and agents' balances and installments booked but deferred and not yet due (including \$ earned but unbilled premiums)	2,055,996		2,055,996	2,267,222
15.3 Accrued retrospective premiums (\$) and contracts subject to redetermination (\$)				
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers	320,023		320,023	195,193
16.2 Funds held by or deposited with reinsured companies				
16.3 Other amounts receivable under reinsurance contracts	117,208		117,208	139,343
17. Amounts receivable relating to uninsured plans	320,020		320,020	315,372
18.1 Current federal and foreign income tax recoverable and interest thereon	1,841,180		1,841,180	9,476
18.2 Net deferred tax asset				
19. Guaranty funds receivable or on deposit	485,649		485,649	495,369
20. Electronic data processing equipment and software	642,181	157,804	484,377	801,841
21. Furniture and equipment, including health care delivery assets (\$)	280,075	280,075	0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates				
23. Receivables from parent, subsidiaries and affiliates	6,347,536		6,347,536	7,249,005
24. Health care (\$0) and other amounts receivable	8,132	8,132	0	0
25. Aggregate write-ins for other than invested assets	283,220	172,319	110,901	147,899
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	133,384,628	1,643,077	131,741,551	110,154,995
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts				
28. Total (Lines 26 and 27)	133,384,628	1,643,077	131,741,551	110,154,995
DETAILS OF WRITE-INS				
1101.				
1102.				
1103.				
1198. Summary of remaining write-ins for Line 11 from overflow page				
1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)				
2501. Miscellaneous accounts receivable	122,218	122,218	0	58,230
2502. Other tax receivables	110,901		110,901	89,669
2503. Interest maintenance reserve	50,101	50,101	0	0
2598. Summary of remaining write-ins for Line 25 from overflow page				
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	283,220	172,319	110,901	147,899

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Year	2 Prior Year
1. Aggregate reserve for life contracts \$ 27,037,910 (Exh. 5, Line 9999999) less \$ 0 included in Line 6.3 (including \$ 0 Modco Reserve)	27,037,910	26,526,056
2. Aggregate reserve for accident and health contracts (including \$ 0 Modco Reserve)	7,400,793	7,170,927
3. Liability for deposit-type contracts (Exhibit 7, Line 14, Col. 1) (including \$ Modco Reserve)		
4. Contract claims:		
4.1 Life (Exhibit 8, Part 1, Line 4.4, Col. 1 less sum of Cols. 9, 10 and 11)	973,504	929,894
4.2 Accident and health (Exhibit 8, Part 1, Line 4.4, sum of Cols. 9, 10 and 11)	11,040,395	15,071,133
5. Policyholders' dividends/refunds to members \$ and coupons \$ due and unpaid (Exhibit 4, Line 10)		
6. Provision for policyholders' dividends, refunds to members and coupons payable in following calendar year - estimated amounts:		
6.1 Policyholders' dividends and refunds to members apportioned for payment (including \$ Modco)		
6.2 Policyholders' dividends and refunds to members not yet apportioned (including \$ Modco)		
6.3 Coupons and similar benefits (including \$ Modco)		
7. Amount provisionally held for deferred dividend policies not included in Line 6		
8. Premiums and annuity considerations for life and accident and health contracts received in advance less \$ 0 discount; including \$ 4,999,093 accident and health premiums (Exhibit 1, Part 1, Col. 1, sum of lines 4 and 14)	5,053,975	5,691,132
9. Contract liabilities not included elsewhere:		
9.1 Surrender values on canceled contracts		
9.2 Provision for experience rating refunds, including the liability of \$ accident and health experience rating refunds of which \$ is for medical loss ratio rebate per the Public Health Service Act		
9.3 Other amounts payable on reinsurance, including \$ assumed and \$ ceded		
9.4 Interest maintenance reserve (IMR, Line 6)		
10. Commissions to agents due or accrued-life and annuity contracts \$ 1,316 accident and health \$ 1,634,339 and deposit-type contract funds \$ 0	1,635,655	2,233,820
11. Commissions and expense allowances payable on reinsurance assumed	0	2,909
12. General expenses due or accrued (Exhibit 2, Line 12, Col. 7)	874,954	218,783
13. Transfers to Separate Accounts due or accrued (net) (including \$ accrued for expense allowances recognized in reserves, net of reinsured allowances)		
14. Taxes, licenses and fees due or accrued, excluding federal income taxes (Exhibit 3, Line 9, Col. 6)	1,651,612	2,295,424
15.1 Current federal and foreign income taxes, including \$ on realized capital gains (losses)		
15.2 Net deferred tax liability		
16. Unearned investment income	40,300	38,239
17. Amounts withheld or retained by reporting entity as agent or trustee		
18. Amounts held for agents' account, including \$ agents' credit balances		
19. Remittances and items not allocated	976,109	422,091
20. Net adjustment in assets and liabilities due to foreign exchange rates		
21. Liability for benefits for employees and agents if not included above		
22. Borrowed money \$ and interest thereon \$		
23. Dividends to stockholders declared and unpaid		
24. Miscellaneous liabilities:		
24.01 Asset valuation reserve (AVR, Line 16, Col. 7)	699,346	500,096
24.02 Reinsurance in unauthorized and certified (\$) companies		
24.03 Funds held under reinsurance treaties with unauthorized and certified (\$) reinsurers		
24.04 Payable to parent, subsidiaries and affiliates		
24.05 Drafts outstanding		
24.06 Liability for amounts held under uninsured plans		
24.07 Funds held under coinsurance		
24.08 Derivatives		
24.09 Payable for securities	0	200
24.10 Payable for securities lending		
24.11 Capital notes \$ and interest thereon \$		
25. Aggregate write-ins for liabilities	73,645	15,871
26. Total liabilities excluding Separate Accounts business (Lines 1 to 25)	57,458,197	61,116,575
27. From Separate Accounts Statement		
28. Total liabilities (Lines 26 and 27)	57,458,197	61,116,575
29. Common capital stock	3,000,000	3,000,000
30. Preferred capital stock		
31. Aggregate write-ins for other than special surplus funds		
32. Surplus notes		
33. Gross paid in and contributed surplus (Page 3, Line 33, Col. 2 plus Page 4, Line 51.1, Col. 1)	70,280,000	54,580,000
34. Aggregate write-ins for special surplus funds	0	4,330,882
35. Unassigned funds (surplus)	1,003,354	(12,872,461)
36. Less treasury stock, at cost:		
36.1 shares common (value included in Line 29 \$)		
36.2 shares preferred (value included in Line 30 \$)		
37. Surplus (Total Lines 31+32+33+34+35-36) (including \$ 0 in Separate Accounts Statement)	71,283,354	46,038,420
38. Totals of Lines 29, 30 and 37 (Page 4, Line 55)	74,283,354	49,038,420
39. Totals of Lines 28 and 38 (Page 2, Line 28, Col. 3)	131,741,551	110,154,995
DETAILS OF WRITE-INS		
2501. Missing claimants liability	.67	.0
2502. Miscellaneous liabilities	73,578	15,871
2503.		
2598. Summary of remaining write-ins for Line 25 from overflow page		
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	73,645	15,871
3101.		
3102.		
3103.		
3198. Summary of remaining write-ins for Line 31 from overflow page		
3199. Totals (Lines 3101 thru 3103 plus 3198)(Line 31 above)		
3401. Estimated HIP annual fee	0	4,330,882
3402.		
3403.		
3498. Summary of remaining write-ins for Line 34 from overflow page		
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	4,330,882

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

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)	258,153,164	250,633,424
2. Considerations for supplementary contracts with life contingencies		
3. Net investment income (Exhibit of Net Investment Income, Line 17)	2,703,669	2,329,434
4. Amortization of Interest Maintenance Reserve (IMR, Line 5)	7,010	420
5. Separate Accounts net gain from operations excluding unrealized gains or losses		
6. Commissions and expense allowances on reinsurance ceded (Exhibit 1, Part 2, Line 26.1, Col. 1)	780,318	1,032,378
7. Reserve adjustments on reinsurance ceded		
8. Miscellaneous Income:		
8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts		
8.2 Charges and fees for deposit-type contracts		
8.3 Aggregate write-ins for miscellaneous income	758,235	971,784
9. Total (Lines 1 to 8.3)	262,402,396	254,967,441
10. Death benefits	4,896,471	4,823,555
11. Matured endowments (excluding guaranteed annual pure endowments)	0	0
12. Annuity benefits (Exhibit 8, Part 2, Line 6.4, Cols. 4 + 8)	13,329	0
13. Disability benefits and benefits under accident and health contracts	152,122,106	173,898,859
14. Coupons, guaranteed annual pure endowments and similar benefits		
15. Surrender benefits and withdrawals for life contracts	233,911	234,672
16. Group conversions		
17. Interest and adjustments on contract or deposit-type contract funds	540,935	12,907
18. Payments on supplementary contracts with life contingencies		
19. Increase in aggregate reserves for life and accident and health contracts	741,720	7,818,812
20. Totals (Lines 10 to 19)	158,548,472	186,788,805
21. Commissions on premiums, annuity considerations, and deposit-type contract funds (direct business only) (Exhibit 1, Part 2, Line 31, Col. 1)	27,134,926	25,312,218
22. Commissions and expense allowances on reinsurance assumed (Exhibit 1, Part 2, Line 26.2, Col. 1)	(2,255)	(6,287)
23. General insurance expenses and fraternal expenses (Exhibit 2, Line 10, Cols. 1, 2, 3, 4 and 6)	51,552,912	48,649,254
24. Insurance taxes, licenses and fees, excluding federal income taxes (Exhibit 3, Line 7, Cols. 1 + 2 + 3 + 5)	14,366,842	8,432,857
25. Increase in loading on deferred and uncollected premiums	32,538	4,144
26. Net transfers to or (from) Separate Accounts net of reinsurance		
27. Aggregate write-ins for deductions	15,852	11,346
28. Totals (Lines 20 to 27)	251,649,288	269,192,337
29. Net gain from operations before dividends to policyholders, refunds to members and federal income taxes (Line 9 minus Line 28)	10,753,108	(14,224,896)
30. Dividends to policyholders and refunds to members		
31. Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30)	10,753,108	(14,224,896)
32. Federal and foreign income taxes incurred (excluding tax on capital gains)	176,143	102,986
33. Net gain from operations after dividends to policyholders, refunds to members and federal income taxes and before realized capital gains or (losses) (Line 31 minus Line 32)	10,576,965	(14,327,882)
34. Net realized capital gains (losses) (excluding gains (losses) transferred to the IMR) less capital gains tax of \$(8,015) (excluding taxes of \$168 transferred to the IMR)	8,015	203
35. Net income (Line 33 plus Line 34)	10,584,981	(14,327,679)
CAPITAL AND SURPLUS ACCOUNT		
36. Capital and surplus, December 31, prior year (Page 3, Line 38, Col. 2)	49,038,420	45,329,752
37. Net income (Line 35)	10,584,981	(14,327,679)
38. Change in net unrealized capital gains (losses) less capital gains tax of \$		
39. Change in net unrealized foreign exchange capital gain (loss)		
40. Change in net deferred income tax		
41. Change in nonadmitted assets	(840,796)	147,253
42. Change in liability for reinsurance in unauthorized and certified companies		
43. Change in reserve on account of change in valuation basis, (increase) or decrease	0	(2,000,000)
44. Change in asset valuation reserve	(199,251)	(110,906)
45. Change in treasury stock (Page 3, Lines 36.1 and 36.2, Col. 2 minus Col. 1)		
46. Surplus (contributed to) withdrawn from Separate Accounts during period		
47. Other changes in surplus in Separate Accounts Statement		
48. Change in surplus notes		
49. Cumulative effect of changes in accounting principles		
50. Capital changes:		
50.1 Paid in		
50.2 Transferred from surplus (Stock Dividend)		
50.3 Transferred to surplus		
51. Surplus adjustment:		
51.1 Paid in	15,700,000	20,000,000
51.2 Transferred to capital (Stock Dividend)		
51.3 Transferred from capital		
51.4 Change in surplus as a result of reinsurance		
52. Dividends to stockholders		
53. Aggregate write-ins for gains and losses in surplus		
54. Net change in capital and surplus for the year (Lines 37 through 53)	25,244,934	3,708,668
55. Capital and surplus, December 31, current year (Lines 36 + 54) (Page 3, Line 38)	74,283,354	49,038,420
DETAILS OF WRITE-INS		
08.301. Interchange fee income	758,235	971,784
08.302.		
08.303.		
08.398. Summary of remaining write-ins for Line 8.3 from overflow page		
08.399. Totals (Lines 08.301 thru 08.303 plus 08.398)(Line 8.3 above)	758,235	971,784
2701. Fines and penalties paid to regulatory authorities	15,852	11,346
2702.		
2703.		
2798. Summary of remaining write-ins for Line 27 from overflow page		
2799. Totals (Lines 2701 thru 2703 plus 2798)(Line 27 above)	15,852	11,346
5301. Transfer to (from) special surplus funds - estimated HIP accrual	(4,330,882)	4,330,882
5302. Transfer to (from) taxes, licenses and fees - estimated HIP accrual	4,330,882	(4,330,882)
5303.		
5398. Summary of remaining write-ins for Line 53 from overflow page		
5399. Totals (Lines 5301 thru 5303 plus 5398)(Line 53 above)		

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

CASH FLOW

	1	2
	Current Year	Prior Year
Cash from Operations		
1. Premiums collected net of reinsurance	257,471,703	252,000,053
2. Net investment income	2,596,408	1,971,185
3. Miscellaneous income	1,560,688	2,106,090
4. Total (Lines 1 through 3)	261,628,800	256,077,329
5. Benefit and loss related payments	161,383,899	177,848,217
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts		
7. Commissions, expenses paid and aggregate write-ins for deductions	93,579,477	82,982,541
8. Dividends paid to policyholders		
9. Federal and foreign income taxes paid (recovered) net of \$0 tax on capital gains (losses)	2,000,000	(327,009)
10. Total (Lines 5 through 9)	256,963,376	260,503,749
11. Net cash from operations (Line 4 minus Line 10)	4,665,424	(4,426,420)
Cash from Investments		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds	1,763,358	19,269,302
12.2 Stocks	44,100	0
12.3 Mortgage loans		
12.4 Real estate		
12.5 Other invested assets		
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	62,533	642,368
12.7 Miscellaneous proceeds	0	200
12.8 Total investment proceeds (Lines 12.1 to 12.7)	1,869,991	19,911,870
13. Cost of investments acquired (long-term only):		
13.1 Bonds	40,811,486	24,198,859
13.2 Stocks	15,900	5,900
13.3 Mortgage loans		
13.4 Real estate		
13.5 Other invested assets		
13.6 Miscellaneous applications	5,200	0
13.7 Total investments acquired (Lines 13.1 to 13.6)	40,832,586	24,204,759
14. Net increase (decrease) in contract loans and premium notes	68,035	187,282
15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14)	(39,030,630)	(4,480,171)
Cash from Financing and Miscellaneous Sources		
16. Cash provided (applied):		
16.1 Surplus notes, capital notes		
16.2 Capital and paid in surplus, less treasury stock	15,700,000	20,000,000
16.3 Borrowed funds		
16.4 Net deposits on deposit-type contracts and other insurance liabilities		
16.5 Dividends to stockholders		
16.6 Other cash provided (applied)	1,445,058	(5,560,363)
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)	17,145,058	14,439,637
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS		
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	(17,220,148)	5,533,045
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year	34,197,733	28,664,688
19.2 End of year (Line 18 plus Line 19.1)	16,977,585	34,197,733

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

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ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY
ANALYSIS OF OPERATIONS BY LINES OF BUSINESS - SUMMARY

	1	2	3	4	5	6	7	8	9
	Total	Individual Life	Group Life	Individual Annuities	Group Annuities	Accident and Health	Fraternal	Other Lines of Business	YRT Mortality Risk Only
1. Premiums and annuity considerations for life and accident and health contracts	258,153,164	5,881,204	65,110			252,206,850			
2. Considerations for supplementary contracts with life contingencies		XXX	XXX			XXX	XXX		XXX
3. Net investment income	2,703,669	748,533	375			1,954,762			
4. Amortization of Interest Maintenance Reserve (IMR)	7,010	1,942				5,068			
5. Separate Accounts net gain from operations excluding unrealized gains or losses							XXX		
6. Commissions and expense allowances on reinsurance ceded	780,318					780,318	XXX		
7. Reserve adjustments on reinsurance ceded							XXX		
8. Miscellaneous Income:									
8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts							XXX		
8.2 Charges and fees for deposit-type contracts						XXX	XXX		
8.3 Aggregate write-ins for miscellaneous income	758,235					758,235			
9. Totals (Lines 1 to 8.3)	262,402,396	6,631,679	65,485			255,705,232			
10. Death benefits	4,896,471	4,758,971	137,500			XXX	XXX		
11. Matured endowments (excluding guaranteed annual pure endowments)						XXX	XXX		
12. Annuity benefits	13,329	XXX	XXX	13,329		XXX	XXX		XXX
13. Disability benefits and benefits under accident and health contracts	152,122,106					152,122,106	XXX		
14. Coupons, guaranteed annual pure endowments and similar benefits							XXX		
15. Surrender benefits and withdrawals for life contracts	233,911	233,911				XXX	XXX		
16. Group conversions							XXX		
17. Interest and adjustments on contract or deposit-type contract funds	540,935	6,123				534,812	XXX		
18. Payments on supplementary contracts with life contingencies						XXX	XXX		
19. Increase in aggregate reserves for life and accident and health contracts	741,720	530,447	(7,412)	(11,181)		229,866	XXX		
20. Totals (Lines 10 to 19)	158,548,472	5,529,453	130,088	2,148		152,886,784	XXX		
21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only)	27,134,926	8,782				27,126,144			XXX
22. Commissions and expense allowances on reinsurance assumed	(2,255)		(103)			(2,152)	XXX		
23. General insurance expenses and fraternal expenses	51,552,912	1,713,730	(52)			49,839,235			
24. Insurance taxes, licenses and fees, excluding federal income taxes	14,366,842	271,399	2,864			14,092,579			
25. Increase in loading on deferred and uncollected premiums	32,538	31,780	22			736	XXX		
26. Net transfers to or (from) Separate Accounts net of reinsurance							XXX		
27. Aggregate write-ins for deductions	15,852	429	4			15,419			
28. Totals (Lines 20 to 27)	251,649,288	7,555,572	132,823	2,148		243,958,744			
29. Net gain from operations before dividends to policyholders, refunds to members and federal income taxes (Line 9 minus Line 28)	10,753,108	(923,894)	(67,338)	(2,148)		11,746,488			
30. Dividends to policyholders and refunds to members							XXX		
31. Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30)	10,753,108	(923,894)	(67,338)	(2,148)		11,746,488			
32. Federal income taxes incurred (excluding tax on capital gains)	176,143	(15,134)	(1,103)	(35)		192,415			
33. Net gain from operations after dividends to policyholders, refunds to members and federal income taxes and before realized capital gains or (losses) (Line 31 minus Line 32)	10,576,965	(908,760)	(66,235)	(2,113)		11,554,073			
34. Policies/certificates in force end of year	664,297	9,767	128	8		654,394	XXX		
DETAILS OF WRITE-INS									
08.301. Interchange fee income	758,235					758,235			
08.302.									
08.303.									
08.398. Summary of remaining write-ins for Line 8.3 from overflow page									
08.399. Totals (Lines 08.301 thru 08.303 plus 08.398) (Line 8.3 above)	758,235					758,235			
2701. Fines and penalties paid to regulatory authorities	15,852	429	4			15,419			
2702.									
2703.									
2798. Summary of remaining write-ins for Line 27 from overflow page									
2799. Totals (Lines 2701 thru 2703 plus 2798) (Line 27 above)	15,852	429	4			15,419			

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY
ANALYSIS OF OPERATIONS BY LINES OF BUSINESS - INDIVIDUAL LIFE INSURANCE (b)

	1	2	3	4	5	6	7	8	9	10	11	12
	Total	Industrial Life	Whole Life	Term Life	Indexed Life	Universal Life	Universal Life With Secondary Guarantees	Variable Life	Variable Universal Life	Credit Life (c)	Other Individual Life	YRT Mortality Risk Only
1. Premiums for life contracts (a)	5,881,204		2,925,865	2,955,539								
2. Considerations for supplementary contracts with life contingencies	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3. Net investment income	748,533		372,365	376,167								
4. Amortization of Interest Maintenance Reserve (IMR)	1,942		965	976								
5. Separate Accounts net gain from operations excluding unrealized gains or losses												
6. Commissions and expense allowances on reinsurance ceded												
7. Reserve adjustments on reinsurance ceded												
8. Miscellaneous Income:												
8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts												
8.2 Charges and fees for deposit-type contracts												
8.3 Aggregate write-ins for miscellaneous income												
9. Totals (Lines 1 to 8.3)	6,631,679		3,298,996	3,332,683								
10. Death benefits	4,758,971		2,524,521	2,234,450								
11. Matured endowments (excluding guaranteed annual pure endowments)												
12. Annuity benefits	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13. Disability benefits and benefits under accident and health contracts												
14. Coupons, guaranteed annual pure endowments and similar benefits												
15. Surrender benefits and withdrawals for life contracts	233,911		233,911									
16. Group conversions												
17. Interest and adjustments on contract or deposit-type contract funds	6,123		6,123									
18. Payments on supplementary contracts with life contingencies												
19. Increase in aggregate reserves for life and accident and health contracts	530,447		510,512	19,935								
20. Totals (Lines 10 to 19)	5,529,453		3,275,068	2,254,385								
21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only)	8,782		8,782									XXX
22. Commissions and expense allowances on reinsurance assumed												
23. General insurance expenses	1,713,730		1,563,957	149,773								
24. Insurance taxes, licenses and fees, excluding federal income taxes	271,399		130,156	141,243								
25. Increase in loading on deferred and uncollected premiums	31,780		(1,285)	33,065								
26. Net transfers to or (from) Separate Accounts net of reinsurance												
27. Aggregate write-ins for deductions	429		202	228								
28. Totals (Lines 20 to 27)	7,555,572		4,976,879	2,578,694								
29. Net gain from operations before dividends to policyholders, refunds to members and federal income taxes (Line 9 minus Line 28)	(923,894)		(1,677,883)	753,989								
30. Dividends to policyholders and refunds to members												
31. Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30)	(923,894)		(1,677,883)	753,989								
32. Federal income taxes incurred (excluding tax on capital gains)	(15,134)		(27,485)	12,351								
33. Net gain from operations after dividends to policyholders, refunds to members and federal income taxes and before realized capital gains or (losses) (Line 31 minus Line 32)	(908,760)		(1,650,398)	741,638								
34. Policies/certificates in force end of year	9,767		5,361	4,406								
DETAILS OF WRITE-INS												
08.301.												
08.302.												
08.303.												
08.398. Summary of remaining write-ins for Line 8.3 from overflow page												
08.399. Totals (Lines 08.301 thru 08.303 plus 08.398) (Line 8.3 above)												
2701. Fines and Penalties paid to regulatory authorities	429		202	228								
2702.												
2703.												
2798. Summary of remaining write-ins for Line 27 from overflow page												
2799. Totals (Lines 2701 thru 2703 plus 2798) (Line 27 above)	429		202	228								

(a) Include premium amounts for preneed plans included in Line 1
(b) Indicate if blocks of business in run-off that comprise less than 5% of premiums and less than 5% of reserve and loans liability are aggregated with material blocks of business and which columns are affected.
(c) Individual and Group Credit Life are combined and included on page. (Indicate whether included with Individual or Group.)

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY
ANALYSIS OF OPERATIONS BY LINES OF BUSINESS - GROUP LIFE INSURANCE (c)

	1	2	3	4	5	6	7	8	9
	Total	Whole Life	Term Life	Universal Life	Variable Life	Variable Universal Life	Credit Life (d)	Other Group Life (a)	YRT Mortality Risk Only
1. Premiums for life contracts ^(b)	65,110		65,110						
2. Considerations for supplementary contracts with life contingencies	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3. Net investment income	375		375						
4. Amortization of Interest Maintenance Reserve (IMR)									
5. Separate Accounts net gain from operations excluding unrealized gains or losses									
6. Commissions and expense allowances on reinsurance ceded									
7. Reserve adjustments on reinsurance ceded									
8. Miscellaneous Income:									
8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts									
8.2 Charges and fees for deposit-type contracts									
8.3 Aggregate write-ins for miscellaneous income									
9. Totals (Lines 1 to 8.3)	65,485		65,485						
10. Death benefits	137,500		137,500						
11. Matured endowments (excluding guaranteed annual pure endowments)									
12. Annuity benefits	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13. Disability benefits and benefits under accident and health contracts									
14. Coupons, guaranteed annual pure endowments and similar benefits									
15. Surrender benefits and withdrawals for life contracts									
16. Group conversions									
17. Interest and adjustments on contract or deposit-type contract funds									
18. Payments on supplementary contracts with life contingencies									
19. Increase in aggregate reserves for life and accident and health contracts	(7,412)		(7,412)						
20. Totals (Lines 10 to 19)	130,088		130,088						
21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only)									XXX
22. Commissions and expense allowances on reinsurance assumed	(103)		(103)						
23. General insurance expenses	(52)		(52)						
24. Insurance taxes, licenses and fees, excluding federal income taxes	2,864		2,864						
25. Increase in loading on deferred and uncollected premiums	22		22						
26. Net transfers to or (from) Separate Accounts net of reinsurance									
27. Aggregate write-ins for deductions	4		4						
28. Totals (Lines 20 to 27)	132,823		132,823						
29. Net gain from operations before dividends to policyholders, refunds to members and federal income taxes (Line 9 minus Line 28)	(67,338)		(67,338)						
30. Dividends to policyholders and refunds to members									
31. Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30)	(67,338)		(67,338)						
32. Federal income taxes incurred (excluding tax on capital gains)	(1,103)		(1,103)						
33. Net gain from operations after dividends to policyholders, refunds to members and federal income taxes and before realized capital gains or (losses) (Line 31 minus Line 32)	(66,235)		(66,235)						
34. Policies/certificates in force end of year	128		128						
DETAILS OF WRITE-INS									
08.301.									
08.302.									
08.303.									
08.398. Summary of remaining write-ins for Line 8.3 from overflow page									
08.399. Totals (Lines 08.301 thru 08.303 plus 08.398) (Line 8.3 above)									
2701. Fines and penalties paid to regulatory authorities	4		4						
2702.									
2703.									
2798. Summary of remaining write-ins for Line 27 from overflow page									
2799. Totals (Lines 2701 thru 2703 plus 2798) (Line 27 above)	4		4						

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

(b) Include premium amounts for preneed plans included in Line 1 _____

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

(d) Individual and Group Credit Life are combined and included on _____ page. (Indicate whether included with Individual or Group.)

**ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY
ANALYSIS OF OPERATIONS BY LINES OF BUSINESS - INDIVIDUAL ANNUITIES (a)**

	1 Total	Deferred				6 Life Contingent Payout (Immediate and Annuityizations)	7 Other Annuities
		2 Fixed Annuities	3 Indexed Annuities	4 Variable Annuities with Guarantees	5 Variable Annuities Without Guarantees		
1. Premiums for individual annuity contracts							
2. Considerations for supplementary contracts with life contingencies		XXX	XXX	XXX	XXX		XXX
3. Net investment income							
4. Amortization of Interest Maintenance Reserve (IMR)							
5. Separate Accounts net gain from operations excluding unrealized gains or losses							
6. Commissions and expense allowances on reinsurance ceded							
7. Reserve adjustments on reinsurance ceded							
8. Miscellaneous Income:							
8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts							
8.2 Charges and fees for deposit-type contracts							
8.3 Aggregate write-ins for miscellaneous income							
9. Totals (Lines 1 to 8.3)							
10. Death benefits							
11. Matured endowments (excluding guaranteed annual pure endowments)							
12. Annuity benefits	13,329						13,329
13. Disability benefits and benefits under accident and health contracts							
14. Coupons, guaranteed annual pure endowments and similar benefits							
15. Surrender benefits and withdrawals for life contracts							
16. Group conversions							
17. Interest and adjustments on contract or deposit-type contract funds							
18. Payments on supplementary contracts with life contingencies							
19. Increase in aggregate reserves for life and accident and health contracts	(11,181)						(11,181)
20. Totals (Lines 10 to 19)	2,148						2,148
21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only)							
22. Commissions and expense allowances on reinsurance assumed							
23. General insurance expenses							
24. Insurance taxes, licenses and fees, excluding federal income taxes							
25. Increase in loading on deferred and uncollected premiums							
26. Net transfers to or (from) Separate Accounts net of reinsurance							
27. Aggregate write-ins for deductions							
28. Totals (Lines 20 to 27)	2,148						2,148
29. Net gain from operations before dividends to policyholders, refunds to members and federal income taxes (Line 9 minus Line 28)	(2,148)						(2,148)
30. Dividends to policyholders and refunds to members							
31. Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30)	(2,148)						(2,148)
32. Federal income taxes incurred (excluding tax on capital gains)	(35)						(35)
33. Net gain from operations after dividends to policyholders, refunds to members and federal income taxes and before realized capital gains or (losses) (Line 31 minus Line 32)	(2,113)						(2,113)
34. Policies/certificates in force end of year	8						8
DETAILS OF WRITE-INS							
08.301.							
08.302.							
08.303.							
08.398. Summary of remaining write-ins for Line 8.3 from overflow page							
08.399. Totals (Lines 08.301 thru 08.303 plus 08.398) (Line 8.3 above)							
2701.							
2702.							
2703.							
2798. Summary of remaining write-ins for Line 27 from overflow page							
2799. Totals (Lines 2701 thru 2703 plus 2798) (Line 27 above)							

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

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY
ANALYSIS OF OPERATIONS BY LINES OF BUSINESS - GROUP ANNUITIES (a)

	1 Total	Deferred				6 Life Contingent Payout (Immediate and Annuityizations)	7 Other Annuities
		2 Fixed Annuities	3 Indexed Annuities	4 Variable Annuities with Guarantees	5 Variable Annuities Without Guarantees		
1. Premiums for group annuity contracts							
2. Considerations for supplementary contracts with life contingencies		XXX	XXX	XXX	XXX		XXX
3. Net investment income							
4. Amortization of Interest Maintenance Reserve (IMR)							
5. Separate Accounts net gain from operations excluding unrealized gains or losses							
6. Commissions and expense allowances on reinsurance ceded							
7. Reserve adjustments on reinsurance ceded							
8. Miscellaneous Income:							
8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts							
8.2 Charges and fees for deposit-type contracts							
8.3 Aggregate write-ins for miscellaneous income							
9. Totals (Lines 1 to 8.3)							
10. Death benefits							
11. Matured endowments (excluding guaranteed annual pure endowments)							
12. Annuity benefits							
13. Disability benefits and benefits under accident and health contracts							
14. Coupons, guaranteed annual pure endowments and similar benefits							
15. Surrender benefits and withdrawals for life contracts							
16. Group conversions							
17. Interest and adjustments on contract or deposit-type contract funds							
18. Payments on supplementary contracts with life contingencies							
19. Increase in aggregate reserves for life and accident and health contracts							
20. Totals (Lines 10 to 19)							
21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only)							
22. Commissions and expense allowances on reinsurance assumed							
23. General insurance expenses							
24. Insurance taxes, licenses and fees, excluding federal income taxes							
25. Increase in loading on deferred and uncollected premiums							
26. Net transfers to or (from) Separate Accounts net of reinsurance							
27. Aggregate write-ins for deductions							
28. Totals (Lines 20 to 27)							
29. Net gain from operations before dividends to policyholders, refunds to members and federal income taxes (Line 9 minus Line 28)							
30. Dividends to policyholders and refunds to members							
31. Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30)							
32. Federal income taxes incurred (excluding tax on capital gains)							
33. Net gain from operations after dividends to policyholders, refunds to members and federal income taxes and before realized capital gains or (losses) (Line 31 minus Line 32)							
34. Policies/certificates in force end of year							
DETAILS OF WRITE-INS							
08.301.							
08.302.							
08.303.							
08.398. Summary of remaining write-ins for Line 8.3 from overflow page							
08.399. Totals (Lines 08.301 thru 08.303 plus 08.398) (Line 8.3 above)							
2701.							
2702.							
2703.							
2798. Summary of remaining write-ins for Line 27 from overflow page							
2799. Totals (Lines 2701 thru 2703 plus 2798) (Line 27 above)							

NONE

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

**ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY
ANALYSIS OF OPERATIONS BY LINES OF BUSINESS - ACCIDENT AND HEALTH (a)**

	1 Total	Comprehensive		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefits Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Credit A&H	11 Disability Income	12 Long-Term Care	13 Other Health
		2 Individual	3 Group										
1. Premiums for accident and health contracts	252,206,850				36,566,583	215,626,853							13,414
2. Considerations for supplementary contracts with life contingencies	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3. Net investment income	1,954,762				177,556	1,771,331					2,850		3,024
4. Amortization of Interest Maintenance Reserve (IMR)	5,068				460	4,592					7		8
5. Separate Accounts net gain from operations excluding unrealized gains or losses													
6. Commissions and expense allowances on reinsurance ceded	780,318					780,318							
7. Reserve adjustments on reinsurance ceded													
8. Miscellaneous Income:													
8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts													
8.2 Charges and fees for deposit-type contracts	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
8.3 Aggregate write-ins for miscellaneous income	758,235					758,235							
9. Totals (Lines 1 to 8.3)	255,705,232				36,744,600	218,941,328					2,858		16,446
10. Death benefits	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
11. Matured endowments (excluding guaranteed annual pure endowments)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
12. Annuity benefits	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13. Disability benefits and benefits under accident and health contracts	152,122,106				17,344,851	134,776,609					(192)		837
14. Coupons, guaranteed annual pure endowments and similar benefits													
15. Surrender benefits and withdrawals for life contracts	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
16. Group conversions													
17. Interest and adjustments on contract or deposit-type contract funds	534,812					534,812							
18. Payments on supplementary contracts with life contingencies	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
19. Increase in aggregate reserves for life and accident and health contracts	229,866					500,000							(270,134)
20. Totals (Lines 10 to 19)	152,886,784				17,344,851	135,811,421					(192)		(269,297)
21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only)	27,126,144				4,154,233	22,972,906					15		(1,009)
22. Commissions and expense allowances on reinsurance assumed	(2,152)				22	(2,174)							
23. General insurance expenses	49,839,235				9,576,937	40,254,178							8,120
24. Insurance taxes, licenses and fees, excluding federal income taxes	14,092,579				2,093,892	11,994,632							4,055
25. Increase in loading on deferred and uncollected premiums	736												736
26. Net transfers to or (from) Separate Accounts net of reinsurance													
27. Aggregate write-ins for deductions	15,419				2,170	13,236							13
28. Totals (Lines 20 to 27)	243,958,744				33,172,104	211,044,199					(177)		(257,382)
29. Net gain from operations before dividends to policyholders, and refunds to members and federal income taxes (Line 9 minus Line 28)	11,746,487				3,572,496	7,897,129					3,035		273,828
30. Dividends to policyholders and refunds to members													
31. Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30)	11,746,487				3,572,496	7,897,129					3,035		273,828
32. Federal income taxes incurred (excluding tax on capital gains)	192,415				58,520	129,360					50		4,485
33. Net gain from operations after dividends to policyholders, refunds to members and federal income taxes and before realized capital gains or (losses) (Line 31 minus Line 32)	11,554,072				3,513,976	7,767,769					2,985		269,342
34. Policies/certificates in force end of year	654,394				296,817	357,559							18
DETAILS OF WRITE-INS													
08.301. Interchange fee income	758,235					758,235							
08.302.													
08.303.													
08.398. Summary of remaining write-ins for Line 8.3 from overflow page													
08.399. Totals (Lines 08.301 thru 08.303 plus 08.398) (Line 8.3 above)	758,235					758,235							
2701. Fine and penalties paid to regulatory authorities	15,419				2,170	13,236							13
2702.													
2703.													
2798. Summary of remaining write-ins for Line 27 from overflow page													
2799. Totals (Lines 2701 thru 2703 plus 2798) (Line 27 above)	15,419				2,170	13,236							13

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

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY
ANALYSIS OF INCREASE IN RESERVES DURING THE YEAR - INDIVIDUAL LIFE INSURANCE (a)

	1	2	3	4	5	6	7	8	9	10	11	12
	Total	Industrial Life	Whole Life	Term Life	Indexed Life	Universal Life	Universal Life With Secondary Guarantees	Variable Life	Variable Universal Life	Credit Life ^(b) (N/A Fraternal)	Other Individual Life	YRT Mortality Risk Only
Involving Life or Disability Contingencies (Reserves) (Net of Reinsurance Ceded)												
1. Reserve December 31 of prior year	26,350,652		19,511,791	6,838,861								
2. Tabular net premiums or considerations	5,859,415		2,994,473	2,864,942								
3. Present value of disability claims incurred												
4. Tabular interest	1,164,239		824,639	339,600								
5. Tabular less actual reserve released												
6. Increase in reserve on account of change in valuation basis												
6.1 Change in excess of VM-20 deterministic/stochastic reserve over net premium reserve		XXX								XXX		
7. Other increases (net)												
8. Totals (Lines 1 to 7)	33,374,306		23,330,903	10,043,403								
9. Tabular cost	4,136,406		1,886,418	2,249,988								
10. Reserves released by death	649,389		562,232	87,157								
11. Reserves released by other terminations (net)	1,707,412		859,950	847,462								
12. Annuity, supplementary contract and disability payments involving life contingencies												
13. Net transfers to or (from) Separate Accounts												
14. Total Deductions (Lines 9 to 13)	6,493,207		3,308,600	3,184,607								
15. Reserve December 31 of current year	26,881,099		20,022,303	6,858,796								
Cash Surrender Value and Policy Loans												
16. CSV Ending balance December 31, current year	15,105,366		14,903,087	202,279								
17. Amount Available for Policy Loans Based upon Line 16 CSV	15,105,366		14,903,087	202,279								

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

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

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY
ANALYSIS OF INCREASE IN RESERVES DURING THE YEAR - GROUP LIFE INSURANCE (a)
(N/A Fraternal)

	1	2	3	4	5	6	7	8	9
	Total	Whole Life	Term Life	Variable Life	Universal Life	Variable Universal Life	Credit Life ^(b)	Other Group Life	YRT Mortality Risk Only
Involving Life or Disability Contingencies (Reserves) (Net of Reinsurance Ceded)									
1. Reserve December 31 of prior year	106,689		106,689						
2. Tabular net premiums or considerations	65,110		65,110						
3. Present value of disability claims incurred									
4. Tabular interest	4,794		4,794						
5. Tabular less actual reserve released									
6. Increase in reserve on account of change in valuation basis									
7. Other increases (net)									
8. Totals (Lines 1 to 7)	176,593		176,593						
9. Tabular cost	63,853		63,853						
10. Reserves released by death	8,943		8,943						
11. Reserves released by other terminations (net)	4,520		4,520						
12. Annuity, supplementary contract and disability payments involving life contingencies									
13. Net transfers to or (from) Separate Accounts									
14. Total Deductions (Lines 9 to 13)	77,316		77,316						
15. Reserve December 31 of current year	99,277		99,277						
Cash Surrender Value and Policy Loans									
16. CSV Ending balance December 31, current year									
17. Amount Available for Policy Loans Based upon Line 16 CSV									

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

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

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY
ANALYSIS OF INCREASE IN RESERVES DURING THE YEAR - INDIVIDUAL ANNUITIES (a)

	1 Total	Deferred				6 Life Contingent Payout (Immediate and Annuitizations)	7 Other Annuities
		2 Fixed Annuities	3 Indexed Annuities	4 Variable Annuities with Guarantees	5 Variable Annuities without Guarantees		
Involving Life or Disability Contingencies (Reserves) (Net of Reinsurance Ceded)							
1. Reserve December 31 of prior year	68,715	68,715					
2. Tabular net premiums or considerations							
3. Present value of disability claims incurred	XXX	XXX	XXX	XXX	XXX	XXX	XXX
4. Tabular interest	2,148	2,148					
5. Tabular less actual reserve released							
6. Increase in reserve on account of change in valuation basis							
7. Other increases (net)							
8. Totals (Lines 1 to 7)	70,863	70,863					
9. Tabular cost							
10. Reserves released by death	XXX	XXX	XXX	XXX	XXX	XXX	XXX
11. Reserves released by other terminations (net)	13,329	13,329					
12. Annuity, supplementary contract and disability payments involving life contingencies							
13. Net transfers to or (from) Separate Accounts							
14. Total Deductions (Lines 9 to 13)	13,329	13,329					
15. Reserve December 31 of current year	57,534	57,534					
Cash Surrender Value and Policy Loans							
16. CSV Ending balance December 31, current year	56,242	56,242					
17. Amount Available for Policy Loans Based upon Line 16 CSV							

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

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY
ANALYSIS OF INCREASE IN RESERVES DURING THE YEAR - GROUP ANNUITIES (a)
(N/A Fraternal)

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

NONE

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

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

EXHIBIT OF NET INVESTMENT INCOME

	1 Collected During Year	2 Earned During Year
1. U.S. Government bonds	(a) .....45,777	.....46,023
1.1 Bonds exempt from U.S. tax	(a) .....	.....
1.2 Other bonds (unaffiliated)	(a) .....2,257,522	.....2,518,792
1.3 Bonds of affiliates	(a) .....	.....
2.1 Preferred stocks (unaffiliated)	(b) .....	.....
2.11 Preferred stocks of affiliates	(b) .....	.....
2.2 Common stocks (unaffiliated) .....	.....371	.....371
2.21 Common stocks of affiliates .....	.....	.....
3. Mortgage loans	(c) .....	.....
4. Real estate	(d) .....426,217	.....426,217
5. Contract loans .....	.....81,302	.....79,241
6. Cash, cash equivalents and short-term investments	(e) .....75,657	.....80,907
7. Derivative instruments	(f) .....	.....
8. Other invested assets .....	.....566	.....566
9. Aggregate write-ins for investment income .....	.....4,060	.....4,060
10. Total gross investment income	2,891,472	3,156,178
11. Investment expenses		(g) .....257,264
12. Investment taxes, licenses and fees, excluding federal income taxes		(g) .....71,346
13. Interest expense		(h) .....69
14. Depreciation on real estate and other invested assets		(i) .....123,829
15. Aggregate write-ins for deductions from investment income .....		.....
16. Total deductions (Lines 11 through 15) .....		.....452,508
17. Net investment income (Line 10 minus Line 16)		2,703,669
DETAILS OF WRITE-INS		
0901. Misc Inv Income	4,060	4,060
0902.		
0903.		
0998. Summary of remaining write-ins for Line 9 from overflow page		
0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above)	4,060	4,060
1501.		
1502.		
1503.		
1598. Summary of remaining write-ins for Line 15 from overflow page		
1599. Totals (Lines 1501 thru 1503 plus 1598) (Line 15, above)		

- (a) Includes \$30,467 accrual of discount less \$121,505 amortization of premium and less \$57,870 paid for accrued interest on purchases.
- (b) Includes \$ accrual of discount less \$ amortization of premium and less \$ paid for accrued dividends on purchases.
- (c) Includes \$ accrual of discount less \$ amortization of premium and less \$ paid for accrued interest on purchases.
- (d) Includes \$426,217 for company's occupancy of its own buildings; and excludes \$ interest on encumbrances.
- (e) Includes \$62,420 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 \$123,829 depreciation on real estate and \$ depreciation on other invested assets.

EXHIBIT OF CAPITAL GAINS (LOSSES)

	1	2	3	4	5
	Realized Gain (Loss) On Sales or Maturity	Other Realized Adjustments	Total Realized Capital Gain (Loss) (Columns 1 + 2)	Change in Unrealized Capital Gain (Loss)	Change in Unrealized Foreign Exchange Capital Gain (Loss)
1. U.S. Government bonds					
1.1 Bonds exempt from U.S. tax					
1.2 Other bonds (unaffiliated)	689		689		
1.3 Bonds of affiliates					
2.1 Preferred stocks (unaffiliated)					
2.11 Preferred stocks of affiliates					
2.2 Common stocks (unaffiliated)					
2.21 Common stocks of affiliates					
3. Mortgage loans					
4. Real estate					
5. Contract loans					
6. Cash, cash equivalents and short-term investments	113		113		
7. Derivative instruments					
8. Other invested assets					
9. Aggregate write-ins for capital gains (losses)					
10. Total capital gains (losses)	802		802		
DETAILS OF WRITE-INS					
0901.					
0902.					
0903.					
0998. Summary of remaining write-ins for Line 9 from overflow page					
0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above)					

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

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

	Insurance											11 Aggregate of All Other Lines of Business	12 Fraternal (Fraternal Benefit Societies Only)
	1 Total	2 Industrial Life	3 Ordinary		5 Credit Life (Group and Individual)	6 Group		8 Accident and Health					
			3 Life Insurance	4 Individual Annuities		6 Life Insurance	7 Annuities	8 Group	9 Credit (Group and Individual)	10 Other			
FIRST YEAR (other than single)													
1. Uncollected													
2. Deferred and accrued													
3. Deferred, accrued and uncollected:													
3.1 Direct													
3.2 Reinsurance assumed													
3.3 Reinsurance ceded													
3.4 Net (Line 1 + Line 2)													
4. Advance													
5. Line 3.4 - Line 4													
6. Collected during year:													
6.1 Direct													
6.2 Reinsurance assumed													
6.3 Reinsurance ceded													
6.4 Net													
7. Line 5 + Line 6.4													
8. Prior year (uncollected + deferred and accrued - advance)	17,034		17,034										
9. First year premiums and considerations:													
9.1 Direct	(17,034)		(17,034)										
9.2 Reinsurance assumed													
9.3 Reinsurance ceded													
9.4 Net (Line 7 - Line 8)	(17,034)		(17,034)										
SINGLE													
10. Single premiums and considerations:													
10.1 Direct													
10.2 Reinsurance assumed													
10.3 Reinsurance ceded													
10.4 Net													
RENEWAL													
11. Uncollected	9,412,877		18,234			237		9,645,403			(250,997)		
12. Deferred and accrued	2,310,020		2,309,149			871							
13. Deferred, accrued and uncollected:													
13.1 Direct	11,989,841		2,343,285			1,108		9,645,403			45		
13.2 Reinsurance assumed													
13.3 Reinsurance ceded	266,944		15,902								251,042		
13.4 Net (Line 11 + Line 12)	11,722,897		2,327,383			1,108		9,645,403			(250,997)		
14. Advance	5,053,975		53,874			1,008		4,999,093					
15. Line 13.4 - Line 14	6,668,922		2,273,509			100		4,646,310			(250,997)		
16. Collected during year:													
16.1 Direct	260,568,745		6,464,862			65,205		240,619,785			13,418,893		
16.2 Reinsurance assumed	(1,579)							(1,612)			32		
16.3 Reinsurance ceded	3,095,463		410,774								2,684,689		
16.4 Net	257,471,703		6,054,088			65,205		240,618,173			10,734,237		
17. Line 15 + Line 16.4	264,140,625		8,327,597			65,305		245,264,483			10,483,240		
18. Prior year (uncollected + deferred and accrued - advance)	5,970,427		2,429,359			195		3,854,779			(313,906)		
19. Renewal premiums and considerations:													
19.1 Direct	261,209,911		6,306,074			65,110		241,415,915			13,422,812		
19.2 Reinsurance assumed	(6,194)							(6,211)			17		
19.3 Reinsurance ceded	3,033,519		407,835								2,625,683		
19.4 Net (Line 17 - Line 18)	258,170,198		5,898,238			65,110		241,409,704			10,797,146		
TOTAL													
20. Total premiums and annuity considerations:													
20.1 Direct	261,192,877		6,289,040			65,110		241,415,915			13,422,812		
20.2 Reinsurance assumed	(6,194)							(6,211)			17		
20.3 Reinsurance ceded	3,033,519		407,835								2,625,683		
20.4 Net (Lines 9.4 + 10.4 + 19.4)	258,153,164		5,881,204			65,110		241,409,704			10,797,146		

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

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

	Insurance											
	1	2	Ordinary		5	Group		Accident and Health			11	12
			3	4		6	7	8	9	10		
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	Fraternal (Fraternal Benefit Societies Only)	
POLICYHOLDERS' DIVIDENDS, REFUNDS TO MEMBERS AND COUPONS APPLIED (included in Part 1)												
21. To pay renewal premiums												
22. All other												
REINSURANCE COMMISSIONS AND EXPENSE ALLOWANCES INCURRED												
23. First year (other than single):												
23.1 Reinsurance ceded												
23.2 Reinsurance assumed												
23.3 Net ceded less assumed												
24. Single:												
24.1 Reinsurance ceded												
24.2 Reinsurance assumed												
24.3 Net ceded less assumed												
25. Renewal:												
25.1 Reinsurance ceded	780,318								780,318			
25.2 Reinsurance assumed	(2,255)					(103)		(2,155)	3			
25.3 Net ceded less assumed	782,573					103		2,155	780,314			
26. Totals:												
26.1 Reinsurance ceded (Page 6, Line 6)	780,318								780,318			
26.2 Reinsurance assumed (Page 6, Line 22)	(2,255)					(103)		(2,155)	3			
26.3 Net ceded less assumed	782,573					103		2,155	780,314			
COMMISSIONS INCURRED (direct business only)												
27. First year (other than single)												
28. Single												
29. Renewal	27,134,926		8,782					25,336,598	1,789,546			
30. Deposit-type contract funds												
31. Totals (to agree with Page 6, Line 21)	27,134,926		8,782					25,336,598	1,789,546			

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

EXHIBIT 2 - GENERAL EXPENSES

	Insurance				5 Investment	6 Fraternal	7 Total
	1 Life	2 Accident and Health		4 All Other Lines of Business			
		2 Cost Containment	3 All Other				
1. Rent	26,061		712,268		267		738,596
2. Salaries and wages	1,068,440		30,915,935		106,505		32,090,879
3.11 Contributions for benefit plans for employees	165,099		4,803,196		17,489		4,985,784
3.12 Contributions for benefit plans for agents							
3.21 Payments to employees under non-funded benefit plans							
3.22 Payments to agents under non-funded benefit plans							
3.31 Other employee welfare	2,411		70,144		64		72,619
3.32 Other agent welfare							
4.1 Legal fees and expenses	950		27,647		1,800		30,397
4.2 Medical examination fees	466		13,544				14,010
4.3 Inspection report fees			3,646				3,646
4.4 Fees of public accountants and consulting actuaries	127		3,690		421		4,238
4.5 Expense of investigation and settlement of policy claims	19,942	550,103					570,045
5.1 Traveling expenses	26,204		762,337		488		789,029
5.2 Advertising	2,599		75,604				78,203
5.3 Postage, express, telegraph and telephone	40,575		1,180,445		1,017		1,222,037
5.4 Printing and stationery	8,639		251,344		37		260,020
5.5 Cost or depreciation of furniture and equipment	6,331		184,185		176		190,692
5.6 Rental of equipment	11,273		327,954		19,797		359,023
5.7 Cost or depreciation of EDP equipment and software	47,536		1,382,958		1,086		1,431,580
6.1 Books and periodicals	3,581		104,184		12,889		120,654
6.2 Bureau and association fees	3,462		100,719		430		104,611
6.3 Insurance, except on real estate	1,916		55,753		13		57,683
6.4 Miscellaneous losses	130		3,794				3,925
6.5 Collection and bank service charges	12,867		374,351		280		387,498
6.6 Sundry general expenses	11,134		323,929		1,785		336,848
6.7 Group service and administration fees	135,633	3,731,253	519,926				4,386,812
6.8 Reimbursements by uninsured plans			(312,495)				(312,495)
7.1 Agency expense allowance							
7.2 Agents' balances charged off (less \$ recovered)							
7.3 Agency conferences other than local meetings	117		3,395				3,512
8.1 Official publication (Fraternal Benefit Societies Only)	XXX	XXX	XXX	XXX	XXX		
8.2 Expense of supreme lodge meetings (Fraternal Benefit Societies Only)	XXX	XXX	XXX	XXX	XXX		
9.1 Real estate expenses					84,130		84,130
9.2 Investment expenses not included elsewhere							
9.3 Aggregate write-ins for expenses	118,186		3,669,423		8,591		3,796,200
10. General expenses incurred	1,713,678	4,281,357	45,557,878		257,264	(b)	(a) 51,810,176
11. General expenses unpaid Dec. 31, prior year	5,609		213,174				218,783
12. General expenses unpaid Dec. 31, current year	4,356		870,598				874,954
13. Amounts receivable relating to uninsured plans, prior year			315,372				315,372
14. Amounts receivable relating to uninsured plans, current year			320,020				320,020
15. General expenses paid during year (Lines 10+11-12-13+14)	1,714,931	4,281,357	44,905,102		257,264		51,158,654
DETAILS OF WRITE-INS							
09.301. CAE Changes			209,642				209,642
09.302. Repairs & Maintenance	12,909		375,570		2,434		390,913
09.303. Fees for Outsourcing Services	105,277		3,084,211		6,157		3,195,645
09.398. Summary of remaining write-ins for Line 9.3 from overflow page							
09.399. Totals (Lines 09.301 thru 09.303 plus 09.398) (Line 9.3 above)	118,186		3,669,423		8,591		3,796,200

(a) Includes management fees of \$ 48,773,619 to affiliates and \$ to non-affiliates.

(b) Show the distribution of this amount in the following categories (Fraternal Benefit Societies Only):

1. Charitable \$; 2. Institutional \$; 3. Recreational and Health \$; 4. Educational \$; 5. Religious \$; 6. Membership \$; 7. Other \$; 8. Total \$

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

	Insurance			4 Investment	5 Fraternal	6 Total
	1 Life	2 Accident and Health	3 All Other Lines of Business			
1. Real estate taxes				67,817		67,817
2. State insurance department licenses and fees	34,200	1,231,172				1,265,372
3. State taxes on premiums	163,421	6,339,224				6,502,645
4. Other state taxes, including \$ for employee benefits	2,025	71,987				74,012
5. U.S. Social Security taxes	59,725	1,765,960		3,529		1,829,215
6. All other taxes	14,892	4,684,236				4,699,128
7. Taxes, licenses and fees incurred	274,263	14,092,579		71,346		14,438,188
8. Taxes, licenses and fees unpaid Dec. 31, prior year	77,583	2,217,841				2,295,424
9. Taxes, licenses and fees unpaid Dec. 31, current year	31,529	1,620,083				1,651,612
10. Taxes, licenses and fees paid during year (Lines 7 + 8 - 9)	320,317	14,690,337		71,346		15,082,000

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

NONE

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY
EXHIBIT 5 - AGGREGATE RESERVE FOR LIFE CONTRACTS

1	2	3	4	5	6
Valuation Standard	Total ^(a)	Industrial	Ordinary	Credit (Group and Individual)	Group
0100001. 1980 CSO ALB 4.00% IPC CRVM	3,843,841		3,843,841		
0100002. 1980 CSO ALB 4.50% IPC CRVM	4,320,966		4,320,966		
0100003. 1980 CSO ALB 5.00% IPC CRVM	53,267		53,267		
0100004. 1980 CSO ALB 5.50% IPC CRVM	21,774		21,774		
0100005. 1980 CSO ALB 6.00% IPC CRVM	2,480		2,480		
0100006. 2001 CSO ALB 3.50% IPC CRVM	2,647,047		2,647,047		
0100007. 2001 CSO ALB 4.00% IPC CRVM	11,609,024		11,609,024		
0100008. 2001 CSO ALB 4.50% IPC CRVM	929,031		929,031		
0100009. 1980 CET ALB 4.00% IPC CRVM	5,105		5,105		
0100010. 1980 CET ALB 4.50% IPC CRVM	7,849		7,849		
0100011. 1980 CET ALB 5.50% IPC CRVM	32,578		32,578		
0100012. 1980 CET ALB 6.00% IPC CRVM	2,752		2,752		
0100013. 1980 CSO ALB 5.50% IPC NLP	1		1		
0100014. 1980 CSO ALB 6.00% IPC NLP	86		86		
0100015. SUBSTANDARD	103,068		102,548		520
0100016. HALF GROSS PREMIUM-NURSING HOME RIDER	3,633		3,633		
0100017. UNEARNED PREMIUM-CHILD RIDER	20		20		
0100018. UNEARNED PREMIUM-LONG TERM CARE BENEFITS	731		731		
0100019. UNEARNED PREMIUM-GROUP LIFE	87,839				87,839
0199997. Totals (Gross)	23,671,091		23,582,732		88,359
0199998. Reinsurance ceded	665,029		665,029		
0199999. Life Insurance: Totals (Net)	23,006,062		22,917,703		88,359
0200001. 1983A 5.00% CARVM	33,554	XXX	33,554	XXX	
0200002. 1983A 5.25% CARVM	15,729	XXX	15,729	XXX	
0200003. 1983A 5.50% CARVM	8,252	XXX	8,252	XXX	
0299997. Totals (Gross)	57,534	XXX	57,534	XXX	
0299998. Reinsurance ceded		XXX		XXX	
0299999. Annuities: Totals (Net)	57,534	XXX	57,534	XXX	
0399998. Reinsurance ceded					
0399999. SCWLC: Totals (Net)					
0400001. 1959 ADB W/ 1980 CSO ALB 4.0% IPC FPT	38,932		38,556		377
0400002. 1959 ADB W/ 1980 CSO ALB 4.5% IPC FPT	115,556		109,638		5,918
0400003. 1959 ADB W/ 1980 CSO ALB 5.0% IPC FPT	8,538		8,538		
0400004. 1959 ADB W/ 1980 CSO ALB 5.5% IPC FPT	3,007		3,007		
0400005. 1959 ADB W/ 2001 CSO ALB 3.5% IPC FPT	47,253		47,008		245
0400006. 1959 ADB W/ 2001 CSO ALB 4.0% IPC FPT	85,310		84,842		468
0499997. Totals (Gross)	298,595		291,588		7,007
0499998. Reinsurance ceded					
0499999. Accidental Death Benefits: Totals (Net)	298,595		291,588		7,007
0500001. 2005 GTLW 4.0%	10,646				10,646
0599997. Totals (Gross)	10,646				10,646
0599998. Reinsurance ceded					
0599999. Disability-Active Lives: Totals (Net)	10,646				10,646
0699998. Reinsurance ceded					
0699999. Disability-Disabled Lives: Totals (Net)					
0700001. DEFICIENCY RESERVES	131,045		131,045		
0700002. NON-DEDUCTION RESERVES	1,144,478		1,144,468		10
0700003. ADDITIONAL ACTUARIAL RESERVE- ASSET ADEQUACY ANALYSIS	2,500,000		2,500,000		
0799997. Totals (Gross)	3,775,523		3,775,513		10
0799998. Reinsurance ceded	110,450		103,705		6,745
0799999. Miscellaneous Reserves: Totals (Net)	3,665,073		3,671,808		(6,735)
9999999. Totals (Net) - Page 3, Line 1	27,037,910		26,938,633		99,277

(a) Included in the above table are amounts of deposit-type contracts that originally contained a mortality risk. Amounts of deposit-type contracts in Column 2 that no longer contain a mortality risk are Life Insurance \$; Annuities \$; Supplementary Contracts with Life Contingencies \$; Accidental Death Benefits \$; Disability - Active Lives \$; Disability - Disabled Lives \$; Miscellaneous Reserves \$

EXHIBIT 5 - INTERROGATORIES

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

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

1 Description of Valuation Class	Valuation Basis		4 Increase in Actuarial Reserve Due to Change
	2 Changed From	3 Changed To	
NONE			
9999999 - Total (Column 4, only)			

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

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

	1 Total	Comprehensive		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefits Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Credit A&H	11 Disability Income	12 Long-Term Care	13 Other Health
		2 Individual	3 Group										
ACTIVE LIFE RESERVE													
1. Unearned premium reserves	650												650
2. Additional contract reserves (b)	143												143
3. Additional actuarial reserves-Asset/Liability analysis	7,400,000					7,400,000							
4. Reserve for future contingent benefits													
5. Reserve for rate credits													
6. Aggregate write-ins for reserves													
7. Totals (Gross)	7,400,793					7,400,000							793
8. Reinsurance ceded													
9. Totals (Net)	7,400,793					7,400,000							793
CLAIM RESERVE													
10. Present value of amounts not yet due on claims													
11. Additional actuarial reserves-Asset/Liability analysis													
12. Reserve for future contingent benefits													
13. Aggregate write-ins for reserves													
14. Totals (Gross)													
15. Reinsurance ceded													
16. Totals (Net)													
17. TOTAL (Net)	7,400,793					7,400,000							793
18. TABULAR FUND INTEREST													
DETAILS OF WRITE-INS													
0601.													
0602.													
0603.													
0698. Summary of remaining write-ins for Line 6 from overflow page													
0699. TOTALS (Lines 0601 thru 0603 plus 0698) (Line 6 above)													
1301.													
1302.													
1303.													
1398. Summary of remaining write-ins for Line 13 from overflow page													
1399. TOTALS (Lines 1301 thru 1303 plus 1398) (Line 13 above)													

(a) Indicate if blocks of business in run-off that comprise less than 5% of premiums and less than 5% of reserve and loans liability are aggregated with material blocks of business and which columns are affected.
 (b) Attach statement as to valuation standard used in calculating this reserve, specifying reserve bases, interest rates and methods.

EXHIBIT 6 – ATTACHMENT

STATEMENT OF METHODS AND BASIS
ACTIVE LIFE RESERVES LINE 2 PART A
EXHIBIT 6 – 2020 CONVENTION BLANK

ISSUES PRIOR TO January 1, 2009

MORTALITY:	1980 CSO
INTEREST:	4.0-4.5%
METHOD:	2 Year Full Preliminary Term
MORBIDITY:	1959 ADB Table
	1974 Hospital Table

EXHIBIT 7 - DEPOSIT TYPE CONTRACTS

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

NONE

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY
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											
1.2 Reinsurance assumed											
1.3 Reinsurance ceded											
1.4 Net											
2. In course of settlement:											
2.1 Resisted											
2.11 Direct											
2.12 Reinsurance assumed											
2.13 Reinsurance ceded											
2.14 Net			(b)	(b)		(b)	(b)				
2.2 Other											
2.21 Direct	1,006,910		984,410				22,500				
2.22 Reinsurance assumed											
2.23 Reinsurance ceded	170,000		170,000								
2.24 Net	836,910		(b) 814,410	(b)		(b)	(b) 22,500	(b)	(b)	(b)	
3. Incurred but unreported:											
3.1 Direct	11,291,204		136,594						10,525,346		629,264
3.2 Reinsurance assumed	277								277		
3.3 Reinsurance ceded	114,492										114,492
3.4 Net	11,176,989		(b) 136,594	(b)		(b)	(b)	(b)	10,525,623	(b)	(b) 514,772
4. TOTALS											
4.1 Direct	12,298,114		1,121,004				22,500		10,525,346		629,264
4.2 Reinsurance assumed	277								277		
4.3 Reinsurance ceded	284,492		170,000								114,492
4.4 Net	12,013,899	(a)	(a) 951,004				(a) 22,500		10,525,623		514,772

(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).

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY
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	162,864,855		5,112,111	13,329		125,000		149,698,551		7,915,864	
1.2 Reinsurance assumed	5,211							4,546		665	
1.3 Reinsurance ceded	1,726,201		423,150							1,303,051	
1.4 Net (d)	161,143,864		4,688,961	13,329		125,000		149,703,097		6,613,477	
2. Liability December 31, current year from Part 1:											
2.1 Direct	12,298,114		1,121,004			22,500		10,525,346		629,264	
2.2 Reinsurance assumed	277							277			
2.3 Reinsurance ceded	284,492		170,000							114,492	
2.4 Net	12,013,899		951,004			22,500		10,525,623		514,772	
3. Amounts recoverable from reinsurers December 31, current year	320,023									320,023	
4. Liability December 31, prior year:											
4.1 Direct	16,245,544		979,894			10,000		14,252,645		1,003,005	
4.2 Reinsurance assumed	2,164							1,448		716	
4.3 Reinsurance ceded	246,681		60,000							186,681	
4.4 Net	16,001,027		919,894			10,000		14,254,093		817,040	
5. Amounts recoverable from reinsurers December 31, prior year	195,193		38,900							156,293	
6. Incurred Benefits											
6.1 Direct	158,917,425		5,253,221	13,329		137,500		145,971,252		7,542,123	
6.2 Reinsurance assumed	3,324							3,375		(51)	
6.3 Reinsurance ceded	1,888,843		494,250							1,394,593	
6.4 Net	157,031,906		4,758,971	13,329		137,500		145,974,627		6,147,479	

(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 \$0 in Line 1.1, \$0 in Line 1.4.
 \$0 in Line 6.1, and \$0 in Line 6.4.

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

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

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

EXHIBIT OF NON-ADMITTED ASSETS

	1	2	3
	Current Year Total Nonadmitted Assets	Prior Year Total Nonadmitted Assets	Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1. Bonds (Schedule D)			
2. Stocks (Schedule D):			
2.1 Preferred stocks			
2.2 Common stocks			
3. Mortgage loans on real estate (Schedule B):			
3.1 First liens			
3.2 Other than first liens			
4. Real estate (Schedule A):			
4.1 Properties occupied by the company			
4.2 Properties held for the production of income			
4.3 Properties held for sale			
5. Cash (Schedule E - Part 1), cash equivalents (Schedule E - Part 2) and short-term investments (Schedule DA)			
6. Contract loans			
7. Derivatives (Schedule DB)			
8. Other invested assets (Schedule BA)			
9. Receivables for securities			
10. Securities lending reinvested collateral assets (Schedule DL)			
11. Aggregate write-ins for invested assets			
12. Subtotals, cash and invested assets (Lines 1 to 11)			
13. Title plants (for Title insurers only)			
14. Investment income due and accrued			
15. Premiums and considerations:			
15.1 Uncollected premiums and agents' balances in the course of collection	1,024,747	0	(1,024,747)
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due ..			
15.3 Accrued retrospective premiums and contracts subject to redetermination			
16. Reinsurance:			
16.1 Amounts recoverable from reinsurers			
16.2 Funds held by or deposited with reinsured companies			
16.3 Other amounts receivable under reinsurance contracts			
17. Amounts receivable relating to uninsured plans			
18.1 Current federal and foreign income tax recoverable and interest thereon			
18.2 Net deferred tax asset			
19. Guaranty funds receivable or on deposit			
20. Electronic data processing equipment and software	157,804	413,809	256,005
21. Furniture and equipment, including health care delivery assets	280,075	344,746	64,672
22. Net adjustment in assets and liabilities due to foreign exchange rates			
23. Receivables from parent, subsidiaries and affiliates			
24. Health care and other amounts receivable	8,132	0	(8,132)
25. Aggregate write-ins for other than invested assets	172,319	43,726	(128,593)
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	1,643,077	802,281	(840,796)
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts			
28. Total (Lines 26 and 27)	1,643,077	802,281	(840,796)
DETAILS OF WRITE-INS			
1101.			
1102.			
1103.			
1198. Summary of remaining write-ins for Line 11 from overflow page			
1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)			
2501. Interest maintenance reserve	50,101	43,726	(6,375)
2502. Miscellaneous amounts receivable	122,218	0	(122,218)
2503.			
2598. Summary of remaining write-ins for Line 25 from overflow page			
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	172,319	43,726	(128,593)

NOTES TO FINANCIAL STATEMENTS

1. Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

The financial statements of Starmount Life Insurance Company (the Company) have been completed in accordance with Statutory Accounting Principles (SAP) prescribed in the National Association of Insurance Commissioners' (NAIC) *Accounting Practices and Procedures* manual. The Maine Bureau of Insurance (the Bureau) has adopted no accounting practices that differ materially from SAP.

	<u>SSAP #</u>	<u>F/S Page</u>	<u>F/S Line #</u>	<u>12/31/2020</u>	<u>12/31/2019</u>
<u>NET INCOME</u>					
(1) The Company's state basis (Page 4, Line 35, Columns 1 & 2)	XXX	XXX	XXX	\$ 10,584,981	\$ (14,327,679)
(2) State Prescribed Practices that are an increase/ (decrease) from NAIC SAP				—	—
(3) State Permitted Practices that are an increase/ (decrease) from NAIC SAP				—	—
(4) NAIC SAP (1-2-3=4)	XXX	XXX	XXX	<u>\$ 10,584,981</u>	<u>\$ (14,327,679)</u>
<u>SURPLUS</u>					
(5) The Company's state basis (Page 3, Line 38, Columns 1 & 2)	XXX	XXX	XXX	\$ 74,283,354	\$ 49,038,420
(6) State Prescribed Practices that are an increase/ (decrease) from NAIC SAP				—	—
(7) State Permitted Practices that are an increase/ (decrease) from NAIC SAP				—	—
(8) NAIC SAP (5-6-7=8)	XXX	XXX	XXX	<u>\$ 74,283,354</u>	<u>\$ 49,038,420</u>

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

The preparation of financial statements in conformity with SAP requires management to make estimates and assumptions that affect amounts reported in the financial statements and accompanying notes. Such estimates and assumptions could change in the future as more information becomes known, particularly when considering the risks and uncertainties associated with the coronavirus disease 2019 (COVID-19), which could impact the amounts reported and disclosed herein.

C. Accounting Policy

Life and accident and health premiums are recognized as revenue when due from policyholders. Expenses incurred in connection with acquiring new insurance business, including acquisition costs such as sales commissions, are charged to operations as incurred.

Real estate is carried at cost less accumulated depreciation and less encumbrances.

Contract loans are stated at the aggregate unpaid balance.

In addition, the Company uses the following accounting policies:

- (1) Short-term investments and cash equivalents are carried at cost.
- (2) Long-term bonds classified as issuer obligations are generally carried at amortized cost unless they have a NAIC designation of 6, in which case they are stated at the lower of amortized cost or fair value. Issuer obligations are amortized using the interest method.
- (3) Common stock of the Federal Home Loan Bank (FHLB) is carried at cost, which approximates fair value.
- (4) Not applicable

NOTES TO FINANCIAL STATEMENTS

- (5) Not applicable
- (6) Loan-backed and structured securities are stated at either amortized cost or the lower of amortized cost or fair value. Amortization of mortgage-backed and loan-backed securities considers the estimated timing and amount of prepayments of the underlying loans at the date of purchase. Actual prepayment experience is periodically reviewed with significant changes in estimated cash flows from the original purchase assumptions accounted for using the retrospective method.
- (7) Not applicable
- (8) Not applicable
- (9) Not applicable
- (10) The Company considers anticipated investment income in its review of reserves for potential premium deficiencies.
- (11) Liabilities for losses and loss/claim adjustment expenses for accident and health contracts are estimated using statistical claim development models and tabular reserves employing assumptions concerning mortality, morbidity, and social security as well as appropriate discount rates for accident and health business.
- (12) The Company's fixed asset capitalization policy has not changed from the prior period.
- (13) Not applicable

D. Going Concern

After evaluating the Company's ability to continue as a going concern, management was not aware of any conditions or events which raised substantial doubts concerning the Company's ability to continue as a going concern as of the date these financial statements were issued.

2. Accounting Changes and Corrections of Errors

During 2020, the Company reviewed its reserve for advance premiums and changed its estimate of the tax deductibility to 80 percent, as allowed by Subchapter L of the Internal Revenue Code, resulting in a tax benefit recognized in operating earnings of \$985,176. Additionally, the Company changed its presentation of the components of its deferred tax assets and liabilities to further delineate items relating to policyholder reserves and deferred premium reserves. The changes in accounting are prospective and result in changes to the gross deferred tax assets and liabilities, but result in no change in the admission of deferred tax assets or the valuation allowance.

3. Business Combinations and Goodwill

Not applicable

4. Discontinued Operations

Not applicable

5. Investments

- A. Not applicable
- B. Not applicable
- C. Not applicable
- D. Loan-Backed Securities
 - (1) Prepayment assumptions for mortgage-backed/loan-backed and structured securities were obtained from broker dealer survey values and internal estimates.
 - (2) Not applicable
 - (3) Not applicable
 - (4) As of December 31, 2020, the Company had no impaired securities (fair value is less than cost or amortized cost) for which an other-than-temporary impairment had not been recognized in earnings as a realized loss (including securities with a recognized other-than-temporary impairment for non-interest related declines when a non-recognized interest related impairment remains).

NOTES TO FINANCIAL STATEMENTS

(5) In determining when a decline in fair value below amortized cost of a security is other than temporary, the Company evaluates the following factors:

- Whether the Company expects to recover the entire amortized cost basis of the security.
- Whether the Company intends to sell the security or will be required to sell the security before the recovery of its amortized cost basis.
- Whether the security is current as to principal and interest payments.
- The significance of the decline in value.
- The time period during which there has been a significant decline in value.
- Current and future business prospects and trends of earnings.
- The valuation of the security's underlying collateral.
- Relevant industry conditions and trends relative to their historical cycles.
- Market conditions.
- Rating agency and governmental actions.
- Bid and offering prices and the level of trading activity.
- Adverse changes in estimated cash flows for securitized investments.
- Changes in fair value subsequent to the balance sheet date.
- Any other key measures for the related security.

The Company evaluates available information, including the factors noted above, both positive and negative, in reaching its conclusions. In particular, the Company also considers the strength of the issuer's balance sheet, its debt obligations and near term funding requirements, cash flow and liquidity, the profitability of its core businesses, the availability of marketable assets which could be sold to increase liquidity, its industry fundamentals and regulatory environment, and its access to capital markets. Although all available and applicable factors are considered in the analysis, the expectation of recovering the entire amortized cost basis of the security, whether the Company intends to sell the security, whether it is more likely than not the Company will be required to sell the security before recovery of its amortized cost, and whether the security is current on principal and interest payments are the most critical factors in determining whether impairments are other than temporary. The significance of the decline in value and the length of time during which there has been a significant decline are also important factors, but the Company does not record an impairment loss based solely on these two factors, since often other factors will impact the evaluation of a security.

While determining other-than-temporary impairments is a judgmental area, the Company utilizes a formal, well-defined, and disciplined process to monitor and evaluate its investments, supported by issuer specific research and documentation as of the end of each period. The process results in a thorough evaluation of problem investments and the recording of realized losses on a timely basis for investments determined to have an other-than-temporary impairment.

- E. Not applicable
- F. Not applicable
- G. Not applicable
- H. Not applicable
- I. Not applicable
- J. Not applicable
- K. Not applicable

NOTES TO FINANCIAL STATEMENTS

L. Restricted Assets

(1) Restricted Assets (Including Pledged)

Restricted Asset Category	Gross (Admitted & Nonadmitted) Restricted						
	December 31, 2020					6	7
	1	2	3	4	5		
	Total General Account (G/A)	G/A Supporting S/A Activity (a)	Total Separate Account (S/A) Restricted Assets	S/A Assets Supporting G/A Activity (b)	Total (1 plus 3)	Total From Prior Year	Increase/ (Decrease) (5 minus 6)
a. Subject to contractual obligation for which liability is not shown	\$ —	\$ —	\$ —	\$ —	\$ —	\$ —	\$ —
b. Collateral held under security lending agreements	—	—	—	—	—	—	—
c. Subject to repurchase agreements	—	—	—	—	—	—	—
d. Subject to reverse repurchase agreements	—	—	—	—	—	—	—
e. Subject to dollar repurchase agreements	—	—	—	—	—	—	—
f. Subject to dollar reverse repurchase agreements	—	—	—	—	—	—	—
g. Placed under option contracts	—	—	—	—	—	—	—
h. Letter stock or securities restricted as to sale - excluding FHLB capital stock	—	—	—	—	—	—	—
i. FHLB Capital Stock	10,000	—	—	—	10,000	38,200	(28,200)
j. On deposit with states	2,913,263	—	—	—	2,913,263	3,003,894	(90,631)
k. On deposit with other regulatory bodies	—	—	—	—	—	—	—
l. Pledged as collateral to FHLB (including assets backing funding agreements)	—	—	—	—	—	—	—
m. Pledged as collateral not captured in other categories	—	—	—	—	—	—	—
n. Other restricted assets	—	—	—	—	—	—	—
o. Total Restricted Assets	\$ 2,923,263	\$ —	\$ —	\$ —	\$ 2,923,263	\$ 3,042,094	\$ (118,831)

- (a) Subset of column 1
- (b) Subset of column 3

NOTES TO FINANCIAL STATEMENTS

Restricted Asset Category	December 31, 2020			
	8	9	10	11
	Percentage			
	Total Nonadmitted Restricted	Total Admitted Restricted (5 minus 8)	Gross (Admitted & Nonadmitted) Restricted to Total Assets (c)	Admitted Restricted to Total Admitted Assets (d)
a. Subject to contractual obligation for which liability is not shown	\$ —	\$ —	— %	— %
b. Collateral held under security lending agreements	—	—	—	—
c. Subject to repurchase agreements	—	—	—	—
d. Subject to reverse repurchase agreements	—	—	—	—
e. Subject to dollar repurchase agreements	—	—	—	—
f. Subject to dollar reverse repurchase agreements	—	—	—	—
g. Placed under option contracts	—	—	—	—
h. Letter stock or securities restricted as to sale - excluding FHLB capital stock	—	—	—	—
i. FHLB Capital Stock	—	10,000	—	—
j. On deposit with states	—	2,913,263	2.2	2.2
k. On deposit with other regulatory bodies	—	—	—	—
l. Pledged as collateral to FHLB (including assets backing funding agreements)	—	—	—	—
m. Pledged as collateral not captured in other categories	—	—	—	—
n. Other restricted assets	—	—	—	—
o. Total Restricted Assets	\$ —	\$ 2,923,263	2.2	2.2

(c) Column 5 divided by Asset Page, Column 1, Line 28

(d) Column 9 divided by Asset Page, Column 3, Line 28

(2) Not applicable

(3) Not applicable

(4) Not applicable

M. Not applicable

N. Not applicable

O. Not applicable

P. Not applicable

Q. Prepayment Penalty and Acceleration Fees

	2020	
	General Account	Separate Account
(1) Number of CUSIPs	2	—
(2) Aggregate Amount of Investment Income	\$ 37,119	\$ —

6. Joint Ventures, Partnerships and Limited Liability Companies

Not applicable

7. Investment Income

A. The Company does not accrue investment income on bonds and mortgage loans where collection of interest is uncertain.

B. The Company did not exclude any amounts from investment income due and accrued as of December 31, 2020.

8. Derivative Instruments

A. Not applicable

B. Not applicable

9. Income Taxes

A. During 2020, the Company reviewed its reserve for advance premiums and changed its estimate of the tax deductibility to 80 percent, as allowed by Subchapter L of the Internal Revenue Code, resulting in a tax benefit recognized in operating earnings of \$985,176. Additionally, the Company changed its presentation of the components of its deferred tax assets and liabilities to further delineate items relating to policyholder reserves and deferred premium reserves. The changes in accounting are prospective and result in changes to the gross deferred tax assets and liabilities, but result in no change in the admission of deferred tax assets or the valuation allowance. Prior year amounts have not been reclassified for these changes in accounting estimates.

The components of the net deferred tax assets (liabilities) and change from prior year are comprised of the following:

1.	December 31, 2020			December 31, 2019			Change		
	1 Ordinary	2 Capital	3 (Col 1 + 2) Total	4 Ordinary	5 Capital	6 (Col 4 + 5) Total	7 (Col 1 - 4) Ordinary	8 (Col 2 - 5) Capital	9 (Col 7 + 8) Total
(a) Gross Deferred Tax Assets	4,285,158	444,654	4,729,812	6,542,462	454,601	6,997,063	(2,257,304)	(9,947)	(2,267,251)
(b) Statutory Valuation Allowance Adjustment	3,351,201	440,035	3,791,236	6,107,775	453,204	6,560,979	(2,756,574)	(13,169)	(2,769,743)
(c) Adjusted Gross Deferred Tax Assets (1a - 1b)	933,957	4,619	938,576	434,687	1,397	436,084	499,270	3,222	502,492
(d) Deferred Tax Assets Nonadmitted	—	—	—	—	—	—	—	—	—
(e) Subtotal Net Admitted Deferred Tax Assets (1c - 1d)	933,957	4,619	938,576	434,687	1,397	436,084	499,270	3,222	502,492
(f) Deferred Tax Liabilities	933,957	4,619	938,576	434,687	1,397	436,084	499,270	3,222	502,492
(g) Net Admitted Deferred Tax Assets (1e - 1f)	—	—	—	—	—	—	—	—	—

The deferred tax asset admitted under each component of SSAP No. 101 is shown below:

2.	December 31, 2020			December 31, 2019			Change		
	1 Ordinary	2 Capital	3 (Col 1 + 2) Total	4 Ordinary	5 Capital	6 (Col 4 + 5) Total	7 (Col 1 - 4) Ordinary	8 (Col 2 - 5) Capital	9 (Col 7 + 8) Total
Admission Calculation Components SSAP No. 101									
(a) Federal Income Taxes Paid in Prior Years Recoverable through Loss Carrybacks	—	—	—	—	—	—	—	—	—
(b) Adjusted Gross Deferred Tax Assets Expected to be Realized (Excluding the Amount of Deferred Tax Assets from 2(a) Above) After Application of the Threshold Limitation (the Lesser of 2(b)1 and 2(b)2 Below)	—	—	—	—	—	—	—	—	—
1. Adjusted Gross Deferred Tax Assets Expected to be Realized Following the Balance Sheet Date	—	—	—	—	—	—	—	—	—
2. Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold	XXX	XXX	11,069,847	XXX	XXX	6,585,855	XXX	XXX	4,483,992
(c) Adjusted Gross Deferred Tax Assets (Excluding the Amount of Deferred Tax Assets from 2(a) and 2(b) Above) Offset by Gross Deferred Tax Liabilities	933,957	4,619	938,576	434,687	1,397	436,084	499,270	3,222	502,492
(d) Deferred Tax Assets Admitted as the Result of Application of SSAP No. 101 Total (2(a) + 2(b) + 2(c))	933,957	4,619	938,576	434,687	1,397	436,084	499,270	3,222	502,492

NOTES TO FINANCIAL STATEMENTS

3.	2020	2019
(a) Ratio Percentage Used to Determine Recovery Period and Threshold Limitation Amount	846.1 %	519.0 %
(b) Amount of Adjusted Capital and Surplus Used to Determine Recovery Period and Threshold Limitation in 2(b)2 Above	\$ 73,798,977	\$ 43,905,697

4. Impact of Tax Planning Strategies

(a) The Company did not use tax planning strategies in 2020 or 2019 to admit existing deferred tax assets.

(b) Do the Company's tax-planning strategies include the use of reinsurance? Yes [] No [X]

B. Not applicable

NOTES TO FINANCIAL STATEMENTS

C. The components of income tax incurred and the net deferred tax assets (liabilities) are shown below:

	Year Ended December 31		
	2020	2019	Change
1. Current Income Tax			
(a) Federal	\$ 168,296	\$ —	\$ 168,296
(b) Foreign	—	—	—
(c) Subtotal	168,296	—	168,296
(d) Federal Income Tax Expense (Benefit) on Net Capital Gains (Losses)	9,947	—	9,947
(e) Utilization of Capital Loss Carryforwards	(9,947)	—	(9,947)
(f) Other	—	86,815	(86,815)
(g) Federal Income Tax Incurred	<u>\$ 168,296</u>	<u>\$ 86,815</u>	<u>\$ 81,481</u>

The Company includes prior year tax amounts net of tax loss contingencies in Line 1(f) - Other in the table above.

	December 31		
	2020	2019	Change
2. Deferred Tax Assets			
(a) Ordinary			
(1) Discounting of Unpaid Losses	\$ 78,925	\$ 1,449,000	\$ (1,370,075)
(2) Unearned Premium Reserve	209,962	—	209,962
(3) Policyholder Reserves	2,884,754	2,082,064	802,690
(4) Investments	9,974	10,212	(238)
(5) Deferred Acquisition Costs	436,727	456,793	(20,066)
(6) Policyholder Dividends Accrual	—	—	—
(7) Fixed Assets	—	—	—
(8) Compensation and Benefits Accrual	—	—	—
(9) Pension Accrual	—	—	—
(10) Receivables - Nonadmitted	242,570	—	242,570
(11) Net Operating Loss Carryforward	—	2,118,441	(2,118,441)
(12) Tax Credit Carryforward	—	—	—
(13) Other			
(a) Tax Reform Reserve Strengthening	291,672	350,007	(58,335)
(b) Other (including items < 5% of total ordinary tax assets)	130,574	75,945	54,629
(99) Subtotal	<u>4,285,158</u>	<u>6,542,462</u>	<u>(2,257,304)</u>
(b) Statutory Valuation Allowance Adjustment	3,351,201	6,107,775	(2,756,574)
(c) Nonadmitted	—	—	—
(d) Admitted Ordinary Deferred Tax Assets (2a99 - 2b - 2c)	<u>933,957</u>	<u>434,687</u>	<u>499,270</u>
(e) Capital			
(1) Investments	—	—	—
(2) Net Capital Loss Carryforward	129,263	139,210	(9,947)
(3) Real Estate	315,391	315,391	—
(4) Other (including items < 5% of total capital tax assets)	—	—	—
(99) Subtotal	<u>444,654</u>	<u>454,601</u>	<u>(9,947)</u>
(f) Statutory Valuation Allowance Adjustment	440,035	453,204	(13,169)
(g) Nonadmitted	—	—	—
(h) Admitted Capital Deferred Tax Assets (2e99 - 2f - 2g)	<u>4,619</u>	<u>1,397</u>	<u>3,222</u>
(i) Admitted Deferred Tax Assets (2d + 2h)	<u>938,576</u>	<u>436,084</u>	<u>502,492</u>

NOTES TO FINANCIAL STATEMENTS

3. Deferred Tax Liabilities

(a) Ordinary

(1) Investments	5,910	4,656	1,254
(2) Fixed Assets	277,923	326,004	(48,081)
(3) Deferred and Uncollected Premium	488,943	—	488,943
(4) Policyholder Reserves	—	—	—
(5) Other			
(a) Reserve Reduction	59,194	—	59,194
(b) Premium Tax Credits	101,987	104,027	(2,040)
(99) Subtotal	933,957	434,687	499,270

(b) Capital

(1) Investments	4,619	1,397	3,222
(2) Real Estate	—	—	—
(3) Other (including items < 5% of total capital tax liabilities)	—	—	—
(99) Subtotal	4,619	1,397	3,222

(c) Deferred Tax Liabilities (3a99 + 3b99)

	938,576	436,084	502,492
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4. Net Deferred Tax Assets (2i - 3c)

	\$ —	\$ —	\$ —
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- D. The provision for federal income tax incurred differs from the amount obtained by applying the federal statutory rate of 21 percent to pre-tax net income, as shown below.

	Year Ended December 31			
	2020		2019	
Provision Computed at Statutory Rate	\$ 2,258,188	21.0 %	\$ (2,990,581)	21.0 %
Valuation Allowance	(2,769,743)	(25.8)	3,379,487	(23.7)
Affordable Care Act Assessment	863,251	8.0	—	—
Change in Non Admitted Assets	(175,228)	(1.6)	40,106	(0.3) %
Prior Year Taxes	—	—	101,840	(0.7)
Reserve through Surplus	—	—	(420,000)	2.9
Other	(8,172)	(0.1)	(24,037)	0.1 %
Total	\$ 168,296	1.5 %	\$ 86,815	(0.7)%
Federal Income Tax Incurred	\$ 168,296	1.5 %	\$ 86,815	(0.7)%
Change in Net Deferred Income Tax	—	—	—	—
Total Statutory Income Tax	\$ 168,296	1.5 %	\$ 86,815	(0.7)%

- E. The Company had an operating loss carryforward of \$10,087,816 at December 31, 2019, all of which was utilized during the year ended December 31, 2020. The Company's capital loss carryforward was \$615,538 and \$662,902 at December 31, 2020 and 2019, respectively, most of which will expire in 2022, with the remaining in 2024. During both 2019 and 2020, the Company has recorded a valuation allowance against its net deferred tax asset as a result of its recent cumulative losses.

The Company has no tax expense available for recoupment in the event of future net losses.

- F. The Company will file a separate federal income tax return for five years as required by the Internal Revenue Service following a change in ownership of a life insurance company. The Company will be eligible to be included in the consolidated federal income tax return with its parent company, Unum Group, in 2022.

As of December 31, 2020 and 2019, the Company had no tax related balance outstanding with either H & J Capital, LLC or Unum Group.

Tax years subsequent to 2016 remain subject to examination by tax authorities in the U.S.

- G. The Company does not anticipate a significant increase to a loss contingency for income taxes in the next 12 months.

H. Not applicable

I. Not applicable

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

- A. Nature of the Relationship: Starmount Life Insurance Company is a wholly-owned subsidiary of H&J Capital, L.L.C. (HJC), a wholly-owned subsidiary of Unum Group. See Schedule Y - Part 1 for a complete listing of affiliates.

NOTES TO FINANCIAL STATEMENTS

- B. During 2020, the Company received a capital contribution from HJC of \$15,700,000 on March 11. During 2019, the Company received capital contributions from HJC of \$3,000,000, \$3,000,000, \$6,000,000 and \$8,000,000 on March 29, June 26, September 27, and December 31, respectively.

The short-term, intercompany lending activities of the Company are listed below:

Borrowing Entity	Lending Entity	Date Borrowed	Amount Borrowed	Date Repaid	Interest Paid
The Company	Unum Group	12/18/20	\$ 2,500,000	12/21/20	\$ 23

- C. Not applicable
- D. Amounts reported on pages 2 and 3 herein as receivables from or payables to parent, subsidiaries, and affiliates result from normal, ongoing business processes and are settled in full on a monthly basis.
- E. Not applicable
- F. The Company receives from its affiliates certain administrative, investment, and actuarial services, the cost of which was negotiated in an arm's-length transaction.
- G. All outstanding shares of the Company are owned by HJC, a non-insurance holding company organized in Louisiana, which is a wholly-owned subsidiary of Unum Group, a non-insurance holding company incorporated in Delaware. Various other affiliates are under the ownership of Unum Group, but all transactions between affiliates are arm's-length in nature and do not result in the operating results or financial position of the Company being significantly different from those that would have been obtained if the enterprises were autonomous.
- H. Not applicable
- I. Not applicable
- J. Not applicable
- K. Not applicable
- L. Not applicable
- M. Not applicable
- N. Not applicable
- O. Not applicable

11. Debt

- A. Not applicable
- B. FHLB (Federal Home Loan Bank) Agreements
- (1) & (2) During the second quarter 2020, the Company transferred its membership from the FHLB of Dallas to the FHLB of Boston due to a change in state registration. The Company did not have any outstanding funding agreements as of December 31, 2020 or December 31, 2019. If the Company enters into funding agreements, the Company will use those funds in an investment spread strategy, consistent with its other investment spread programs and will record the funds under SSAP No. 52, *Deposit Type Contracts*, consistent with its accounting for other deposit type contracts. It is not part of the Company's strategy to utilize these funds for operations, and any funds obtained from the FHLB of Boston for use in general operations would be accounted for under SSAP No. 15, *Debt and Holding Company Obligations*, as borrowed money. The outstanding Class B membership stock balance as of December 31, 2020 was \$10,000, none of which is eligible for redemption. The outstanding Class B membership stock balance as of December 31, 2019, was \$38,200 of which \$500 was in excess of minimum capital stock requirement.
- (3) Not applicable
- (4) Not applicable

12. Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans

- A. Not applicable

NOTES TO FINANCIAL STATEMENTS

- B. Not applicable
- C. Not applicable
- D. Not applicable
- E. Not applicable
- F. Not applicable
- G. The Company purchases services from its affiliates in accordance with an intercompany cost sharing arrangement. There is no material obligation on the part of the Company beyond the amounts paid as part of the cost of services purchased.
- H. Not applicable
- I. Not applicable

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

- A. The Company has 40,000 shares authorized, issued and outstanding. Par value is \$75 per share.
- B. The Company has no preferred stock outstanding.
- C. The maximum amount of dividends which can be paid to shareholders by Maine domiciled insurance companies without prior approval by the Bureau is subject to restrictions relating to (i) the greater of 10 percent of an insurer's surplus as regards policyholders as of the preceding year end or the net gain from operations of the preceding year, (ii) dividends being declared within five years after any acquisition of control of a domestic insurer or its ultimate controlling person (unless approved by a number of continuing directors equal to a majority of the directors in office immediately preceding that acquisition of control), and (iii) payment not being made entirely from unassigned funds, where 50 percent of the net of unrealized capital gains and unrealized capital losses, reduced, but not to less than zero, by that portion of the asset valuation reserve attributable to equity investments, must be excluded from the calculation of unassigned funds.
- D. During 2020 and 2019, the Company paid no dividends.
- E. The portion of the Company's profits that may be payable as ordinary dividends to its stockholders is a function of the dividend restriction previously noted.
- F. Not applicable
- G. Not applicable
- H. Not applicable
- I. The decline in special surplus is driven by the repeal of the ACA assessment beginning in 2021.
- J. The Company's unassigned funds (surplus) are not represented or reduced by any cumulative gains and losses as of December 31, 2020.
- K. Not applicable
- L. Not applicable
- M. Not applicable

14. Liabilities, Contingencies and Assessments

- A. Not applicable
- B. Assessments
 - (1) The Company accrues in its financial statements estimates of guaranty fund assessments based on known insolvencies and historical Company state participation levels. A corresponding receivable is recorded for amounts estimated to be recoverable through future state premium tax offsets. Based on notifications the Company has received regarding the insolvency of various external companies, the Company recognized a liability in previous years, the balance of which is \$360,869 at December 31, 2020. The Company cannot determine the periods over which the assessments are expected to be paid.
 - (2) The change in the guaranty asset balance summarized below reflects estimated premium tax offsets of new insolvencies accrued for during 2020, revised estimated premium tax offsets for existing insolvencies based on revised estimated cost

NOTES TO FINANCIAL STATEMENTS

information provided by the National Organization of Life and Health Guaranty Associations, and an adjustment for premium tax offsets used.

Rollforward of Related Asset	December 31, 2020
a. Assets recognized from paid and accrued premium tax offsets and policy surcharges prior year-end	\$ 495,369
b. Decreases current year:	
Premium tax offset applied	55,017
c. Increases current year:	
Change in cost estimate	45,298
d. Assets recognized from paid and accrued premium tax offsets and policy surcharges current year-end	\$ 485,650

(3) Not applicable

C. Not applicable

D. The Company had no claims related extra contractual obligation losses or bad faith losses stemming from lawsuits.

E. Not applicable

F. Unum Group and its insurance subsidiaries, including the Company (collectively, the Group), are defendants in a number of litigation matters. Further, state insurance regulatory authorities and other federal and state authorities regularly make inquiries and conduct investigations concerning the Group's compliance with applicable insurance and other laws and regulations. Given the complexity and scope of the Group's litigation and regulatory matters, it is not possible to predict the ultimate outcome of all pending investigations or legal proceedings or provide reasonable estimates of potential losses, except if noted in connection with specific matters.

In some of these matters, no specified amount is sought. In others, very large or indeterminate amounts, including punitive and treble damages, are asserted. There is a wide variation of pleading practice permitted in the United States courts with respect to requests for monetary damages, including some courts in which no specified amount is required and others which allow the plaintiff to state only that the amount sought is sufficient to invoke the jurisdiction of that court. Further, some jurisdictions permit plaintiffs to allege damages well in excess of reasonably possible verdicts. Based on extensive experience and that of others in the industry with respect to litigating or resolving claims through settlement over an extended period of time, the Group believes that the monetary damages asserted in a lawsuit or claim bear little relation to the merits of the case, or the likely disposition value. Therefore, the specific monetary relief sought is not stated.

Unless indicated otherwise in the descriptions below, reserves have not been established for litigation and contingencies. An estimated loss is accrued when it is both probable that a liability has been incurred and the amount of the loss can be reasonably estimated.

Claims Handling Matters

The Company, in the ordinary course of its business, is engaged in claim litigation where disputes arise as a result of a denial or termination of benefits. Most typically these lawsuits are filed on behalf of a single claimant or policyholder, and in some of these individual actions punitive damages are sought, such as claims alleging bad faith in the handling of insurance claims. For its general claim litigation, the Company maintains reserves based on experience to satisfy judgments and settlements in the normal course. Management expects that the ultimate liability, if any, with respect to general claim litigation, after consideration of the reserves maintained, will not be material to the financial condition of the Company. Nevertheless, given the inherent unpredictability of litigation, it is possible that an adverse outcome in certain claim litigation involving punitive damages could, from time to time, have a material adverse effect on the Company's results of operations in a period, depending on the results of operations of the Company for the particular period. The Company is unable to estimate the range of reasonably possible punitive losses.

From time to time class action allegations are pursued where the claimant or policyholder purports to represent a larger number of individuals who are similarly situated. Since each insurance claim is evaluated based on its own merits, there is rarely a single act or series of actions, which can properly be addressed by a class action. Nevertheless, these cases are monitored closely and the Company defends itself appropriately where these allegations are made.

NOTES TO FINANCIAL STATEMENTS

Miscellaneous Matters

Similar to other insurers, the Group was recently the subject of an examination by a third party acting on behalf of a number of state treasurers concerning its compliance with the unclaimed property laws of the participating states. The Group cooperated fully with this examination, and in the fourth quarter of 2017, started the process to reach a Global Resolution Agreement with the third party regarding settlement of the examination, which was finalized in January of 2018. Under the terms of the agreement, the third party acting on behalf of the signatory states compared insured data to the Social Security Administration's Death Master File to identify deceased insureds and contract holders where a valid claim has not been made. During the fourth quarter of 2017, the Group established reserves which reflect its estimate of the liability expected to be paid as it executes on the terms of the settlement. The Group is also cooperating with a Delaware Market Conduct examination involving the same issue which is currently inactive. The legal and regulatory environment around unclaimed death benefits continues to evolve. It is possible that the current settlement and/or similar investigations by other state jurisdictions may result in payments to beneficiaries, the payment of abandoned funds under state law, and/or administrative penalties, the total of which may be in excess of the reserves established.

Unum Group's U.S. insurance subsidiaries are examined periodically by their states of domicile and by other states in which they are licensed to conduct business. The domestic examinations have traditionally emphasized financial matters from the perspective of protection of policyholders, but they can and have covered other subjects that an examining state may be interested in reviewing, such as market conduct issues, reserve adequacy, sales practices, advertising materials, licensing and appointing of agents and brokers, underwriting, data security and identification and handling of unclaimed property. The domestic regulators of Unum Group's U.S. insurance subsidiaries, including the Company, have conducted, and recently concluded, coordinated routine risk based financial examinations as of December 31, 2018. No material findings were identified related to the Company.

15. Leases

A. Lessee Leasing Arrangements

(1) The Company leases office space under various noncancelable operating leases under terms that expire through 2023. Rent expense in 2020 and 2019 was \$197,793 and \$185,052, respectively. Sublease rental income was \$51,630 in 2020. The Company had no sublease rental income in 2019. The Company had no contingent rentals or liability for early lease terminations as of December 31, 2020.

(2) At December 31, 2020, the minimum aggregate rental commitments are as follows:

	Year Ending December 31	Operating Leases
1.	2021	\$ 199,428
2.	2022	\$ 199,428
3.	2023	\$ 30,708
4.	2024	\$ —
5.	2025	\$ —
6.	Total	\$ 429,564

(3) Not applicable

B. Lessor Leases

Not applicable

16. Information About Financial Instruments With Off-Balance Sheet Risk and Financial Instruments With Concentrations of Credit Risk

Not applicable

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

Not applicable

18. Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans

Not applicable

NOTES TO FINANCIAL STATEMENTS

19. Direct Premium Written/Produced by Managing General Agents/Third Party Administrators

There were no direct premiums written through managing general agents and third party administrators for the year ending December 31, 2020.

20. Fair Value Measurements

The fair values of the Company's financial instruments are categorized into a three-level classification. The lowest level input that is significant to the fair value measurement of a financial instrument is used to categorize the instrument and reflects the judgment of management. The valuation criterion for each level is summarized as follows:

- Level 1 - Inputs are unadjusted and represent quoted prices in active markets for identical assets or liabilities at the measurement date.
- Level 2 - Inputs (other than quoted prices included in Level 1) are either directly or indirectly observable for the asset or liability through correlation with market data at the measurement date and for the duration of the instrument's anticipated life. Level 2 inputs include, for example, indicative prices obtained from brokers or pricing services validated to other observable market data and quoted prices for similar assets or liabilities.
- Level 3 - Inputs reflect the Company's best estimate of what market participants would use in pricing the asset or liability at the measurement date. Financial assets and liabilities categorized as Level 3 are generally based on prices or valuation techniques that require inputs that are both unobservable and significant to the overall fair value measurement. The inputs reflect the Company's estimates about the assumptions that market participants would use in pricing the instrument in a current period transaction.

See section C for further discussion of the Company's valuation methods and techniques.

A. Not applicable

B. Not applicable

C. Presented as follows are the fair values, admitted values, and categorization by input level of financial instruments held at the reporting date. The admitted values of financial instruments such as cash and cash equivalents, accounts and premiums receivable, accrued investment income, borrowed money, payable for securities lending, and short-term payables approximate fair value due to the short-term nature of the instruments. As such, these financial instruments are not included in the following charts.

December 31, 2020							
Types of Financial Instruments	Aggregate Fair Value	Admitted Values	Level 1	Level 2	Level 3	Net Asset Value (NAV)	Not Practicable (Carrying Value)
Admitted Assets							
Bonds	\$ 95,708,244	\$ 87,261,347	\$ 30,667,984	\$ 65,040,085	\$ 175	\$ —	\$ —
Common Stock	10,000	10,000	—	10,000	—	—	—
Contract Loans	1,699,621	1,035,557	—	—	1,699,621	—	—
December 31, 2019							
Types of Financial Instruments	Aggregate Fair Value	Admitted Values	Level 1	Level 2	Level 3	Net Asset Value (NAV)	Not Practicable (Carrying Value)
Admitted Assets							
Bonds	\$ 51,210,314	\$ 48,303,567	\$ 13,032,400	\$ 38,177,499	\$ 415	\$ —	\$ —
Common Stock	38,200	38,200	—	—	38,200	—	—
Contract Loans	1,406,770	967,522	—	—	1,406,770	—	—

The following methods and assumptions were used in estimating the fair values of the Company's financial instruments.

Bonds: Fair values are based on quoted market prices, where available. For bonds not actively traded, fair values are estimated using values obtained from independent pricing services. For private placements, the Company either obtains prices from independent third-party brokers to establish valuations for certain of these securities or uses fair values that are estimated using analyses of similar bonds adjusted for comparability.

Common Stock: FHLB stock valued at cost, which approximates fair value.

NOTES TO FINANCIAL STATEMENTS

Contract Loans: Fair values are estimated using discounted cash flow analyses and interest rates currently being offered to policyholders with similar policies.

Fair values for the Company's insurance contracts other than investment contracts are not required to be disclosed. However, the fair values of liabilities under all insurance contracts are taken into consideration in the Company's overall management of interest rate risk, which minimizes exposure to changing interest rates through the matching of investment maturities with amounts due under insurance contracts.

Fair value is defined as the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date and, therefore, represents an exit price, not an entry price. The exit price objective applies regardless of a reporting entity's intent and/or ability to sell the asset or transfer the liability at the measurement date.

The degree of judgment utilized in measuring the fair value of financial instruments generally correlates to the level of pricing observability. Financial instruments with readily available active quoted prices or for which fair value can be measured from actively quoted prices in active markets generally have more pricing observability and less judgment utilized in measuring fair value. An active market for a financial instrument is a market in which transactions for an asset or a similar asset occur with sufficient frequency and volume to provide pricing information on an ongoing basis. A quoted price in an active market provides the most reliable evidence of fair value and should be used to measure fair value whenever available. Conversely, financial instruments rarely traded or not quoted have less observability and are measured at fair value using valuation techniques that require more judgment. Pricing observability is generally impacted by a number of factors, including the type of financial instrument, whether the financial instrument is new to the market and not yet established, the characteristics specific to the transaction, and overall market conditions.

Valuation techniques used for assets and liabilities accounted for at fair value are generally categorized into three types. The market approach uses prices and other relevant information from market transactions involving identical or comparable assets or liabilities. The income approach converts future amounts, such as cash flows or earnings, to a single present amount, or a discounted amount. The cost approach is based upon the amount that currently would be required to replace the service capacity of an asset, or the current replacement cost.

The Company uses valuation techniques that are appropriate in the circumstances and for which sufficient data are available that can be obtained without undue cost and effort. In some cases, a single valuation technique will be appropriate (for example, when valuing an asset or liability using quoted prices in an active market for identical assets or liabilities). In other cases, multiple valuation techniques will be appropriate. If the Company uses multiple valuation techniques to measure fair value, it evaluates and weighs the results, as appropriate, considering the reasonableness of the range indicated by those results. A fair value measurement is the point within that range that is most representative of fair value in the circumstances.

The selection of the valuation method(s) to apply considers the definition of an exit price and depends on the nature of the asset or liability being valued. The Company generally uses valuation techniques consistent with the market approach, and to a lesser extent, the income approach. The Company believes the market approach provides more observable data than the income approach, considering the type of investments the Company holds. The Company's fair value measurements could differ significantly based on the valuation technique and available inputs. When using a pricing service, the Company obtains the vendor's pricing documentation to ensure the Company understands their methodologies. The Company periodically reviews and approves the selection of its pricing vendors to ensure the Company is in agreement with their current methodologies. When markets are less active, brokers may rely more on models with inputs based on the information available only to the broker. The Company's internal investment management professionals, which include portfolio managers and analysts, monitor securities priced by brokers and evaluate their prices for reasonableness based on benchmarking to available primary and secondary market information. In weighing a broker quote as an input to fair value, the Company places less reliance on quotes that do not reflect the result of market transactions. The Company also considers the nature of the quote, particularly whether it is a bid or market quote. If prices in an inactive market do not reflect current prices for the same or similar assets, adjustments may be necessary to arrive at fair value. When relevant market data is unavailable, which may be the case during periods of market uncertainty, the income approach can, in suitable circumstances, provide a more appropriate fair value. During 2020, the Company has applied valuation approaches and techniques on a consistent basis to similar assets and liabilities and consistent with those approaches and techniques used at year end 2019.

The Company uses observable and unobservable inputs in measuring the fair value of its financial instruments. Inputs that may be used include the following:

- Broker market maker prices and price levels
- Trade Reporting and Compliance Engine (TRACE) pricing
- Prices obtained from external pricing services

NOTES TO FINANCIAL STATEMENTS

- Benchmark yields (Treasury and interest rate swap curves)
- Transactional data for new issuance and secondary trades
- Security cash flows and structures
- Recent issuance/supply
- Sector and issuer level spreads
- Security credit ratings/maturity/capital structure/optionality
- Corporate actions
- Underlying collateral
- Prepayment speeds/loan performance/delinquencies/weighted average life/seasoning
- Public covenants
- Comparative bond analysis
- Relevant reports issued by analysts and rating agencies
- Audited financial statements

The management of the Company's investment portfolio includes establishing pricing policy and reviewing the reasonableness of sources and inputs used in developing pricing. The Company reviews all prices that vary between multiple pricing vendors by a threshold that is outside a normal market range for the asset type. In the event the Company receives a vendor's market price that does not appear reasonable based on its market analysis, the Company may challenge the price and request further information about the assumptions and methodologies used by the vendor to price the security. The Company may change the vendor price based on a better data source such as an actual trade. The Company also reviews all prices that did not change from the prior month to ensure that these prices are within our expectations. The overall valuation process for determining fair values may include adjustments to valuations obtained from the Company's pricing sources when they do not represent a valid exit price. These adjustments may be made when, in the Company's judgment and considering its knowledge of the financial conditions and industry in which the issuer operates, certain features of the financial instrument require that an adjustment be made to the value originally obtained from the Company's pricing sources. These features may include the complexity of the financial instrument, the market in which the financial instrument is traded, credit structure, concentration, or liquidity. Additionally, an adjustment to the price derived from a model typically reflects the Company's judgment of the inputs that other participants in the market for the financial instrument being measured at fair value would consider in pricing that same financial instrument. In the event an asset is sold, the Company tests the validity of the fair value determined by its valuation techniques by comparing the selling price to the fair value determined for the asset in the immediately preceding month end reporting period closest to the transaction date.

The parameters and inputs used to validate a price on a security may be adjusted for assumptions about risk and current market conditions on a quarter to quarter basis, as certain features may be more significant drivers of valuation at the time of pricing. Changes to inputs in valuations are not changes to valuation methodologies; rather, the inputs are modified to reflect direct or indirect impacts on asset classes from changes in market conditions.

Certain of the Company's investments do not have readily determinable market prices and/or observable inputs or may at times be affected by the lack of market liquidity. For these securities, the Company uses internally prepared valuations, including valuations based on estimates of future profitability, to estimate the fair value. Additionally, the Company may obtain prices from independent third-party brokers to aid in establishing valuations for certain of these securities. Key assumptions used to determine fair value for these securities include risk free interest rates, risk premiums, performance of underlying collateral (if any), and other factors involving significant assumptions which may or may not reflect those of an active market.

The Company considers transactions in inactive or disorderly markets to be less representative of fair value. The Company uses all available observable inputs when measuring fair value, but when significant other unobservable inputs and adjustments are necessary, it classifies these assets or liabilities as Level 3.

D. Not applicable

E. Not applicable

21. Other Items

Not applicable

22. Events Subsequent

Subsequent events were evaluated through the time at which the financial statements were issued on February 22, 2021. The Company is not aware of any events subsequent to December 31, 2020 that could have a material effect on its financial condition.

NOTES TO FINANCIAL STATEMENTS

23. Reinsurance

A. Ceded Reinsurance Report

Section 1 - General Interrogatories

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

Yes () No ()

If yes, give full details.

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

Yes () No ()

If yes, give full details.

Section 2 - Ceded Reinsurance Report - Part A

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

Yes () No ()

- a. If yes, what is the estimated amount of the aggregate reduction in surplus of a unilateral cancellation by the reinsurer as of the date of this statement, for those agreements in which cancellation results in a net obligation of the company to the reinsurer, and for which such obligation is not presently accrued? Where necessary, the company may consider the current or anticipated experience of the business reinsured in making this estimate. \$ _____
- b. What is the total amount of reinsurance credits taken, whether as an asset or as a reduction of liability, for these agreements in this statement? \$ _____

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

Yes () No ()

If yes, give full details.

Section 3 - Ceded Reinsurance Report - Part B

- (1) What is the estimated amount of the aggregate reduction in surplus, (for agreements other than those under which the reinsurer may unilaterally cancel for reasons other than for nonpayment of premium or other similar credits that are reflected in Section 2 above) of termination of ALL reinsurance agreements, by either party, as of the date of this statement? Where necessary, the company may consider the current or anticipated experience of the business reinsured in making this estimate.

None

- (2) Have any new agreements been executed or existing agreements amended, since January 1 of the year of this statement, to include policies or contracts that were in force or which had existing reserves established by the company as of the effective date of the agreement? \$ _____

Yes () No ()

If yes, what is the amount of reinsurance credits, whether an asset or a reduction of liability, taken for such new agreements or amendments?

B. Uncollectible Reinsurance:

Not applicable

C. Commutation of Ceded Reinsurance:

Not applicable

NOTES TO FINANCIAL STATEMENTS

D. Certified Reinsurer Rating Downgrade or Status Subject to Revocation

Not applicable

E. Not applicable

F. Not applicable

G. Not applicable

H. Not applicable

24. Retrospectively Rated Contracts & Contracts Subject to Redetermination

Not applicable

25. Change in Incurred Losses and Loss Adjustment Expenses

- A. As of December 31, 2019, reserves for unpaid claim and claim adjustment expenses attributable to claims incurred on or before that date were \$15,071,133. For the twelve months ended December 31, 2020, \$11,468,450 had been paid for incurred claims and claim adjustment expenses attributable to claims incurred in prior years. As of December 31, 2020, reserves remaining for prior years were \$40,394 as a result of re-estimation of unpaid claims and claim adjustment expenses, principally on accident and health policies. Therefore, there has been a favorable prior year development of \$3,562,289 for the period December 31, 2019 to December 31, 2020. The decrease is generally the result of ongoing analysis of recent loss development trends. Original estimates are increased or decreased as additional information becomes known regarding individual claims.
- B. There were no significant changes in methodologies and assumptions used in calculating the liability for unpaid losses and loss adjustment expenses.

26. Intercompany Pooling Arrangements

Not applicable

27. Structured Settlements

Not applicable

28. Health Care Receivables

Not applicable

29. Participating Policies

Not applicable

30. Premium Deficiency Reserves

- | | |
|---|--------------------|
| 1. Liability Carried for Premium Deficiency Reserves | <u>\$7,400,000</u> |
| 2. Date of the Most Recent Evaluation of this Liability | 12/31/2020 |
| 3. Was Anticipated Investment Income Utilized in the Calculation? | Yes |

31. Reserves for Life Contracts and Annuity Contracts

- (1) The Company waives deduction of deferred fractional premiums upon death of the insured and returns any portion of the final premium beyond the date of death. Surrender values are not promised in excess of legally computed reserves.
- (2) The extra reserve on annual premium policies subject to an extra premium is one-half the extra annual gross premium. The extra reserve for single premium policies subject to an extra premium is one-half the extra gross single premium. The rating-up in age method and liens are not used by the Company.
- (3) As of December 31, 2020, the Company had \$35,337,200 of insurance in force for which the gross premiums are less than the net premiums according to the standard valuation required by the State of Maine. Reserves to cover the above insurance totaled the gross amount of \$131,045 at year-end and are reported in Exhibit 5, Life Insurance and Annuities sections.
- (4) The tabular interest, tabular less actual reserve released, and tabular cost have each been determined by formula as described in the instructions.

NOTES TO FINANCIAL STATEMENTS

(5) Not applicable

32. Analysis of Annuity Actuarial Reserves and Deposit-Type Contract Liabilities by Withdrawal Characteristics

A. INDIVIDUAL ANNUITIES:

	General Account	Separate Account with Guarantees	Separate Account Nonguaranteed	Total	Percent of Total
(1) Subject to discretionary withdrawal:					
a. With market value adjustment	\$ —	\$ —	\$ —	\$ —	— %
b. At book value less current surrender charge of 5% or more	—	—	—	—	—
c. At fair value	—	—	—	—	—
d. Total with market value adjustment or at fair value (total of a through c)	—	—	—	—	—
e. At book value without adjustment (minimal or no charge or adjustment)	57,534	—	—	57,534	100.0
(2) Not subject to discretionary withdrawal	—	—	—	—	—
(3) Total (Gross: Direct + Assumed)	57,534	—	—	57,534	<u>100.0 %</u>
(4) Reinsurance ceded	—	—	—	—	
(5) Total (net) * (3) – (4)	<u>\$ 57,534</u>	<u>\$ —</u>	<u>\$ —</u>	<u>\$ 57,534</u>	
(6) Amount included in A(1)b above that will move to A(1)e for the first time within the year after the statement date:	\$ —	\$ —	\$ —	\$ —	

B. Not applicable

C. Not applicable

	Amount
D. Life & Accident & Health Annual Statement:	
(1) Exhibit 5, Annuities Section, Total (net)	\$ 57,534
(2) Exhibit 5, Supplementary Contracts with Life Contingencies Section, Total (net)	—
(3) Exhibit 7, Deposit-Type Contracts, Line 14, Column 1	—
(4) Subtotal	<u>57,534</u>
Separate Accounts Annual Statement:	
(5) Exhibit 3, Line 0299999, Column 2	—
(6) Exhibit 3, Line 0399999, Column 2	—
(7) Policyholder Dividend and Coupon Accumulations	—
(8) Policyholder Premiums	—
(9) Guaranteed Interest Contracts	—
(10) Other Contract Deposit Funds	—
(11) Subtotal	—
(12) Combined Total	<u>\$ 57,534</u>

NOTES TO FINANCIAL STATEMENTS

33. Analysis of Life Actuarial Reserves by Withdrawal Characteristics

	Account Value	Cash Value	Reserve
A. General Account			
(1) Subject to discretionary withdrawal, surrender values, or policy loans:			
a. Term Policies with Cash Value	\$ —	\$ 202,279	\$ 1,149,480
b. Universal Life	—	—	—
c. Universal Life with Secondary Guarantees	—	—	—
d. Indexed Universal Life	—	—	—
e. Indexed Universal Life with Secondary Guarantees	—	—	—
f. Indexed Life	—	—	—
g. Other Permanent Cash Value Life Insurance	—	15,938,644	19,507,406
h. Variable Life	—	—	—
i. Variable Universal Life	—	—	—
j. Miscellaneous Reserves	—	—	648,522
(2) Not subject to discretionary withdrawal or no cash values			
a. Term Policies without Cash Value	XXX	XXX	3,014,205
b. Accidental Death Benefits	XXX	XXX	298,595
c. Disability - Active Lives	XXX	XXX	10,646
d. Disability - Disabled Lives	XXX	XXX	—
e. Miscellaneous Reserves	XXX	XXX	3,127,001
(3) Total (gross: direct + assumed)	—	16,140,923	27,755,856
(4) Reinsurance Ceded		29,892	775,479
(5) Total (net) (3) - (4)	\$ —	\$ 16,111,031	\$ 26,980,377
B. Separate Account with Guarantees			
(1) Subject to discretionary withdrawal, surrender values, or policy loans:			
a. Term Policies with Cash Value	\$ —	\$ —	\$ —
b. Universal Life	—	—	—
c. Universal Life with Secondary Guarantees	—	—	—
d. Indexed Universal Life	—	—	—
e. Indexed Universal Life with Secondary Guarantees	—	—	—
f. Indexed Life	—	—	—
g. Other Permanent Cash Value Life Insurance	—	—	—
h. Variable Life	—	—	—
i. Variable Universal Life	—	—	—
j. Miscellaneous Reserves	—	—	—
(2) Not subject to discretionary withdrawal or no cash values			
a. Term Policies without Cash Value	XXX	XXX	—
b. Accidental Death Benefits	XXX	XXX	—
c. Disability - Active Lives	XXX	XXX	—
d. Disability - Disabled Lives	XXX	XXX	—
e. Miscellaneous Reserves	XXX	XXX	—
(3) Total (gross: direct + assumed)	—	—	—
(4) Reinsurance Ceded	—	—	—
(5) Total (net) (3) - (4)	\$ —	\$ —	\$ —

NOTES TO FINANCIAL STATEMENTS

	Account Value	Cash Value	Reserve
C. Separate Account Nonguaranteed			
(1) Subject to discretionary withdrawal, surrender values, or policy loans:			
a. Term Policies with Cash Value	\$ —	\$ —	\$ —
b. Universal Life	—	—	—
c. Universal Life with Secondary Guarantees	—	—	—
d. Indexed Universal Life	—	—	—
e. Indexed Universal Life with Secondary Guarantees	—	—	—
f. Indexed Life	—	—	—
g. Other Permanent Cash Value Life Insurance	—	—	—
h. Variable Life	—	—	—
i. Variable Universal Life	—	—	—
j. Miscellaneous Reserves	—	—	—
(2) Not subject to discretionary withdrawal or no cash values			
a. Term Policies without Cash Value	XXX	XXX	—
b. Accidental Death Benefits	XXX	XXX	—
c. Disability - Active Lives	XXX	XXX	—
d. Disability - Disabled Lives	XXX	XXX	—
e. Miscellaneous Reserves	XXX	XXX	—
(3) Total (gross: direct + assumed)	—	—	—
(4) Reinsurance Ceded	—	—	—
(5) Total (net) (3) - (4)	<u>\$ —</u>	<u>\$ —</u>	<u>\$ —</u>

	Amount
D.	
Life & Accident & Health Annual Statement:	
(1) Exhibit 5, Life Insurance Section, Total (net)	\$ 23,006,062
(2) Exhibit 5, Accidental Death Benefits Section, Total (net)	298,595
(3) Exhibit 5, Disability – Active Lives Section, Total (net)	10,646
(4) Exhibit 5, Disability – Disabled Lives Section, Total (net)	—
(5) Exhibit 5, Miscellaneous Reserves Section, Total (net)	3,665,073
(6) Subtotal	<u>26,980,376</u>
Separate Accounts Annual Statement:	
(7) Exhibit 3, Line 0199999, Column 2	—
(8) Exhibit 3, Line 0499999, Column 2	—
(9) Exhibit 3, Line 0599999, Column 2	—
(10) Subtotal (Lines (7) through (9))	—
(11) Combined Total ((6) and (10))	<u>\$ 26,980,376</u>

34. Premium & Annuity Considerations Deferred and Uncollected

Deferred and uncollected life insurance premiums as of December 31, 2020 were as follows:

Type	Gross	Net of Loading
(1) Industrial	\$ —	\$ —
(2) Ordinary new business	1,680	—
(3) Ordinary renewal	2,325,703	2,070,712
(4) Credit Life	—	—
(5) Group Life	1,108	823
(6) Group Annuity	—	—
(7) Total	<u>\$ 2,328,491</u>	<u>\$ 2,071,535</u>

35. Separate Accounts

Not applicable

NOTES TO FINANCIAL STATEMENTS

36. Loss/Claim Adjustment Expenses

The liability for unpaid accident and health claim adjustment expenses as of December 31, 2020 and 2019 was \$209,642 and \$0, respectively.

The Company incurred \$3,206,409 and paid \$2,996,767 of claim adjustment expenses during 2020, of which \$220,094 of the paid amount was attributable to insured or covered events of prior years. The Company did not increase or decrease the provision for insured events of prior years.

The Company took into account estimated anticipated salvage and subrogation in its determination of the liability for unpaid claims/losses. There was no material value to the estimated salvage and subrogation.

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
If yes, complete Schedule Y, Parts 1, 1A and 2
- 1.2 If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent, or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations? Yes No N/A
- 1.3 State Regulating? Maine
- 1.4 Is the reporting entity publicly traded or a member of a publicly traded group? Yes No
- 1.5 If the response to 1.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group. 0000005513
- 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. 12/31/2018
- 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. 12/31/2018
- 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). 06/30/2020
- 3.4 By what department or departments?
Maine
- 3.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? Yes No N/A
- 3.6 Have all of the recommendations within the latest financial examination report been complied with? Yes No N/A
- 4.1 During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity), receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:
4.11 sales of new business? Yes No
4.12 renewals? Yes No
- 4.2 During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:
4.21 sales of new business? Yes No
4.22 renewals? Yes No
- 5.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? Yes No
If yes, complete and file the merger history data file with the NAIC.
- 5.2 If yes, provide the name of the entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has 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 or government, manager or attorney in fact).

1 Nationality	2 Type of Entity

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

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 below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.

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

9. What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?
Ernst & Young LLP
1110 Main Street, Suite 216
Chattanooga, TN 37402, USA
- 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 18A 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 [] N/A []
- 10.6 If the response to 10.5 is no or n/a, please explain
.....
11. What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification?
Cynthia R. Stark, FSA, MAAA
Vice President, Corporate Actuarial and Appointed Actuary
2211 Congress St.
Portland, ME 04122
- 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 []
- 13.3 Have there been any changes made to any of the trust indentures during the year? Yes [] No []
- 13.4 If answer to (13.3) is yes, has the domiciliary or entry state approved the changes? Yes [] No [] N/A []
- 14.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? Yes [X] No []
- a. Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
b. Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
c. Compliance with applicable governmental laws, rules and regulations;
d. The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
e. Accountability for adherence to the code.
- 14.11 If the response to 14.1 is No, please explain:
.....
- 14.2 Has the code of ethics for senior managers been amended? Yes [X] No []
- 14.21 If the response to 14.2 is yes, provide information related to amendment(s).
In the first quarter of 2020, Unum made a few minor adjustments to the Code of Conduct which included hyperlink updates, renamed policies and links, and contact name changes.
- 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

- 15.1 Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance where the issuing or confirming bank is not on the SVO Bank List? 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

BOARD OF DIRECTORS

16. Is the purchase or sale of all investments of the reporting entity passed upon either by the board of directors or a 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 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 the end of year (inclusive of Separate Accounts, exclusive of policy loans):
- 20.21 To directors or other officers.....\$
 - 20.22 To stockholders not officers.....\$
 - 20.23 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 [X] No []
- 23.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: \$ 6,347,536

INVESTMENT

- 24.01 Were all the stocks, bonds and other securities owned December 31 of current year, over which the reporting entity has exclusive control, in the actual possession of the reporting entity on said date? (other than securities lending programs addressed in 24.03) Yes [] No [X]
- 24.02 If no, give full and complete information relating thereto
All other stocks and bonds are held in the Company's custodial accounts at JPMorgan Chase Bank, New York, NY.
- 24.03 For securities 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)
N/A
- 24.04 For the reporting entity's securities lending program, report amount of collateral for conforming programs as outlined in the Risk-Based Capital Instructions. \$
- 24.05 For the reporting entity's securities lending program, report amount of collateral for other programs. \$
- 24.06 Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract? Yes [] No [] N/A [X]
- 24.07 Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%? Yes [] No [] N/A [X]
- 24.08 Does the reporting entity or the reporting entity's securities lending agent utilize the Master Securities lending Agreement (MSLA) to conduct securities lending? Yes [] No [] N/A [X]

**ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY
GENERAL INTERROGATORIES**

24.09 For the reporting entity's securities lending program state the amount of the following as of December 31 of the current year:

24.091 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 \$
 24.092 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 \$
 24.093 Total payable for securities lending reported on the liability page \$

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 24.03) Yes [X] 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 Placed under option agreements \$
 25.26 Letter stock or securities restricted as to sale - excluding FHLB Capital Stock \$
 25.27 FHLB Capital Stock \$10,000
 25.28 On deposit with states \$2,913,263
 25.29 On deposit with other regulatory bodies \$
 25.30 Pledged as collateral - excluding collateral pledged to an FHLB \$
 25.31 Pledged as collateral to FHLB - including assets backing funding agreements \$
 25.32 Other \$

25.3 For category (25.26) provide the following:

1 Nature of Restriction	2 Description	3 Amount

26.1 Does the reporting entity have any hedging transactions reported on Schedule DB? Yes [] No [X]

26.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes [] No [] N/A [X]
 If no, attach a description with this statement.

LINES 26.3 through 26.5: FOR LIFE/FRATERNAL REPORTING ENTITIES ONLY:

26.3 Does the reporting entity utilize derivatives to hedge variable annuity guarantees subject to fluctuations as a result of interest rate sensitivity? .. Yes [] No [X]

26.4 If the response to 26.3 is YES, does the reporting entity utilize:

26.41 Special accounting provision of SSAP No. 108 Yes [] No []
 26.42 Permitted accounting practice Yes [] No []
 26.43 Other accounting guidance Yes [] No []

26.5 By responding YES to 26.41 regarding utilizing the special accounting provisions of SSAP No. 108, the reporting entity attests to the following: Yes [] No []

- The reporting entity has obtained explicit approval from the domiciliary state.
- Hedging strategy subject to the special accounting provisions is consistent with the requirements of VM-21.
- Actuarial certification has been obtained which indicates that the hedging strategy is incorporated within the establishment of VM-21 reserves and provides the impact of the hedging strategy within the Actuarial Guideline Conditional Tail Expectation Amount.
- Financial Officer Certification has been obtained which indicates that the hedging strategy meets the definition of a Clearly Defined Hedging Strategy within VM-21 and that the Clearly Defined Hedging Strategy is the hedging strategy being used by the company in its actual day-to-day risk mitigation efforts.

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 [X]

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 [X] 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
JPMorgan Chase Bank, N.A.	New York, NY

**ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY
GENERAL INTERROGATORIES**

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

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

28.03 Have there been any changes, including name changes, in the custodian(s) identified in 28.01 during the current year?..... Yes [] No [X]

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

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

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

1 Name of Firm or Individual	2 Affiliation
Provident Investment Management, LLC	A.....

28.0597 For those firms/individuals listed in the table for Question 28.05, do any firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") manage more than 10% of the reporting entity's invested assets?..... Yes [] No [X]

28.0598 For firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") listed in the table for Question 28.05, does the total assets under management aggregate to more than 50% of the reporting entity's invested assets?..... Yes [] No [X]

28.06 For those firms or individuals listed in the table for 28.05 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table below.

1 Central Registration Depository Number	2 Name of Firm or Individual	3 Legal Entity Identifier (LEI)	4 Registered With	5 Investment Management Agreement (IMA) Filed
108527	Provident Investment Management, LLC			DS.....

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		

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

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

GENERAL INTERROGATORIES

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

	1	2	3
	Statement (Admitted) Value	Fair Value	Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
30.1 Bonds	87,261,347	95,708,243	8,446,896
30.2 Preferred stocks			
30.3 Totals	87,261,347	95,708,243	8,446,896

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

BVAL and TRACE

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 [X] No []

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

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:

The Company generally obtains a copy of the pricing policy of those brokers used as pricing sources. However, the written pricing policies of all brokers may not be made available for the Company's use. For those securities in which a broker is used as a pricing source, the Company's policy is to analyze and confirm each price to determine whether it is appropriate based on other observable market data. If the price cannot be validated by observable market data, the Company will not use the broker's price to value the security.

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

32.2 If no, list exceptions:

33. By self-designating 5GI securities, the reporting entity is certifying the following elements of each self-designated 5GI security:

- a. Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available.
- b. Issuer or obligor is current on all contracted interest and principal payments.
- c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal.

Has the reporting entity self-designated 5GI securities? Yes [] No [X]

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

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

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

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

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

Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria? Yes [] No [X]

36. By rolling/renewing short-term or cash equivalent investments with continued reporting on Schedule DA, Part 1 or Schedule E Part 2 (identified through a code (%) in those investment schedules), the reporting entity is certifying to the following:

- a. The investment is a liquid asset that can be terminated by the reporting entity on the current maturity date.
- b. If the investment is with a nonrelated party or nonaffiliate, then it reflects an arms-length transaction with renewal completed at the discretion of all involved parties.
- c. If the investment is with a related party or affiliate, then the reporting entity has completed robust re-underwriting of the transaction for which documentation is available for regulator review.
- d. Short-term and cash equivalent investments that have been renewed/rolled from the prior period that do not meet the criteria in 36.a - 36.c are reported as long-term investments.

Has the reporting entity rolled/renewed short-term or cash equivalent investments in accordance with these criteria? Yes [] No [] N/A [X]

GENERAL INTERROGATORIES

OTHER

37.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any?\$81,317

37.2 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
None	
.....	

38.1 Amount of payments for legal expenses, if any?\$39,496

38.2 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
None	
.....	

39.1 Amount of payments for expenditures in connection with matters before legislative bodies, officers or departments of government, if any?\$8,648

39.2 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
American Council of Life Insurers	5,511
.....	

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY
GENERAL INTERROGATORIES

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

Life, Accident and Health Companies/Fraternal Benefit Societies:

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

- 1.4 Indicate amount of earned premium attributable to Canadian and/or Other Alien not included in Item (1.2) above. \$
- 1.5 Indicate total incurred claims on all Medicare Supplement insurance. \$
- 1.6 Individual policies:
- Most current three years:
- 1.61 Total premium earned \$
- 1.62 Total incurred claims \$
- 1.63 Number of covered lives
- All years prior to most current three years
- 1.64 Total premium earned \$
- 1.65 Total incurred claims \$
- 1.66 Number of covered lives
- 1.7 Group policies:
- Most current three years:
- 1.71 Total premium earned \$
- 1.72 Total incurred claims \$
- 1.73 Number of covered lives
- All years prior to most current three years
- 1.74 Total premium earned \$
- 1.75 Total incurred claims \$
- 1.76 Number of covered lives

2. Health Test:

	1 Current Year	2 Prior Year
2.1 Premium Numerator	252,206,850	244,257,404
2.2 Premium Denominator	258,153,164	250,633,424
2.3 Premium Ratio (2.1/2.2)	0.977	0.975
2.4 Reserve Numerator	11,041,045	15,107,815
2.5 Reserve Denominator	35,387,529	39,145,082
2.6 Reserve Ratio (2.4/2.5)	0.312	0.386

- 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 [] N/A [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. 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:
- 4.1 Amount of loss reserves established by these annuities during the current year: \$
- 4.2 List the name and location of the insurance company purchasing the annuities and the statement value on the purchase date of the annuities.

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

GENERAL INTERROGATORIES

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

- 5.1 Do you act as a custodian for health savings accounts? Yes [] No [X]
- 5.2 If yes, please provide the amount of custodial funds held as of the reporting date. \$
- 5.3 Do you act as an administrator for health savings accounts? Yes [] No [X]
- 5.4 If yes, please provide the balance of funds administered as of the reporting date. \$
- 6.1 Are any of the captive affiliates reported on Schedule S, Part 3, authorized reinsurers? Yes [] No [X] N/A []
- 6.2 If the answer to 6.1 is yes, please provide the following:

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

- 7. Provide the following for individual ordinary life insurance* policies (U.S. business only) for the current year (prior to reinsurance assumed or ceded):
 - 7.1 Direct Premium Written \$ 6,289,040
 - 7.2 Total Incurred Claims \$ 5,253,221
 - 7.3 Number of Covered Lives 9,787

*Ordinary Life Insurance Includes
Term (whether full underwriting, limited underwriting, jet issue, "short form app")
Whole Life (whether full underwriting, limited underwriting, jet issue, "short form app")
Variable Life (with or without secondary gurarantee)
Universal Life (with or without secondary gurarantee)
Variable Universal Life (with or without secondary gurarantee)

- 8. Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states? Yes [X] No []
- 8.1 If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity? Yes [] No []

Life, Accident and Health Companies Only:

- 9.1 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 [X] No []
- 9.2 Net reimbursement of such expenses between reporting entities:
 - 9.21 Paid \$ 50,356,542
 - 9.22 Received \$ 164,417
- 10.1 Does the reporting entity write any guaranteed interest contracts? Yes [] No [X]
- 10.2 If yes, what amount pertaining to these lines is included in:
 - 10.21 Page 3, Line 1 \$
 - 10.22 Page 4, Line 1 \$
- 11. For stock reporting entities only:
 - 11.1 Total amount paid in by stockholders as surplus funds since organization of the reporting entity: \$ 70,280,000
 - 12. Total dividends paid stockholders since organization of the reporting entity:
 - 12.11 Cash \$ 10,191,584
 - 12.12 Stock \$ 1,500,000
- 13.1 Does the reporting entity 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.
- 13.2 If yes, has the reporting entity completed the Workers' Compensation Carve-Out Supplement to the Annual Statement? Yes [] No []
- 13.3 If 13.1 is yes, the amounts of earned premiums and claims incurred in this statement are:

	1 Reinsurance Assumed	2 Reinsurance Ceded	3 Net Retained
13.31 Earned premium			
13.32 Paid claims			
13.33 Claim liability and reserve (beginning of year)			
13.34 Claim liability and reserve (end of year)			
13.35 Incurred claims			

GENERAL INTERROGATORIES

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

13.4 If reinsurance assumed included amounts with attachment points below \$1,000,000, the distribution of the amounts reported in Lines 13.31 and 13.34 for Column (1) are:

	Attachment Point	1 Earned Premium	2 Claim Liability and Reserve
13.41	<\$25,000	.....	.....
13.42	\$25,000 - 99,999	.....	.....
13.43	\$100,000 - 249,999	.....	.....
13.44	\$250,000 - 999,999	.....	.....
13.45	\$1,000,000 or more	.....	.....

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

Fraternal Benefit Societies Only:

- 14. Is the reporting entity organized and conducted on the lodge system, with ritualistic form of work and representative form of government? Yes [] No []
- 15. How often are meetings of the subordinate branches required to be held?
- 16. How are the subordinate branches represented in the supreme or governing body?
- 17. What is the basis of representation in the governing body?
- 18.1 How often are regular meetings of the governing body held?
- 18.2 When was the last regular meeting of the governing body held?
- 18.3 When and where will the next regular or special meeting of the governing body be held?
- 18.4 How many members of the governing body attended the last regular meeting?
- 18.5 How many of the same were delegates of the subordinate branches?
- 19. How are the expenses of the governing body defrayed?
- 20. When and by whom are the officers and directors elected?
- 21. What are the qualifications for membership?
- 22. What are the limiting ages for admission?
- 23. What is the minimum and maximum insurance that may be issued on any one life?
- 24. Is a medical examination required before issuing a benefit certificate to applicants? Yes [] No []
- 25. Are applicants admitted to membership without filing an application with and becoming a member of a local branch by ballot and initiation? Yes [] No []
- 26.1 Are notices of the payments required sent to the members? Yes [] No [] N/A []
- 26.2 If yes, do the notices state the purpose for which the money is to be used? Yes [] No []
- 27. What proportion of first and subsequent year's payments may be used for management expense?
- 27.11 First Year %
- 27.12 Subsequent Years %
- 28.1 Is any part of the mortuary, disability, emergency or reserve fund, or the accretions from or payments for the same, used for expenses? Yes [] No []
- 28.2 If so, what amount and for what purpose? \$
- 29.1 Does the reporting entity pay an old age disability benefit? Yes [] No []
- 29.2 If yes, at what age does the benefit commence?
- 30.1 Has the constitution or have the laws of the reporting entity been amended during the year? Yes [] No []
- 30.2 If yes, when?
- 31. Have you filed with this Department all forms of benefit certificates issued, a copy of the constitution and all of the laws, rules and regulations in force at the present time? Yes [] No []
- 32.1 State whether all or a portion of the regular insurance contributions were waived during the current year under premium-paying certificates on account of meeting attained age or membership requirements? Yes [] No []
- 32.2 If so, was an additional reserve included in Exhibit 5? Yes [] No [] N/A []
- 32.3 If yes, explain
- 33.1 Has the reporting entity reinsured, amalgamated with, or absorbed any company, order, society, or association during the year? Yes [] No []
- 33.2 If yes, was there any contract agreement, or understanding, written or oral, expressed or implied, by means of which any officer, director, trustee, or any other person, or firm, corporation, society or association, received or is to receive any fee, commission, emolument, or compensation of any nature whatsoever in connection with, on an account of such reinsurance, amalgamation, absorption, or transfer of membership or funds? Yes [] No [] N/A []
- 34. Has any present or former officer, director, trustee, incorporator, or any other persons, or any firm, corporation, society or association, any claims of any nature whatsoever against this reporting entity, which is not included in the liabilities on Page 3 of this statement? Yes [] No []
- 35.1 Does the reporting entity have outstanding assessments in the form of liens against policy benefits that have increased surplus? Yes [] No []
- 35.2 If yes, what is the date of the original lien and the total outstanding balance of liens that remain in surplus?

Date	Outstanding Lien Amount
.....
.....

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

FIVE-YEAR HISTORICAL DATA

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

\$000 omitted for amounts of life insurance

	1 2020	2 2019	3 2018	4 2017	5 2016
Life Insurance in Force (Exhibit of Life Insurance)					
1. Ordinary - whole life and endowment (Line 34, Col. 4)	88,248	92,124	44,157	47,104	48,755
2. Ordinary - term (Line 21, Col. 4, less Line 34, Col. 4)	111,525	139,562	229,544	272,929	314,973
3. Credit life (Line 21, Col. 6)					
4. Group, excluding FEGLI/SGLI (Line 21, Col. 9 less Lines 43 & 44, Col. 4)	1,653	1,860	9,849	223,565	472,193
5. Industrial (Line 21, Col. 2)					
6. FEGLI/SGLI (Lines 43 & 44, Col. 4)					
7. Total (Line 21, Col. 10)	201,425	233,545	283,550	543,598	835,921
7.1 Total in force for which VM-20 deterministic/stochastic reserves are calculated					XXX
New Business Issued (Exhibit of Life Insurance)					
8. Ordinary - whole life and endowment (Line 34, Col. 2)		1,111	2,687	4,396	6,014
9. Ordinary - term (Line 2, Col. 4, less Line 34, Col. 2)			1,864	4,239	11,586
10. Credit life (Line 2, Col. 6)					
11. Group (Line 2, Col. 9)					
12. Industrial (Line 2, Col. 2)					
13. Total (Line 2, Col. 10)		1,111	4,551	8,635	17,600
Premium Income - Lines of Business (Exhibit 1 - Part 1)					
14. Industrial life (Line 20.4, Col. 2)					
15.1 Ordinary-life insurance (Line 20.4, Col. 3)	5,881,204	6,303,358	6,776,144	7,241,980	7,847,713
15.2 Ordinary-individual annuities (Line 20.4, Col. 4)					
16. Credit life (group and individual) (Line 20.4, Col. 5)					
17.1 Group life insurance (Line 20.4, Col. 6)	65,110	72,662	287,168	1,473,455	1,759,298
17.2 Group annuities (Line 20.4, Col. 7)					
18.1 A & H-group (Line 20.4, Col. 8)	241,409,704	230,384,659	184,220,375	152,698,042	118,609,041
18.2 A & H-credit (group and individual) (Line 20.4, Col. 9)					
18.3 A & H-other (Line 20.4, Col. 10)	10,797,146	13,872,746	18,611,396	18,257,576	16,072,711
19. Aggregate of all other lines of business (Line 20.4, Col. 11)					
20. Total	258,153,164	250,633,424	209,895,083	179,671,053	144,288,763
Balance Sheet (Pages 2 & 3)					
21. Total admitted assets excluding Separate Accounts business (Page 2, Line 26, Col. 3)	131,741,551	110,154,995	94,040,314	79,850,698	76,213,202
22. Total liabilities excluding Separate Accounts business (Page 3, Line 26)	57,458,197	61,116,575	48,710,562	42,401,341	43,962,854
23. Aggregate life reserves (Page 3, Line 1)	27,037,910	26,526,056	23,619,882	22,501,019	21,721,726
23.1 Excess VM-20 deterministic/stochastic reserve over NPR related to Line 7.1					XXX
24. Aggregate A & H reserves (Page 3, Line 2)	7,400,793	7,170,927	258,289	244,696	246,746
25. Deposit-type contract funds (Page 3, Line 3)					
26. Asset valuation reserve (Page 3, Line 24.01)	699,346	500,096	389,189	305,696	210,240
27. Capital (Page 3, Lines 29 and 30)	3,000,000	3,000,000	3,000,000	3,000,000	3,000,000
28. Surplus (Page 3, Line 37)	71,283,354	46,038,420	42,329,752	34,449,357	29,250,348
Cash Flow (Page 5)					
29. Net Cash from Operations (Line 11)	4,665,424	(4,426,420)	2,839,646	(2,224,799)	3,935,861
Risk-Based Capital Analysis					
30. Total adjusted capital	74,982,700	49,538,516	45,718,941	37,755,053	32,460,588
31. Authorized control level risk - based capital	8,861,700	9,544,149	7,136,493	6,291,591	5,013,710
Percentage Distribution of Cash, Cash Equivalents and Invested Assets (Page 2, Col. 3) (Line No. /Page 2, Line 12, Col. 3) x 100.0					
32. Bonds (Line 1)	78.9	54.3	55.5	56.5	64.0
33. Stocks (Lines 2.1 and 2.2)	0.0	0.0	0.1	0.1	0.1
34. Mortgage loans on real estate(Lines 3.1 and 3.2)					
35. Real estate (Lines 4.1, 4.2 and 4.3)	4.8	6.1	7.0	8.6	3.7
36. Cash, cash equivalents and short-term investments (Line 5)	15.4	38.5	36.5	33.7	31.2
37. Contract loans (Line 6)	0.9	1.1	1.0	1.1	1.0
38. Derivatives (Page 2, Line 7)					
39. Other invested assets (Line 8)					
40. Receivables for securities (Line 9)	0.0				
41. Securities lending reinvested collateral assets (Line 10)					
42. Aggregate write-ins for invested assets (Line 11)					
43. Cash, cash equivalents and invested assets (Line 12)	100.0	100.0	100.0	100.0	100.0

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

FIVE-YEAR HISTORICAL DATA

(Continued)

	1 2020	2 2019	3 2018	4 2017	5 2016
Investments in Parent, Subsidiaries and Affiliates					
44. Affiliated bonds (Schedule D Summary, Line 12, Col. 1).....					
45. Affiliated preferred stocks (Schedule D Summary, Line 18, Col. 1).....					
46. Affiliated common stocks (Schedule D Summary Line 24, Col. 1),.....					
47. Affiliated short-term investments (subtotal included in Schedule DA Verification, Col. 5, Line 10).....					
48. Affiliated mortgage loans on real estate.....					
49. All other affiliated.....					
50. Total of above Lines 44 to 49.....					
51. Total Investment in Parent included in Lines 44 to 49 above.....					
Total Nonadmitted and Admitted Assets					
52. Total nonadmitted assets (Page 2, Line 28, Col. 2).....	1,643,077	802,281	949,534	1,768,893	1,208,228
53. Total admitted assets (Page 2, Line 28, Col. 3).....	131,741,551	110,154,995	94,040,314	79,850,698	76,213,202
Investment Data					
54. Net investment income (Exhibit of Net Investment Income).....	2,703,669	2,329,434	1,719,056	1,386,125	1,385,140
55. Realized capital gains (losses) (Page 4, Line 34, Column 1).....	8,015	203	(5,562)	(717,201)	(1,456,749)
56. Unrealized capital gains (losses) (Page 4, Line 38, Column 1).....				0	(65,870)
57. Total of above Lines 54, 55 and 56.....	2,711,685	2,329,637	1,713,494	668,924	(137,479)
Benefits and Reserve Increases (Page 6)					
58. Total contract/certificate benefits - life (Lines 10, 11, 12, 13, 14 and 15, Col. 1 minus Lines 10, 11, 12, 13, 14 and 15, Cols. 6, 7 and 8).....	5,143,711	5,058,227	5,216,383	6,030,705	6,287,257
59. Total contract/certificate benefits - A & H (Lines 13 & 14, Col. 6).....	152,122,106	173,898,859	138,838,515	118,392,976	91,159,228
60. Increase in life reserves - other than group and annuities (Line 19, Col. 2).....	530,447	907,527	1,122,238	770,843	1,067,479
61. Increase in A & H reserves (Line 19, Col. 6).....	229,866	6,912,638	13,593	(2,050)	(4,385)
62. Dividends to policyholders and refunds to members (Line 30, Col. 1).....					
Operating Percentages					
63. Insurance expense percent (Page 6, Col. 1, Lines 21, 22 & 23, less Line 6)/(Page 6, Col. 1, Line 1 plus Exhibit 7, Col. 2, Line 2) x 100.0.....	30.2	29.1	31.3	30.5	26.4
64. Lapse percent (ordinary only) [(Exhibit of Life Insurance, Col. 4, Lines 14 & 15) / 1/2 (Exhibit of Life Insurance, Col. 4, Lines 1 & 21)] x 100.0.....	9.7	11.6	12.6	11.0	12.3
65. A & H loss percent (Schedule H, Part 1, Lines 5 and 6, Col. 2).....	62.1	75.9	69.9	70.3	68.0
66. A & H cost containment percent (Schedule H, Pt. 1, Line 4, Col. 2).....	1.7	1.9	1.5	1.0	0.4
67. A & H expense percent excluding cost containment expenses (Schedule H, Pt. 1, Line 10, Col. 2).....	34.1	30.8	35.4	32.2	29.1
A & H Claim Reserve Adequacy					
68. Incurred losses on prior years' claims - group health (Schedule H, Part 3, Line 3.1 Col. 2).....	10,819,742	13,618,452	9,741,443	10,501,248	7,185,793
69. Prior years' claim liability and reserve - group health (Schedule H, Part 3, Line 3.2 Col. 2).....	14,254,093	13,611,168	10,716,088	11,170,412	8,287,437
70. Incurred losses on prior years' claims-health other than group (Schedule H, Part 3, Line 3.1 Col. 1 less Col. 2).....	689,102	927,821	811,130	618,110	427,531
71. Prior years' claim liability and reserve-health other than group (Schedule H, Part 3, Line 3.2 Col. 1 less Col. 2).....	817,040	924,192	1,170,235	724,518	616,993
Net Gains From Operations After Dividends to Policyholders/Members' Refunds and Federal Income Taxes by Lines of Business (Page 6.x, Line 33)					
72. Industrial life (Page 6.1, Col. 2).....					
73. Ordinary - life (Page 6.1, Col. 1 less Cols. 2, 10 and 12).....	(908,760)	406,796	(1,721)	387,525	24,412
74. Ordinary - individual annuities (Page 6, Col. 4).....	(2,113)	(824)	3,455	(23)	201
75. Ordinary-supplementary contracts.....	XXX	XXX			
76. Credit life (Page 6.1, Col. 10 plus Page 6.2, Col. 7).....					
77. Group life (Page 6.2, Col. 1 Less Cols. 7 and 9).....	(66,235)	(33,552)	12,055	206,022	1,885
78. Group annuities (Page 6, Col. 5).....					
79. A & H-group (Page 6.5, Col. 3).....			(9,132,916)	(2,499,986)	970,847
80. A & H-credit (Page 6.5, Col. 10).....					
81. A & H-other (Page 6.5, Col. 1 less Cols. 3 and 10).....	11,554,072	(14,700,302)	(373,317)	(142,460)	25,686
82. Aggregate of all other lines of business (Page 6, Col. 8).....					
83. Fraternal (Page 6, Col. 7).....					
84. Total (Page 6, Col. 1).....	10,576,965	(14,327,882)	(9,492,443)	(2,048,922)	1,023,031

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 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Alabama
 NAIC Group Code 0565

DURING THE YEAR 2020
 NAIC Company Code 68985

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	21,941				21,941
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	21,941				21,941
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits					
10. Matured endowments					
11. Annuity benefits					
12. Surrender values and withdrawals for life contracts					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health					
15. Totals					
DETAILS OF WRITE-INS					
1301. Disability Benefits					
1302. Supplementary Contracts					
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pol. & Certifs.	Amount	No. of Ind. Pol. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pol. & Certifs.	Amount	No. of Pol. & Certifs.	Amount
16. Unpaid December 31, prior year										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										
18.2 By payment on compromised claims										
18.3 Totals paid										
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements										
19. Unpaid Dec. 31, current year (16+17-18.6)										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	31	647,300	(a)						31	647,300
21. Issued during year										
22. Other changes to in force (Net)	(2)	(40,000)							(2)	(40,000)
23. In force December 31 of current year	29	607,300	(a)						29	607,300

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	2,560,276	2,568,747		1,437,005	1,402,143
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies/certificates (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	1,046	1,122			
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)	164,487	164,487		83,446	79,403
25.6 Totals (sum of Lines 25.1 to 25.5)	165,533	165,609		83,446	79,403
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	2,725,808	2,734,356		1,520,451	1,481,546

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0 .



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Alaska
NAIC Group Code 0565

DURING THE YEAR 2020
NAIC Company Code 68985

LIFE INSURANCE

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-Ins.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various accident types.

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Arizona

DURING THE YEAR 2020

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68985

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	111,236		1,481		112,717
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	111,236		1,481		112,717
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	156,000		5,000		161,000
10. Matured endowments					
11. Annuity benefits					
12. Surrender values and withdrawals for life contracts	5,201				5,201
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health					
15. Totals	161,201		5,000		166,201
DETAILS OF WRITE-INS					
1301. Disability Benefits					
1302. Supplementary Contracts					
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pol. & Certifs.	Amount	No. of Ind. Pol. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pol. & Certifs.	Amount	No. of Pol. & Certifs.	Amount
16. Unpaid December 31, prior year	3	100,000							3	100,000
17. Incurred during current year	10	131,000			1	5,000			11	136,000
Settled during current year:										
18.1 By payment in full	9	156,000			1	5,000			10	161,000
18.2 By payment on compromised claims										
18.3 Totals paid	9	156,000			1	5,000			10	161,000
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	9	156,000			1	5,000			10	161,000
19. Unpaid Dec. 31, current year (16+17-18.6)	4	75,000							4	75,000
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	184	3,863,600	(a)		8	65,000			192	3,928,600
21. Issued during year										
22. Other changes to in force (Net)	(27)	(441,000)			(2)	(15,000)			(29)	(456,000)
23. In force December 31 of current year	157	3,422,600	(a)		6	50,000			163	3,472,600

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	2,660,932	2,669,736		1,787,974	1,743,433
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies/certificates (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	1,444	1,550			
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)	469,142	469,142		314,793	299,544
25.6 Totals (sum of Lines 25.1 to 25.5)	470,586	470,692		314,793	299,544
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	3,131,518	3,140,428		2,102,768	2,042,976

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Arkansas
NAIC Group Code 0565

DURING THE YEAR 2020
NAIC Company Code 68985

LIFE INSURANCE

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-Ins.

Table with 10 columns: 1 No. of Pol. & Certifs., 2 Amount, 3 No. of Ind. Pol. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pol. & Certifs., 8 Amount, 9 No. of Pol. & Certifs., 10 Amount. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various accident types.

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF California

DURING THE YEAR 2020

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68985

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS, DIRECT CLAIMS AND BENEFITS PAID, and DETAILS OF WRITE-INS.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED and POLICY EXHIBIT.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include: 24 Group Policies (b), 24.1 Federal Employees Health Benefits Plan premium (b), 24.2 Credit (Group and Individual), 24.3 Collectively renewable policies/certificates (b), 24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies, 25.1 Non-cancelable (b), 25.2 Guaranteed renewable (b), 25.3 Non-renewable for stated reasons only (b), 25.4 Other accident only, 25.5 All other (b), 25.6 Totals (sum of Lines 25.1 to 25.5), 26 Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0.



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Colorado
 NAIC Group Code 0565

LIFE INSURANCE

DURING THE YEAR 2020
 NAIC Company Code 68985

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	21,308				21,308
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	21,308				21,308
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits					
10. Matured endowments					
11. Annuity benefits					
12. Surrender values and withdrawals for life contracts					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health					
15. Totals					
DETAILS OF WRITE-INS					
1301. Disability Benefits					
1302. Supplementary Contracts					
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pol. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pol. & Certifs.	Amount	No. of Pol. & Certifs.	Amount
16. Unpaid December 31, prior year										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										
18.2 By payment on compromised claims										
18.3 Totals paid										
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements										
19. Unpaid Dec. 31, current year (16+17-18.6)										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	36	659,700	(a)						36	659,700
21. Issued during year										
22. Other changes to in force (Net)	(4)	(115,000)							(4)	(115,000)
23. In force December 31 of current year	32	544,700	(a)						32	544,700

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	1,283,934	1,288,182		896,345	873,883
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies/certificates (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	17	18			
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)	100,998	100,998		64,542	61,415
25.6 Totals (sum of Lines 25.1 to 25.5)	101,015	101,016		64,542	61,415
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	1,384,948	1,389,198		960,887	935,298

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Connecticut

DURING THE YEAR 2020

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68985

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-Ins.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include Maturesd Endowments Incurred and Policy Exhibit.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b), Federal Employees Health Benefits Plan, Medicare Title XVIII, and other accident only.

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Delaware

DURING THE YEAR 2020

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68985

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-Ins.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include Direct Death Benefits and Maturesd Endowments Incurred and Policy Exhibit.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various accident types.

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF District of Columbia

DURING THE YEAR 2020

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68985

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-Ins.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various accident types.

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Florida
NAIC Group Code 0565

DURING THE YEAR 2020
NAIC Company Code 68985

LIFE INSURANCE

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-Ins.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include Direct Death Benefits and Matures Endowments Incurred and Policy Exhibit.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various accident types.

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Georgia
NAIC Group Code 0565

DURING THE YEAR 2020
NAIC Company Code 68985

LIFE INSURANCE

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-Ins.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various accident types.

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Hawaii
NAIC Group Code 0565

DURING THE YEAR 2020
NAIC Company Code 68985

LIFE INSURANCE

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-Ins.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various accident types.

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Idaho
NAIC Group Code 0565

DURING THE YEAR 2020
NAIC Company Code 68985

LIFE INSURANCE

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various accident types.

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Illinois
 NAIC Group Code 0565

LIFE INSURANCE

DURING THE YEAR 2020
 NAIC Company Code 68985

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	116,039				116,039
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	116,039				116,039
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	10,000				10,000
10. Matured endowments					
11. Annuity benefits					
12. Surrender values and withdrawals for life contracts	1,804				1,804
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health					
15. Totals	11,804				11,804
DETAILS OF WRITE-INS					
1301. Disability Benefits					
1302. Supplementary Contracts					
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pol. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pol. & Certifs.	Amount	No. of Pol. & Certifs.	Amount
16. Unpaid December 31, prior year										
17. Incurred during current year	1	10,000							1	10,000
18.1 Settled during current year: By payment in full	1	10,000							1	10,000
18.2 By payment on compromised claims										
18.3 Totals paid	1	10,000							1	10,000
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	1	10,000							1	10,000
19. Unpaid Dec. 31, current year (16+17-18.6)										
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	232	5,714,700	(a)						232	5,714,700
21. Issued during year										
22. Other changes to in force (Net)	(38)	(1,928,500)							(38)	(1,928,500)
23. In force December 31 of current year	194	3,786,200	(a)						194	3,786,200

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	8,683,058	8,711,787		4,903,198	4,778,894
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies/certificates (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	1,129	1,212			
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)	1,098,736	1,098,736		576,221	548,307
25.6 Totals (sum of Lines 25.1 to 25.5)	1,099,865	1,099,948		576,221	548,307
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	9,782,924	9,811,736		5,479,420	5,327,201

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0 .



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Indiana
 NAIC Group Code 0565

LIFE INSURANCE

DURING THE YEAR 2020
 NAIC Company Code 68985

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	211,327				211,327
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	211,327				211,327
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	167,500				167,500
10. Matured endowments					
11. Annuity benefits					
12. Surrender values and withdrawals for life contracts	4,795				4,795
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health					
15. Totals	172,295				172,295
DETAILS OF WRITE-INS					
1301. Disability Benefits					
1302. Supplementary Contracts					
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year	4	77,500							4	77,500
17. Incurred during current year	8	135,000							8	135,000
Settled during current year:										
18.1 By payment in full	10	167,500							10	167,500
18.2 By payment on compromised claims										
18.3 Totals paid	10	167,500							10	167,500
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	10	167,500							10	167,500
19. Unpaid Dec. 31, current year (16+17-18.6)	2	45,000							2	45,000
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	348	5,543,800	(a)						348	5,543,800
21. Issued during year										
22. Other changes to in force (Net)	(34)	(803,400)							(34)	(803,400)
23. In force December 31 of current year	314	4,740,400	(a)						314	4,740,400

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	4,333,550	4,347,889		2,399,983	2,340,053
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies/certificates (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	1,307	1,402			
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)	340,480	340,480		185,929	176,922
25.6 Totals (sum of Lines 25.1 to 25.5)	341,786	341,882		185,929	176,922
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	4,675,337	4,689,771		2,585,912	2,516,975

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons
 insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Iowa
 NAIC Group Code 0565

LIFE INSURANCE

DURING THE YEAR 2020
 NAIC Company Code 68985

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	13,558				13,558
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	13,558				13,558
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	10,000				10,000
10. Matured endowments					
11. Annuity benefits					
12. Surrender values and withdrawals for life contracts					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health					
15. Totals	10,000				10,000
DETAILS OF WRITE-INS					
1301. Disability Benefits					
1302. Supplementary Contracts					
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year										
17. Incurred during current year	1	10,000							1	10,000
Settled during current year:										
18.1 By payment in full	1	10,000							1	10,000
18.2 By payment on compromised claims										
18.3 Totals paid	1	10,000							1	10,000
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	1	10,000							1	10,000
19. Unpaid Dec. 31, current year (16+17-18.6)										
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	26	671,800	(a)						26	671,800
21. Issued during year										
22. Other changes to in force (Net)	(5)	(196,300)							(5)	(196,300)
23. In force December 31 of current year	21	475,500	(a)						21	475,500

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	185,082	185,694		283,747	276,654
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies/certificates (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	216	232			
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)	54,584	54,584		25,561	24,322
25.6 Totals (sum of Lines 25.1 to 25.5)	54,800	54,816		25,561	24,322
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	239,881	240,510		309,307	300,976

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons
 insured under indemnity only products0 .



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Kansas
NAIC Group Code 0565

DURING THE YEAR 2020
NAIC Company Code 68985

LIFE INSURANCE

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-Ins.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various accident types.

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Kentucky

DURING THE YEAR 2020

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68985

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-Ins.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various accident types.

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Louisiana
NAIC Group Code 0565

DURING THE YEAR 2020
NAIC Company Code 68985

LIFE INSURANCE

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-Ins.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b), Federal Employees Health Benefits Plan premium (b), Medicare Title XVIII exempt from state taxes or fees, and other accident only.

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Maine
 NAIC Group Code 0565

LIFE INSURANCE

DURING THE YEAR 2020
 NAIC Company Code 68985

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	11,088				11,088
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	11,088				11,088
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits					
10. Matured endowments					
11. Annuity benefits					
12. Surrender values and withdrawals for life contracts					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health					
15. Totals					
DETAILS OF WRITE-INS					
1301. Disability Benefits					
1302. Supplementary Contracts					
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										
18.2 By payment on compromised claims										
18.3 Totals paid										
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements										
19. Unpaid Dec. 31, current year (16+17-18.6)										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	16	344,200	(a)						16	344,200
21. Issued during year										
22. Other changes to in force (Net)	(5)	(126,700)							(5)	(126,700)
23. In force December 31 of current year	11	217,500	(a)						11	217,500

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	2,171,179	2,178,362		1,121,833	1,093,335
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies/certificates (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	184	198			
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)	6,660	6,660		4,969	4,728
25.6 Totals (sum of Lines 25.1 to 25.5)	6,844	6,858		4,969	4,728
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	2,178,023	2,185,220		1,126,801	1,098,063

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons
 insured under indemnity only products0 .



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Maryland
NAIC Group Code 0565

DURING THE YEAR 2020
NAIC Company Code 68985

LIFE INSURANCE

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various accident types.

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Massachusetts

DURING THE YEAR 2020

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68985

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	23,884				23,884
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	23,884				23,884
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits					
10. Matured endowments					
11. Annuity benefits					
12. Surrender values and withdrawals for life contracts					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health					
15. Totals					
DETAILS OF WRITE-INS					
1301. Disability Benefits					
1302. Supplementary Contracts					
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										
18.2 By payment on compromised claims										
18.3 Totals paid										
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements										
19. Unpaid Dec. 31, current year (16+17-18.6)										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	34	689,000	(a)						34	689,000
21. Issued during year										
22. Other changes to in force (Net)	(2)	(91,300)							(2)	(91,300)
23. In force December 31 of current year	32	597,700	(a)						32	597,700

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	1,398,483	1,403,110		667,786	650,958
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies/certificates (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	86	93			
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)	(206)	(206)		165	157
25.6 Totals (sum of Lines 25.1 to 25.5)	(120)	(113)		165	157
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	1,398,363	1,402,997		667,951	651,115

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons
 insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Michigan
 NAIC Group Code 0565

DURING THE YEAR 2020
 NAIC Company Code 68985

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	95,190				95,190
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	95,190				95,190
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	20,000				20,000
10. Matured endowments					
11. Annuity benefits					
12. Surrender values and withdrawals for life contracts					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health					
15. Totals	20,000				20,000
DETAILS OF WRITE-INS					
1301. Disability Benefits					
1302. Supplementary Contracts					
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year										
17. Incurred during current year	3	30,000							3	30,000
Settled during current year:										
18.1 By payment in full	2	20,000							2	20,000
18.2 By payment on compromised claims										
18.3 Totals paid	2	20,000							2	20,000
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	2	20,000							2	20,000
19. Unpaid Dec. 31, current year (16+17-18.6)	1	10,000							1	10,000
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	160	2,712,400	(a)						160	2,712,400
21. Issued during year										
22. Other changes to in force (Net)	(15)	(404,800)							(15)	(404,800)
23. In force December 31 of current year	145	2,307,600	(a)						145	2,307,600

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	16,519,542	16,574,199		8,918,308	8,693,263
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies/certificates (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	1,269	1,362			
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)	634,824	634,824		386,837	368,097
25.6 Totals (sum of Lines 25.1 to 25.5)	636,093	636,186		386,837	368,097
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	17,155,635	17,210,385		9,305,145	9,061,360

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons
 insured under indemnity only products0 .



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Minnesota
NAIC Group Code 0565

DURING THE YEAR 2020
NAIC Company Code 68985

LIFE INSURANCE

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-Ins.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various accident types.

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Mississippi

DURING THE YEAR 2020

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68985

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	142,413		5,662		148,075
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	142,413		5,662		148,075
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	93,000				93,000
10. Matured endowments					
11. Annuity benefits					
12. Surrender values and withdrawals for life contracts	7,149				7,149
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health					
15. Totals	100,149				100,149
DETAILS OF WRITE-INS					
1301. Disability Benefits					
1302. Supplementary Contracts					
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year	2	30,000							2	30,000
17. Incurred during current year	6	73,000							6	73,000
Settled during current year:										
18.1 By payment in full	7	93,000							7	93,000
18.2 By payment on compromised claims										
18.3 Totals paid	7	93,000							7	93,000
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	7	93,000							7	93,000
19. Unpaid Dec. 31, current year (16+17-18.6)	1	10,000							1	10,000
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	304	6,292,100	(a)		17	167,900			321	6,460,000
21. Issued during year										
22. Other changes to in force (Net)	(19)	(313,500)							(19)	(313,500)
23. In force December 31 of current year	285	5,978,600	(a)		17	167,900			302	6,146,500

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	40,304,055	40,437,407		25,820,376	25,191,119
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies/certificates (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	1,041	1,117			
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)	936,618	936,618		573,055	545,294
25.6 Totals (sum of Lines 25.1 to 25.5)	937,659	937,735		573,055	545,294
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	41,241,713	41,375,142		26,393,431	25,736,413

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons
 insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Missouri
NAIC Group Code 0565

DURING THE YEAR 2020
NAIC Company Code 68985

LIFE INSURANCE

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-Ins.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include Direct Death Benefits and Maturesd Endowments Incurred and Policy Exhibit.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various accident types.

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Montana

DURING THE YEAR 2020

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68985

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	1,523				1,523
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	1,523				1,523
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits					
10. Matured endowments					
11. Annuity benefits					
12. Surrender values and withdrawals for life contracts					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health					
15. Totals					
DETAILS OF WRITE-INS					
1301. Disability Benefits					
1302. Supplementary Contracts					
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

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

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	8,514	8,542		54,983	53,638
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies/certificates (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	.60	.64			
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)	14,435	14,435		6,363	6,055
25.6 Totals (sum of Lines 25.1 to 25.5)	14,495	14,500		6,363	6,055
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	23,009	23,042		61,346	59,693

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons
 insured under indemnity only products0 .



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Nebraska

DURING THE YEAR 2020

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68985

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	14,732				14,732
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	14,732				14,732
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits					
10. Matured endowments					
11. Annuity benefits					
12. Surrender values and withdrawals for life contracts					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health					
15. Totals					
DETAILS OF WRITE-INS					
1301. Disability Benefits					
1302. Supplementary Contracts					
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										
18.2 By payment on compromised claims										
18.3 Totals paid										
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements										
19. Unpaid Dec. 31, current year (16+17-18.6)										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	27	426,000	(a)						27	426,000
21. Issued during year										
22. Other changes to in force (Net)	(5)	(104,700)							(5)	(104,700)
23. In force December 31 of current year	22	321,300	(a)						22	321,300

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	716,854	719,226		544,844	531,258
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies/certificates (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	239	257			
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)	85,116	85,116		49,734	47,325
25.6 Totals (sum of Lines 25.1 to 25.5)	85,356	85,373		49,734	47,325
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	802,210	804,599		594,578	578,583

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons
 insured under indemnity only products0 .



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Nevada

DURING THE YEAR 2020

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68985

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	7,057				7,057
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	7,057				7,057
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits					
10. Matured endowments					
11. Annuity benefits					
12. Surrender values and withdrawals for life contracts	1,577				1,577
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health					
15. Totals	1,577				1,577
DETAILS OF WRITE-INS					
1301. Disability Benefits					
1302. Supplementary Contracts					
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										
18.2 By payment on compromised claims										
18.3 Totals paid										
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements										
19. Unpaid Dec. 31, current year (16+17-18.6)										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	8	120,000	(a)						8	120,000
21. Issued during year										
22. Other changes to in force (Net)	(1)	(10,000)							(1)	(10,000)
23. In force December 31 of current year	7	110,000	(a)						7	110,000

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	352,126	353,291		382,920	373,301
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies/certificates (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	380	408			
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)	65,026	65,026		38,453	36,590
25.6 Totals (sum of Lines 25.1 to 25.5)	65,406	65,434		38,453	36,590
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	417,532	418,725		421,373	409,891

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons
 insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF New Hampshire

DURING THE YEAR 2020

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68985

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	984				984
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	984				984
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits					
10. Matured endowments					
11. Annuity benefits					
12. Surrender values and withdrawals for life contracts					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health					
15. Totals					
DETAILS OF WRITE-INS					
1301. Disability Benefits					
1302. Supplementary Contracts					
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										
18.2 By payment on compromised claims										
18.3 Totals paid										
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements										
19. Unpaid Dec. 31, current year (16+17-18.6)										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	2	24,600	(a)						2	24,600
21. Issued during year										
22. Other changes to in force (Net)										
23. In force December 31 of current year	2	24,600	(a)						2	24,600

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	477,173	478,752		288,984	281,675
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies/certificates (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)		233			
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)	51,385	51,385		21,789	20,733
25.6 Totals (sum of Lines 25.1 to 25.5)	51,617	51,634		21,789	20,733
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	528,790	530,386		310,773	302,408

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons
 insured under indemnity only products0 .



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF New Jersey

DURING THE YEAR 2020

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68985

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	50,584				50,584
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	50,584				50,584
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	65,000				65,000
10. Matured endowments					
11. Annuity benefits					
12. Surrender values and withdrawals for life contracts					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health					
15. Totals	65,000				65,000
DETAILS OF WRITE-INS					
1301. Disability Benefits					
1302. Supplementary Contracts					
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pol. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pol. & Certifs.	Amount	No. of Pol. & Certifs.	Amount
16. Unpaid December 31, prior year	1	10,000							1	10,000
17. Incurred during current year	3	55,000							3	55,000
Settled during current year:										
18.1 By payment in full	4	65,000							4	65,000
18.2 By payment on compromised claims										
18.3 Totals paid	4	65,000							4	65,000
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	4	65,000							4	65,000
19. Unpaid Dec. 31, current year (16+17-18.6)										
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	69	1,734,900	(a)						69	1,734,900
21. Issued during year										
22. Other changes to in force (Net)	(10)	(506,900)							(10)	(506,900)
23. In force December 31 of current year	59	1,228,000	(a)						59	1,228,000

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	1,226,981	1,231,041		894,211	871,515
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies/certificates (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	168	180			
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)	524	524		265	252
25.6 Totals (sum of Lines 25.1 to 25.5)	692	705		265	252
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	1,227,674	1,231,746		894,476	871,767

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF New Mexico

DURING THE YEAR 2020

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68985

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various accident types.

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF New York
 NAIC Group Code 0565

DURING THE YEAR 2020
 NAIC Company Code 68985

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance					
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)					
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits					
10. Matured endowments					
11. Annuity benefits					
12. Surrender values and withdrawals for life contracts					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health					
15. Totals					
DETAILS OF WRITE-INS					
1301. Disability Benefits					
1302. Supplementary Contracts					
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

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

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)				140	136
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies/certificates (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)				140	136

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons
 insured under indemnity only products0 .



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF North Carolina

DURING THE YEAR 2020

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68985

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	301,060				301,060
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	301,060				301,060
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	175,000				175,000
10. Matured endowments					
11. Annuity benefits					
12. Surrender values and withdrawals for life contracts	9,576				9,576
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health					
15. Totals	184,576				184,576
DETAILS OF WRITE-INS					
1301. Disability Benefits					
1302. Supplementary Contracts					
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pol. & Certifs.	Amount	No. of Ind. Pol. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pol. & Certifs.	Amount	No. of Pol. & Certifs.	Amount
16. Unpaid December 31, prior year	3	30,100							3	30,100
17. Incurred during current year	12	188,500							12	188,500
Settled during current year:										
18.1 By payment in full	10	175,000							10	175,000
18.2 By payment on compromised claims										
18.3 Totals paid	10	175,000							10	175,000
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	10	175,000							10	175,000
19. Unpaid Dec. 31, current year (16+17-18.6)	5	43,600							5	43,600
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	532	10,533,900	(a)						532	10,533,900
21. Issued during year										
22. Other changes to in force (Net)	(90)	(2,529,700)							(90)	(2,529,700)
23. In force December 31 of current year	442	8,004,200	(a)						442	8,004,200

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	16,561,543	16,616,340		9,612,591	9,368,775
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies/certificates (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	2,541	2,727			
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)	740,988	740,988		395,803	376,629
25.6 Totals (sum of Lines 25.1 to 25.5)	743,529	743,715		395,803	376,629
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	17,305,072	17,360,055		10,008,395	9,745,404

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF North Dakota

DURING THE YEAR 2020

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68985

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	4,260				4,260
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	4,260				4,260
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits					
10. Matured endowments					
11. Annuity benefits					
12. Surrender values and withdrawals for life contracts					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health					
15. Totals					
DETAILS OF WRITE-INS					
1301. Disability Benefits					
1302. Supplementary Contracts					
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										
18.2 By payment on compromised claims										
18.3 Totals paid										
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements										
19. Unpaid Dec. 31, current year (16+17-18.6)										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	9	374,000	(a)						9	374,000
21. Issued during year										
22. Other changes to in force (Net)	(1)	(30,000)							(1)	(30,000)
23. In force December 31 of current year	8	344,000	(a)						8	344,000

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	2,922,063	2,931,731		1,425,346	1,389,558
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies/certificates (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	105	113			
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)	16,272	16,272		10,192	9,698
25.6 Totals (sum of Lines 25.1 to 25.5)	16,377	16,384		10,192	9,698
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	2,938,439	2,948,115		1,435,538	1,399,256

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons
 insured under indemnity only products0 .



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Ohio

DURING THE YEAR 2020

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68985

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-Ins.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various accident types.

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Oklahoma
NAIC Group Code 0565

DURING THE YEAR 2020
NAIC Company Code 68985

LIFE INSURANCE

Table with 5 columns: Ordinary, Credit Life (Group and Individual), Group, Industrial, Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-Ins.

Table with 10 columns: Ordinary (No. of Pols. & Certifs., Amount), Credit Life (No. of Ind. Pols. & Gr. Certifs., Amount), Group (No. of Certifs., Amount), Industrial (No. of Pols. & Certifs., Amount), Total (No. of Pols. & Certifs., Amount). Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: Direct Premiums, Direct Premiums Earned, Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, Direct Losses Paid, Direct Losses Incurred. Rows include Group Policies, Federal Employees Health Benefits Plan, Medicare Title XVIII, and other accident only policies.

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Oregon

DURING THE YEAR 2020

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68985

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	24,276				24,276
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	24,276				24,276
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	10,000				10,000
10. Matured endowments					
11. Annuity benefits					
12. Surrender values and withdrawals for life contracts					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health					
15. Totals	10,000				10,000
DETAILS OF WRITE-INS					
1301. Disability Benefits					
1302. Supplementary Contracts					
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pol. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pol. & Certifs.	Amount	No. of Pol. & Certifs.	Amount
16. Unpaid December 31, prior year	.1	10,000							.1	10,000
17. Incurred during current year										
18.1 Settled during current year: By payment in full	.1	10,000							.1	10,000
18.2 By payment on compromised claims										
18.3 Totals paid	.1	10,000							.1	10,000
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	.1	10,000							.1	10,000
19. Unpaid Dec. 31, current year (16+17-18.6)										
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	41	775,500	(a)						41	775,500
21. Issued during year										
22. Other changes to in force (Net)	(1)	(15,000)							(1)	(15,000)
23. In force December 31 of current year	40	760,500	(a)						40	760,500

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	1,697,507	1,703,124		1,022,329	996,310
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies/certificates (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	536	576			
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)	411,995	411,995		241,260	229,572
25.6 Totals (sum of Lines 25.1 to 25.5)	412,531	412,570		241,260	229,572
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	2,110,038	2,115,694		1,263,589	1,225,882

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0 .



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Pennsylvania

DURING THE YEAR 2020

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68985

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	228,777		511		229,288
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	228,777		511		229,288
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	141,900				141,900
10. Matured endowments					
11. Annuity benefits					
12. Surrender values and withdrawals for life contracts	1,231				1,231
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health					
15. Totals	143,131				143,131
DETAILS OF WRITE-INS					
1301. Disability Benefits					
1302. Supplementary Contracts					
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year	.1	20,000							.1	20,000
17. Incurred during current year	22	121,900							22	121,900
Settled during current year:										
18.1 By payment in full	23	141,900							23	141,900
18.2 By payment on compromised claims										
18.3 Totals paid	23	141,900							23	141,900
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	23	141,900							23	141,900
19. Unpaid Dec. 31, current year (16+17-18.6)										
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	407	7,770,700	(a)		1	5,000			408	7,775,700
21. Issued during year										
22. Other changes to in force (Net)	(30)	(936,200)							(30)	(936,200)
23. In force December 31 of current year	377	6,834,500	(a)		1	5,000			378	6,839,500

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	2,552,824	2,561,270		1,387,585	1,352,645
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies/certificates (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	1,828	1,962			
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)	77,729	77,729		42,556	40,494
25.6 Totals (sum of Lines 25.1 to 25.5)	79,558	79,691		42,556	40,494
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	2,632,382	2,640,962		1,430,141	1,393,139

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons
 insured under indemnity only products0 .



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Rhode Island

DURING THE YEAR 2020

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68985

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various accident types.

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF South Carolina

DURING THE YEAR 2020

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68985

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b), Federal Employees Health Benefits Plan, Medicare Title XVIII, and various accident types.

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF South Dakota

DURING THE YEAR 2020

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68985

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-Ins.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various accident types.

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Tennessee

DURING THE YEAR 2020

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68985

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	284,575		2,177		286,753
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	284,575		2,177		286,753
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	263,700				263,700
10. Matured endowments					
11. Annuity benefits					
12. Surrender values and withdrawals for life contracts	4,405				4,405
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health					
15. Totals	268,105				268,105
DETAILS OF WRITE-INS					
1301. Disability Benefits					
1302. Supplementary Contracts					
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year	.1	10,000							.1	10,000
17. Incurred during current year	27	284,600							27	284,600
Settled during current year:										
18.1 By payment in full	24	263,700							24	263,700
18.2 By payment on compromised claims										
18.3 Totals paid	24	263,700							24	263,700
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	24	263,700							24	263,700
19. Unpaid Dec. 31, current year (16+17-18.6)	4	30,900							4	30,900
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	474	8,466,100	(a)		.6	62,500			480	8,528,600
21. Issued during year										
22. Other changes to in force (Net)	(62)	(1,371,300)			(1)	(7,500)			(63)	(1,378,800)
23. In force December 31 of current year	412	7,094,800	(a)		5	55,000			417	7,149,800

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	2,703,696	2,712,642		1,884,642	1,838,672
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies/certificates (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	1,699	1,823		537	537
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)	227,998	227,998		119,684	113,886
25.6 Totals (sum of Lines 25.1 to 25.5)	229,697	229,821		120,221	114,423
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	2,933,393	2,942,463		2,004,863	1,953,095

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Texas

DURING THE YEAR 2020

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68985

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: 1-2 Ordinary (No. of Pols. & Certifs., Amount), 3-4 Credit Life (No. of Ind. Pols. & Gr. Certifs., Amount), 5-6 Group (No. of Certifs., Amount), 7-8 Industrial (No. of Pols. & Certifs., Amount), 9-10 Total (No. of Pols. & Certifs., Amount). Rows include Matures and Endowments Incurred and Policy Exhibit.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various accident types.

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Utah
NAIC Group Code 0565

DURING THE YEAR 2020
NAIC Company Code 68985

LIFE INSURANCE

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include Maturity and Endowment Incurred and Policy Exhibit.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various accident types.

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Vermont

DURING THE YEAR 2020

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68985

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-Ins.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various accident types.

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Virginia

DURING THE YEAR 2020

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68985

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	134,408				134,408
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	134,408				134,408
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	50,000				50,000
10. Matured endowments					
11. Annuity benefits					
12. Surrender values and withdrawals for life contracts	5,726				5,726
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health					
15. Totals	55,726				55,726
DETAILS OF WRITE-INS					
1301. Disability Benefits					
1302. Supplementary Contracts					
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year										
17. Incurred during current year	3	50,000							3	50,000
Settled during current year:										
18.1 By payment in full	3	50,000							3	50,000
18.2 By payment on compromised claims										
18.3 Totals paid	3	50,000							3	50,000
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	3	50,000							3	50,000
19. Unpaid Dec. 31, current year (16+17-18.6)										
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	237	5,110,200	(a)						237	5,110,200
21. Issued during year										
22. Other changes to in force (Net)	(30)	(1,055,400)							(30)	(1,055,400)
23. In force December 31 of current year	207	4,054,800	(a)						207	4,054,800

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	1,677,225	1,682,775		1,370,443	1,335,906
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies/certificates (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	983	1,055			
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)	4,439	4,439		930	885
25.6 Totals (sum of Lines 25.1 to 25.5)	5,421	5,493		930	885
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	1,682,647	1,688,268		1,371,373	1,336,791

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons
 insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Washington

DURING THE YEAR 2020

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68985

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	39,301				39,301
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	39,301				39,301
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits					
10. Matured endowments					
11. Annuity benefits					
12. Surrender values and withdrawals for life contracts	5,226				5,226
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health					
15. Totals	5,226				5,226
DETAILS OF WRITE-INS					
1301. Disability Benefits					
1302. Supplementary Contracts					
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										
18.2 By payment on compromised claims										
18.3 Totals paid										
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements										
19. Unpaid Dec. 31, current year (16+17-18.6)										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	58	1,242,600	(a)						58	1,242,600
21. Issued during year										
22. Other changes to in force (Net)	(9)	(262,000)							(9)	(262,000)
23. In force December 31 of current year	49	980,600	(a)						49	980,600

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	792,841	795,464		661,310	644,526
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies/certificates (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	1,014	1,088			
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)	170,896	170,896		57,027	54,264
25.6 Totals (sum of Lines 25.1 to 25.5)	171,910	171,984		57,027	54,264
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	964,751	967,448		718,337	698,790

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons
 insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF West Virginia

DURING THE YEAR 2020

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68985

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, and Direct Claims and Benefits Paid.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include Direct Death Benefits and Matures Endowments Incurred and Policy Exhibit.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various accident types.

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Wisconsin

DURING THE YEAR 2020

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68985

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	81,559				81,559
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	81,559				81,559
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	38,600				38,600
10. Matured endowments					
11. Annuity benefits					
12. Surrender values and withdrawals for life contracts	510				510
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health					
15. Totals	39,110				39,110
DETAILS OF WRITE-INS					
1301. Disability Benefits					
1302. Supplementary Contracts					
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pol. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pol. & Certifs.	Amount	No. of Pol. & Certifs.	Amount
16. Unpaid December 31, prior year	3	16,000							3	16,000
17. Incurred during current year	4	37,600							4	37,600
Settled during current year:										
18.1 By payment in full	5	38,600							5	38,600
18.2 By payment on compromised claims										
18.3 Totals paid	5	38,600							5	38,600
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	5	38,600							5	38,600
19. Unpaid Dec. 31, current year (16+17-18.6)	2	15,000							2	15,000
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	141	2,681,200	(a)						141	2,681,200
21. Issued during year										
22. Other changes to in force (Net)	(20)	(523,300)							(20)	(523,300)
23. In force December 31 of current year	121	2,157,900	(a)						121	2,157,900

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	3,327,968	3,338,979		2,093,127	2,040,302
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies/certificates (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	1,079	1,158		300	300
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)	565,235	565,235		320,491	304,965
25.6 Totals (sum of Lines 25.1 to 25.5)	566,314	566,393		320,791	305,265
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	3,894,282	3,905,372		2,413,918	2,345,567

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Wyoming
 NAIC Group Code 0565

DURING THE YEAR 2020
 NAIC Company Code 68985

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	777				777
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	777				777
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits					
10. Matured endowments					
11. Annuity benefits					
12. Surrender values and withdrawals for life contracts					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health					
15. Totals					
DETAILS OF WRITE-INS					
1301. Disability Benefits					
1302. Supplementary Contracts					
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pol. & Certifs.	Amount	No. of Ind. Pol. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pol. & Certifs.	Amount	No. of Pol. & Certifs.	Amount
16. Unpaid December 31, prior year										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										
18.2 By payment on compromised claims										
18.3 Totals paid										
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements										
19. Unpaid Dec. 31, current year (16+17-18.6)										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	1	15,000	(a)						1	15,000
21. Issued during year										
22. Other changes to in force (Net)										
23. In force December 31 of current year	1	15,000	(a)						1	15,000

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	181,051	181,650		187,451	182,855
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies/certificates (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)	18,524	18,524		10,004	9,519
25.6 Totals (sum of Lines 25.1 to 25.5)	18,524	18,524		10,004	9,519
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	199,575	200,174		197,455	192,375

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0 .



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF American Samoa

DURING THE YEAR 2020

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68985

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS, DIRECT CLAIMS AND BENEFITS PAID, and DETAILS OF WRITE-INS.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED and POLICY EXHIBIT.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include: 24 Group Policies (b), 24.1 Federal Employees Health Benefits Plan premium (b), 24.2 Credit (Group and Individual), 24.3 Collectively renewable policies/certificates (b), 24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies: 25.1 Non-cancelable (b), 25.2 Guaranteed renewable (b), 25.3 Non-renewable for stated reasons only (b), 25.4 Other accident only, 25.5 All other (b), 25.6 Totals (sum of Lines 25.1 to 25.5), 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Guam
 NAIC Group Code 0565

DURING THE YEAR 2020
 NAIC Company Code 68985

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance					
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)					
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits					
10. Matured endowments					
11. Annuity benefits					
12. Surrender values and withdrawals for life contracts					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health					
15. Totals					
DETAILS OF WRITE-INS					
1301. Disability Benefits					
1302. Supplementary Contracts					
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

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

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)				1,453	1,415
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies/certificates (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)				1,453	1,415

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Puerto Rico

DURING THE YEAR 2020

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68985

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-Ins.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various sub-categories.

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF U.S. Virgin Islands

DURING THE YEAR 2020

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68985

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance					
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)					
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits					
10. Matured endowments					
11. Annuity benefits					
12. Surrender values and withdrawals for life contracts					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health					
15. Totals					
DETAILS OF WRITE-INS					
1301. Disability Benefits					
1302. Supplementary Contracts					
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

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

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)				668	651
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies/certificates (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)				668	651

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons
 insured under indemnity only products0 .



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Canada

DURING THE YEAR 2020

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68985

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance					
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)					
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits					
10. Matured endowments					
11. Annuity benefits					
12. Surrender values and withdrawals for life contracts					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health					
15. Totals					
DETAILS OF WRITE-INS					
1301. Disability Benefits					
1302. Supplementary Contracts					
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

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

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

ACCIDENT AND HEALTH INSURANCE

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

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons
 insured under indemnity only products0 .



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Other Alien

DURING THE YEAR 2020

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68985

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS, DIRECT CLAIMS AND BENEFITS PAID, and DETAILS OF WRITE-INS.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED and POLICY EXHIBIT.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include: 24 Group Policies (b), 24.1 Federal Employees Health Benefits Plan premium (b), 24.2 Credit (Group and Individual), 24.3 Collectively renewable policies/certificates (b), 24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies: 25.1 Non-cancelable (b), 25.2 Guaranteed renewable (b), 25.3 Non-renewable for stated reasons only (b), 25.4 Other accident only, 25.5 All other (b), 25.6 Totals (sum of Lines 25.1 to 25.5), 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Other Aliens

DURING THE YEAR 2020

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68985

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS, DIRECT CLAIMS AND BENEFITS PAID, and DETAILS OF WRITE-INS.

Table with 10 columns: 1-2 Ordinary (No. of Pols. & Certifs., Amount), 3-4 Credit Life (No. of Ind. Pols. & Gr. Certifs., Amount), 5-6 Group (No. of Certifs., Amount), 7-8 Industrial (No. of Pols. & Certifs., Amount), 9-10 Total (No. of Pols. & Certifs., Amount). Rows include: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED and POLICY EXHIBIT.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include: 24 Group Policies (b), 24.1 Federal Employees Health Benefits Plan premium (b), 24.2 Credit (Group and Individual), 24.3 Collectively renewable policies/certificates (b), 24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies: 25.1 Non-cancelable (b), 25.2 Guaranteed renewable (b), 25.3 Non-renewable for stated reasons only (b), 25.4 Other accident only, 25.5 All other (b), 25.6 Totals (sum of Lines 25.1 to 25.5), 26 Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Grand Total

DURING THE YEAR 2020

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68985

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	6,464,862		65,205		6,530,067
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	6,464,862		65,205		6,530,067
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	5,112,111		125,000		5,237,111
10. Matured endowments					
11. Annuity benefits	13,329				13,329
12. Surrender values and withdrawals for life contracts	233,911				233,911
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health					
15. Totals	5,359,351		125,000		5,484,351
DETAILS OF WRITE-INS					
1301. Disability Benefits					
1302. Supplementary Contracts					
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pol. & Certifs.	Amount	No. of Ind. Pol. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pol. & Certifs.	Amount	No. of Pol. & Certifs.	Amount
16. Unpaid December 31, prior year	54	843,300			1	10,000			55	853,300
17. Incurred during current year	357	5,253,221			17	137,500			374	5,390,721
Settled during current year:										
18.1 By payment in full	352	5,112,111			14	125,000			366	5,237,111
18.2 By payment on compromised claims										
18.3 Totals paid	352	5,112,111			14	125,000			366	5,237,111
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	352	5,112,111			14	125,000			366	5,237,111
19. Unpaid Dec. 31, current year (16+17-18.6)	59	984,410			4	22,500			63	1,006,910
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	10,984	231,685,300	(a)		149	1,860,000			11,133	233,545,300
21. Issued during year										
22. Other changes to in force (Net)	(1,217)	(31,912,750)			(21)	(207,500)			(1,238)	(32,120,250)
23. In force December 31 of current year	9,767	199,772,550	(a)		128	1,652,500			9,895	201,425,050

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	240,619,785	241,415,915		149,698,551	145,971,252
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies/certificates (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	53,510	57,429		200,837	200,837
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)	13,365,383	13,365,383		7,715,027	7,341,286
25.6 Totals (sum of Lines 25.1 to 25.5)	13,418,893	13,422,812		7,915,864	7,542,123
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	254,038,679	254,838,727		157,614,415	153,513,375

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

EXHIBIT OF LIFE INSURANCE

(\$000 Omitted for Amounts of Life Insurance)

	Industrial		Ordinary		Credit Life (Group and Individual)		Group			10 Total Amount of Insurance
	1	2	3	4	5	6	Number of		9	
	Number of Policies	Amount of Insurance	Number of Policies	Amount of Insurance	Number of Individual Policies and Group Certificates	Amount of Insurance	Policies	Certificates	Amount of Insurance	
1. In force end of prior year			10,984	231,685			149	149	1,860	233,545
2. Issued during year										
3. Reinsurance assumed										
4. Revived during year										
5. Increased during year (net)										
6. Subtotals, Lines 2 to 5										
7. Additions by dividends during year	XXX		XXX		XXX		XXX	XXX		
8. Aggregate write-ins for increases										
9. Totals (Lines 1 and 6 to 8)			10,984	231,685			149	149	1,860	233,545
Deductions during year:										
10. Death			357	5,253			XXX	17	138	5,391
11. Maturity							XXX			
12. Disability							XXX			
13. Expiry			35	441						441
14. Surrender			67	1,055						1,055
15. Lapse			745	19,803			4	4	70	19,873
16. Conversion			13	260			XXX	XXX	XXX	260
17. Decreased (net)				5,100			124			5,100
18. Reinsurance										
19. Aggregate write-ins for decreases										
20. Totals (Lines 10 to 19)			1,217	31,913			128	21	208	32,120
21. In force end of year (b) (Line 9 minus Line 20)			9,767	199,773			21	128	1,653	201,425
22. Reinsurance ceded end of year	XXX		XXX	28,752	XXX		XXX	XXX	220	28,972
23. Line 21 minus Line 22	XXX		XXX	171,020	XXX	(a)	XXX	XXX	1,433	172,453
DETAILS OF WRITE-INS										
0801.										
0802.										
0803.										
0898. Summary of remaining write-ins for Line 8 from overflow page										
0899. TOTALS (Lines 0801 thru 0803 plus 0898) (Line 8 above)										
1901.										
1902.										
1903.										
1998. Summary of remaining write-ins for Line 19 from overflow page										
1999. TOTALS (Lines 1901 thru 1903 plus 1998) (Line 19 above)										

Life, Accident and Health Companies Only:

(a) Group \$; Individual \$

Fraternal Benefit Societies Only:

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

Additional accidental death benefits included in life certificates were in amount \$, Does the society collect any contributions from members for general expenses of the society under fully paid-up certificates? Yes [] No []

If not, how are such expenses met?

.....

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

EXHIBIT OF LIFE INSURANCE

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

	Industrial		Ordinary	
	1 Number of Policies	2 Amount of Insurance	3 Number of Policies	4 Amount of Insurance
24. Additions by dividends	XXX		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	3 Number of Policies	4 Amount of Insurance
27. Term policies - decreasing				
28. Term policies - other			4,406	111,525
29. Other term insurance - decreasing	XXX		XXX	
30. Other term insurance	XXX		XXX	
31. Totals (Lines 27 to 30)			4,406	111,525
Reconciliation to Lines 2 and 21:				
32. Term additions	XXX		XXX	
33. Totals, extended term insurance	XXX	XXX		
34. Totals, whole life and endowment			5,361	88,248
35. Totals (Lines 31 to 34)			9,767	199,773

CLASSIFICATION OF AMOUNT OF INSURANCE BY PARTICIPATING STATUS

	Issued During Year (Included in Line 2)		In Force End of Year (Included in Line 21)	
	1 Non-Participating	2 Participating	3 Non-Participating	4 Participating
36. Industrial				
37. Ordinary			199,773	
38. Credit Life (Group and Individual)				
39. Group			1,653	
40. Totals (Lines 36 to 39)			201,425	

ADDITIONAL INFORMATION ON CREDIT LIFE AND GROUP INSURANCE

	Credit Life		Group	
	1 Number of Individual Policies and Group Certificates	2 Amount of Insurance	3 Number of Certificates	4 Amount of Insurance
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 group 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	44,405
---	--------

BASIS OF CALCULATION OF ORDINARY TERM INSURANCE

47. State basis of calculation of (47.1) decreasing term insurance contained in 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 Provisions	Industrial		Ordinary		Credit		Group	
	1 Number of Policies	2 Amount of Insurance	3 Number of Policies	4 Amount of Insurance	5 Number of Policies	6 Amount of Insurance	7 Number of Certificates	8 Amount of Insurance
48. Waiver of Premium								
49. Disability Income								
50. Extended Benefits			XXX	XXX				
51. Other								
52. Total		(a)		(a)		(a)		(a)

(a) See the Annual Audited Financial Reports section of the Annual Statement for details.

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY
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				
2. Issued during year				
3. Reinsurance assumed				
4. Increased during year (net)				
5. Total (Lines 1 to 4)				
Deductions during year:				
6. Decreased (net)				
7. Reinsurance ceded				
8. Totals (Lines 6 and 7)				
9. In force end of year (line 5 minus line 8)				
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		10		
2. Issued during year				
3. Reinsurance assumed				
4. Increased during year (net)				
5. Totals (Lines 1 to 4)		10		
Deductions during year:				
6. Decreased (net)		2		
7. Reinsurance ceded				
8. Totals (Lines 6 and 7)		2		
9. In force end of year (line 5 minus line 8)		8		
Income now payable:				
10. Amount of income payable	(a)	XXX	XXX	(a)
Deferred fully paid:				
11. Account balance	XXX	(a) 57,534	XXX	(a)
Deferred not fully paid:				
12. Account balance	XXX	(a)	XXX	(a)

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	599,049	238,748,307			31,522	15,622,612
2. Issued during year	142,890	56,987,756				
3. Reinsurance assumed						
4. Increased during year (net)		XXX		XXX		XXX
5. Totals (Lines 1 to 4)	741,939	XXX		XXX	31,522	XXX
Deductions during year:						
6. Conversions		XXX	XXX	XXX	XXX	XXX
7. Decreased (net)	112,167	XXX		XXX	6,900	XXX
8. Reinsurance ceded		XXX		XXX		XXX
9. Totals (Lines 6 to 8)	112,167	XXX		XXX	6,900	XXX
10. In force end of year (line 5 minus line 9)	629,772	(a) 251,876,089		(a)	24,622	(a) 12,614,475

DEPOSIT FUNDS AND DIVIDEND ACCUMULATIONS

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

NONE

(a) See the Annual Audited Financial Reports section of the annual statement instructions.

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY
FORM FOR CALCULATING THE INTEREST MAINTENANCE RESERVE

INTEREST MAINTENANCE RESERVE

	1 Amount
1. Reserve as of December 31, Prior Year	(43,725)
2. Current year's realized pre-tax capital gains/(losses) of \$802 transferred into the reserve net of taxes of \$168	634
3. Adjustment for current year's liability gains/(losses) released from the reserve	
4. Balance before reduction for amount transferred to Summary of Operations (Line 1 + Line 2 + Line 3)	(43,092)
5. Current year's amortization released to Summary of Operations (Amortization, Line 1, Column 4)	7,010
6. Reserve as of December 31, current year (Line 4 minus Line 5)	(50,101)

AMORTIZATION

Year of Amortization	1 Reserve as of December 31, Prior Year	2 Current Year's Realized Capital Gains/(Losses) Transferred into the Reserve Net of Taxes	3 Adjustment for Current Year's Liability Gains/(Losses) Released From the Reserve	4 Balance Before Reduction for Current Year's Amortization (Cols. 1 + 2 + 3)
1. 2020	6,846	164		7,010
2. 2021	14,248	153		14,401
3. 2022	7,692	137		7,829
4. 2023	2,238	100		2,338
5. 2024	(2,717)	60		(2,656)
6. 2025	(5,424)	20		(5,404)
7. 2026	(5,458)			(5,458)
8. 2027	(5,663)			(5,663)
9. 2028	(6,165)			(6,165)
10. 2029	(6,468)			(6,468)
11. 2030	(6,538)			(6,538)
12. 2031	(6,105)			(6,105)
13. 2032	(5,634)			(5,634)
14. 2033	(5,066)			(5,066)
15. 2034	(4,655)			(4,655)
16. 2035	(3,967)			(3,967)
17. 2036	(3,338)			(3,338)
18. 2037	(2,743)			(2,743)
19. 2038	(2,071)			(2,071)
20. 2039	(1,458)			(1,458)
21. 2040	(896)			(896)
22. 2041	(589)			(589)
23. 2042	(248)			(248)
24. 2043	(31)			(31)
25. 2044	173			173
26. 2045	230			230
27. 2046	81			81
28. 2047				
29. 2048				
30. 2049				
31. 2050 and Later				
32. Total (Lines 1 to 31)	(43,725)	634		(43,092)

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

ASSET VALUATION RESERVE

	Default Component			Equity Component			7 Total Amount (Cols. 3 + 6)
	1 Other Than Mortgage Loans	2 Mortgage Loans	3 Total (Cols. 1 + 2)	4 Common Stock	5 Real Estate and Other Invested Assets	6 Total (Cols. 4 + 5)	
1. Reserve as of December 31, prior year	280,090		280,090	1,361	218,645	220,005	500,095
2. Realized capital gains/(losses) net of taxes - General Account							
3. Realized capital gains/(losses) net of taxes - Separate Accounts							
4. Unrealized capital gains/(losses) net of deferred taxes - General Account							
5. Unrealized capital gains/(losses) net of deferred taxes - Separate Accounts							
6. Capital gains credited/(losses charged) to contract benefits, payments or reserves							
7. Basic contribution	144,938		144,938				144,938
8. Accumulated balances (Lines 1 through 5 - 6 + 7)	425,028		425,028	1,361	218,645	220,005	645,033
9. Maximum reserve	730,869		730,869	97	480,203	480,300	1,211,169
10. Reserve objective	436,334		436,334	61	480,203	480,264	916,598
11. 20% of (Line 10 - Line 8)	2,261		2,261	(260)	52,312	52,052	54,313
12. Balance before transfers (Lines 8 + 11)	427,289		427,289	1,101	270,956	272,057	699,346
13. Transfers				(1,004)	1,004		
14. Voluntary contribution							
15. Adjustment down to maximum/up to zero							
16. Reserve as of December 31, current year (Lines 12 + 13 + 14 + 15)	427,289		427,289	97	271,960	272,057	699,346

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

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

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution		Reserve Objective		Maximum Reserve	
							5 Factor	6 Amount (Cols. 4 x 5)	7 Factor	8 Amount (Cols. 4 x 7)	9 Factor	10 Amount (Cols. 4 x 9)
LONG-TERM BONDS												
1.		Exempt Obligations	2,105,120	XXX	XXX	2,105,120	0.0000		0.0000		0.0000	
2.1	1	NAIC Designation Category 1.A	577,019	XXX	XXX	577,019	0.0005	289	0.0016	923	0.0033	1,904
2.2	1	NAIC Designation Category 1.B	2,132,117	XXX	XXX	2,132,117	0.0005	1,066	0.0016	3,411	0.0033	7,036
2.3	1	NAIC Designation Category 1.C	4,698,872	XXX	XXX	4,698,872	0.0005	2,349	0.0016	7,518	0.0033	15,506
2.4	1	NAIC Designation Category 1.D	4,980,207	XXX	XXX	4,980,207	0.0005	2,490	0.0016	7,968	0.0033	16,435
2.5	1	NAIC Designation Category 1.E	819,128	XXX	XXX	819,128	0.0005	410	0.0016	1,311	0.0033	2,703
2.6	1	NAIC Designation Category 1.F	5,355,844	XXX	XXX	5,355,844	0.0005	2,678	0.0016	8,569	0.0033	17,674
2.7	1	NAIC Designation Category 1.G	12,361,700	XXX	XXX	12,361,700	0.0005	6,181	0.0016	19,779	0.0033	40,794
2.8		Subtotal NAIC 1 (2.1+2.2+2.3+2.4+2.5+2.6+2.7)	30,924,888	XXX	XXX	30,924,888	XXX	15,462	XXX	49,480	XXX	102,052
3.1	2	NAIC Designation Category 2.A	18,907,458	XXX	XXX	18,907,458	0.0021	39,706	0.0064	121,008	0.0106	200,419
3.2	2	NAIC Designation Category 2.B	28,335,173	XXX	XXX	28,335,173	0.0021	59,504	0.0064	181,345	0.0106	300,353
3.3	2	NAIC Designation Category 2.C	4,990,009	XXX	XXX	4,990,009	0.0021	10,479	0.0064	31,936	0.0106	52,894
3.4		Subtotal NAIC 2 (3.1+3.2+3.3)	52,232,640	XXX	XXX	52,232,640	XXX	109,689	XXX	334,289	XXX	553,666
4.1	3	NAIC Designation Category 3.A	1,998,699	XXX	XXX	1,998,699	0.0099	19,787	0.0263	52,566	0.0376	75,151
4.2	3	NAIC Designation Category 3.B		XXX	XXX		0.0099		0.0263		0.0376	
4.3	3	NAIC Designation Category 3.C		XXX	XXX		0.0099		0.0263		0.0376	
4.4		Subtotal NAIC 3 (4.1+4.2+4.3)	1,998,699	XXX	XXX	1,998,699	XXX	19,787	XXX	52,566	XXX	75,151
5.1	4	NAIC Designation Category 4.A		XXX	XXX		0.0245		0.0572		0.0817	
5.2	4	NAIC Designation Category 4.B		XXX	XXX		0.0245		0.0572		0.0817	
5.3	4	NAIC Designation Category 4.C		XXX	XXX		0.0245		0.0572		0.0817	
5.4		Subtotal NAIC 4 (5.1+5.2+5.3)		XXX	XXX		XXX		XXX		XXX	
6.1	5	NAIC Designation Category 5.A		XXX	XXX		0.0630		0.1128		0.1880	
6.2	5	NAIC Designation Category 5.B		XXX	XXX		0.0630		0.1128		0.1880	
6.3	5	NAIC Designation Category 5.C		XXX	XXX		0.0630		0.1128		0.1880	
6.4		Subtotal NAIC 5 (6.1+6.2+6.3)		XXX	XXX		XXX		XXX		XXX	
7.	6	NAIC 6		XXX	XXX		0.0000		0.2370		0.2370	
8.		Total Unrated Multi-class Securities Acquired by Conversion		XXX	XXX		XXX		XXX		XXX	
9.		Total Long-Term Bonds (1+2.8+3.4+4.4+5.4+6.4+7+8)	87,261,347	XXX	XXX	87,261,347	XXX	144,938	XXX	436,334	XXX	730,869
PREFERRED STOCKS												
10.	1	Highest Quality		XXX	XXX		0.0005		0.0016		0.0033	
11.	2	High Quality		XXX	XXX		0.0021		0.0064		0.0106	
12.	3	Medium Quality		XXX	XXX		0.0099		0.0263		0.0376	
13.	4	Low Quality		XXX	XXX		0.0245		0.0572		0.0817	
14.	5	Lower Quality		XXX	XXX		0.0630		0.1128		0.1880	
15.	6	In or Near Default		XXX	XXX		0.0000		0.2370		0.2370	
16.		Affiliated Life with AVR		XXX	XXX		0.0000		0.0000		0.0000	
17.		Total Preferred Stocks (Sum of Lines 10 through 16)		XXX	XXX		XXX		XXX		XXX	

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

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution		Reserve Objective		Maximum Reserve	
							5 Factor	6 Amount (Cols. 4 x 5)	7 Factor	8 Amount (Cols. 4 x 7)	9 Factor	10 Amount (Cols. 4 x 9)
SHORT-TERM BONDS												
18.		Exempt Obligations		XXX	XXX		0.0000		0.0000		0.0000	
19.1	1	NAIC Designation Category 1.A		XXX	XXX		0.0005		0.0016		0.0033	
19.2	1	NAIC Designation Category 1.B		XXX	XXX		0.0005		0.0016		0.0033	
19.3	1	NAIC Designation Category 1.C		XXX	XXX		0.0005		0.0016		0.0033	
19.4	1	NAIC Designation Category 1.D		XXX	XXX		0.0005		0.0016		0.0033	
19.5	1	NAIC Designation Category 1.E		XXX	XXX		0.0005		0.0016		0.0033	
19.6	1	NAIC Designation Category 1.F		XXX	XXX		0.0005		0.0016		0.0033	
19.7	1	NAIC Designation Category 1.G		XXX	XXX		0.0005		0.0016		0.0033	
19.8		Subtotal NAIC 1 (19.1+19.2+19.3+19.4+19.5+19.6+19.7)		XXX	XXX		XXX		XXX		XXX	
20.1	2	NAIC Designation Category 2.A		XXX	XXX		0.0021		0.0064		0.0106	
20.2	2	NAIC Designation Category 2.B		XXX	XXX		0.0021		0.0064		0.0106	
20.3	2	NAIC Designation Category 2.C		XXX	XXX		0.0021		0.0064		0.0106	
20.4		Subtotal NAIC 2 (20.1+20.2+20.3)		XXX	XXX		XXX		XXX		XXX	
21.1	3	NAIC Designation Category 3.A		XXX	XXX		0.0099		0.0263		0.0376	
21.2	3	NAIC Designation Category 3.B		XXX	XXX		0.0099		0.0263		0.0376	
21.3	3	NAIC Designation Category 3.C		XXX	XXX		0.0099		0.0263		0.0376	
21.4		Subtotal NAIC 3 (21.1+21.2+21.3)		XXX	XXX		XXX		XXX		XXX	
22.1	4	NAIC Designation Category 4.A		XXX	XXX		0.0245		0.0572		0.0817	
22.2	4	NAIC Designation Category 4.B		XXX	XXX		0.0245		0.0572		0.0817	
22.3	4	NAIC Designation Category 4.C		XXX	XXX		0.0245		0.0572		0.0817	
22.4		Subtotal NAIC 4 (22.1+22.2+22.3)		XXX	XXX		XXX		XXX		XXX	
23.1	5	NAIC Designation Category 5.A		XXX	XXX		0.0630		0.1128		0.1880	
23.2	5	NAIC Designation Category 5.B		XXX	XXX		0.0630		0.1128		0.1880	
23.3	5	NAIC Designation Category 5.C		XXX	XXX		0.0630		0.1128		0.1880	
23.4		Subtotal NAIC 5 (23.1+23.2+23.3)		XXX	XXX		XXX		XXX		XXX	
24.	6	NAIC 6		XXX	XXX		0.0000		0.2370		0.2370	
25.		Total Short-Term Bonds (18+19.8+20.4+21.4+22.4+23.4+24)		XXX	XXX		XXX		XXX		XXX	
DERIVATIVE INSTRUMENTS												
26.		Exchange Traded		XXX	XXX		0.0005		0.0016		0.0033	
27.	1	Highest Quality		XXX	XXX		0.0005		0.0016		0.0033	
28.	2	High Quality		XXX	XXX		0.0021		0.0064		0.0106	
29.	3	Medium Quality		XXX	XXX		0.0099		0.0263		0.0376	
30.	4	Low Quality		XXX	XXX		0.0245		0.0572		0.0817	
31.	5	Lower Quality		XXX	XXX		0.0630		0.1128		0.1880	
32.	6	In or Near Default		XXX	XXX		0.0000		0.2370		0.2370	
33.		Total Derivative Instruments		XXX	XXX		XXX		XXX		XXX	
34.		Total (Lines 9 + 17 + 25 + 33)	87,261,347	XXX	XXX	87,261,347	XXX	144,938	XXX	436,334	XXX	730,869

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

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution		Reserve Objective		Maximum Reserve	
							5 Factor	6 Amount (Cols. 4 x 5)	7 Factor	8 Amount (Cols. 4 x 7)	9 Factor	10 Amount (Cols. 4 x 9)
MORTGAGE LOANS												
In Good Standing:												
35.		Farm Mortgages - CM1 - Highest Quality			XXX		0.0011		0.0057		0.0074	
36.		Farm Mortgages - CM2 - High Quality			XXX		0.0040		0.0114		0.0149	
37.		Farm Mortgages - CM3 - Medium Quality			XXX		0.0069		0.0200		0.0257	
38.		Farm Mortgages - CM4 - Low Medium Quality			XXX		0.0120		0.0343		0.0428	
39.		Farm Mortgages - CM5 - Low Quality			XXX		0.0183		0.0486		0.0628	
40.		Residential Mortgages - Insured or Guaranteed			XXX		0.0003		0.0007		0.0011	
41.		Residential Mortgages - All Other			XXX		0.0015		0.0034		0.0046	
42.		Commercial Mortgages - Insured or Guaranteed			XXX		0.0003		0.0007		0.0011	
43.		Commercial Mortgages - All Other - CM1 - Highest Quality			XXX		0.0011		0.0057		0.0074	
44.		Commercial Mortgages - All Other - CM2 - High Quality			XXX		0.0040		0.0114		0.0149	
45.		Commercial Mortgages - All Other - CM3 - Medium Quality			XXX		0.0069		0.0200		0.0257	
46.		Commercial Mortgages - All Other - CM4 - Low Medium Quality			XXX		0.0120		0.0343		0.0428	
47.		Commercial Mortgages - All Other - CM5 - Low Quality			XXX		0.0183		0.0486		0.0628	
Overdue, Not in Process:												
48.		Farm Mortgages			XXX		0.0480		0.0868		0.1371	
49.		Residential Mortgages - Insured or Guaranteed			XXX		0.0006		0.0014		0.0023	
50.		Residential Mortgages - All Other			XXX		0.0029		0.0066		0.0103	
51.		Commercial Mortgages - Insured or Guaranteed			XXX		0.0006		0.0014		0.0023	
52.		Commercial Mortgages - All Other			XXX		0.0480		0.0868		0.1371	
In Process of Foreclosure:												
53.		Farm Mortgages			XXX		0.0000		0.1942		0.1942	
54.		Residential Mortgages - Insured or Guaranteed			XXX		0.0000		0.0046		0.0046	
55.		Residential Mortgages - All Other			XXX		0.0000		0.0149		0.0149	
56.		Commercial Mortgages - Insured or Guaranteed			XXX		0.0000		0.0046		0.0046	
57.		Commercial Mortgages - All Other			XXX		0.0000		0.1942		0.1942	
58.		Total Schedule B Mortgages (Sum of Lines 35 through 57)			XXX		XXX		XXX		XXX	
59.		Schedule DA Mortgages			XXX		0.0034		0.0114		0.0149	
60.		Total Mortgage Loans on Real Estate (Lines 58 + 59)			XXX		XXX		XXX		XXX	

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

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution		Reserve Objective		Maximum Reserve	
							5 Factor	6 Amount (Cols. 4 x 5)	7 Factor	8 Amount (Cols. 4 x 7)	9 Factor	10 Amount (Cols. 4 x 9)
COMMON STOCK												
1.		Unaffiliated - Public		XXX	XXX		0.0000		0.1580 (a)		0.1580 (a)	
2.		Unaffiliated - Private		XXX	XXX		0.0000		0.1945		0.1945	
3.		Federal Home Loan Bank	10,000	XXX	XXX	10,000	0.0000		0.0061	61	0.0097	97
4.		Affiliated - Life with AVR		XXX	XXX		0.0000		0.0000		0.0000	
Affiliated - Investment Subsidiary:												
5.		Fixed Income - Exempt Obligations					XXX		XXX		XXX	
6.		Fixed Income - Highest Quality					XXX		XXX		XXX	
7.		Fixed Income - High Quality					XXX		XXX		XXX	
8.		Fixed Income - Medium Quality					XXX		XXX		XXX	
9.		Fixed Income - Low Quality					XXX		XXX		XXX	
10.		Fixed Income - Lower Quality					XXX		XXX		XXX	
11.		Fixed Income - In/Near Default					XXX		XXX		XXX	
12.		Unaffiliated Common Stock - Public					0.0000		0.1580 (a)		0.1580 (a)	
13.		Unaffiliated Common Stock - Private					0.0000		0.1945		0.1945	
14.		Real Estate					(b)		(b)		(b)	
15.		Affiliated - Certain Other (See SVO Purposes and Procedures Manual)		XXX	XXX		0.0000		0.1580		0.1580	
16.		Affiliated - All Other		XXX	XXX		0.0000		0.1945		0.1945	
17.		Total Common Stock (Sum of Lines 1 through 16)	10,000			10,000	XXX		XXX	61	XXX	97
REAL ESTATE												
18.		Home Office Property (General Account only)	5,265,382			5,265,382	0.0000		0.0912	480,203	0.0912	480,203
19.		Investment Properties					0.0000		0.0912		0.0912	
20.		Properties Acquired in Satisfaction of Debt					0.0000		0.1337		0.1337	
21.		Total Real Estate (Sum of Lines 18 through 20)	5,265,382			5,265,382	XXX		XXX	480,203	XXX	480,203
OTHER INVESTED ASSETS												
INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF BONDS												
22.		Exempt Obligations		XXX	XXX		0.0000		0.0000		0.0000	
23.	1	Highest Quality		XXX	XXX		0.0005		0.0016		0.0033	
24.	2	High Quality		XXX	XXX		0.0021		0.0064		0.0106	
25.	3	Medium Quality		XXX	XXX		0.0099		0.0263		0.0376	
26.	4	Low Quality		XXX	XXX		0.0245		0.0572		0.0817	
27.	5	Lower Quality		XXX	XXX		0.0630		0.1128		0.1880	
28.	6	In or Near Default		XXX	XXX		0.0000		0.2370		0.2370	
29.		Total with Bond Characteristics (Sum of Lines 22 through 28)		XXX	XXX		XXX		XXX		XXX	

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

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution		Reserve Objective		Maximum Reserve	
							5 Factor	6 Amount (Cols. 4 x 5)	7 Factor	8 Amount (Cols. 4 x 7)	9 Factor	10 Amount (Cols. 4 x 9)
INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF PREFERRED STOCKS												
30.	1	Highest Quality		XXX	XXX		0.0005		0.0016		0.0033	
31.	2	High Quality		XXX	XXX		0.0021		0.0064		0.0106	
32.	3	Medium Quality		XXX	XXX		0.0099		0.0263		0.0376	
33.	4	Low Quality		XXX	XXX		0.0245		0.0572		0.0817	
34.	5	Lower Quality		XXX	XXX		0.0630		0.1128		0.1880	
35.	6	In or Near Default		XXX	XXX		0.0000		0.2370		0.2370	
36.		Affiliated Life with AVR		XXX	XXX		0.0000		0.0000		0.0000	
37.		Total with Preferred Stock Characteristics (Sum of Lines 30 through 36)		XXX	XXX		XXX		XXX		XXX	
INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF MORTGAGE LOANS												
In Good Standing Affiliated:												
38.		Mortgages - CM1 - Highest Quality			XXX		0.0011		0.0057		0.0074	
39.		Mortgages - CM2 - High Quality			XXX		0.0040		0.0114		0.0149	
40.		Mortgages - CM3 - Medium Quality			XXX		0.0069		0.0200		0.0257	
41.		Mortgages - CM4 - Low Medium Quality			XXX		0.0120		0.0343		0.0428	
42.		Mortgages - CM5 - Low Quality			XXX		0.0183		0.0486		0.0628	
43.		Residential Mortgages - Insured or Guaranteed			XXX		0.0003		0.0007		0.0011	
44.		Residential Mortgages - All Other		XXX	XXX		0.0015		0.0034		0.0046	
45.		Commercial Mortgages - Insured or Guaranteed			XXX		0.0003		0.0007		0.0011	
Overdue, Not in Process Affiliated:												
46.		Farm Mortgages			XXX		0.0480		0.0868		0.1371	
47.		Residential Mortgages - Insured or Guaranteed			XXX		0.0006		0.0014		0.0023	
48.		Residential Mortgages - All Other			XXX		0.0029		0.0066		0.0103	
49.		Commercial Mortgages - Insured or Guaranteed			XXX		0.0006		0.0014		0.0023	
50.		Commercial Mortgages - All Other			XXX		0.0480		0.0868		0.1371	
In Process of Foreclosure Affiliated:												
51.		Farm Mortgages			XXX		0.0000		0.1942		0.1942	
52.		Residential Mortgages - Insured or Guaranteed			XXX		0.0000		0.0046		0.0046	
53.		Residential Mortgages - All Other			XXX		0.0000		0.0149		0.0149	
54.		Commercial Mortgages - Insured or Guaranteed			XXX		0.0000		0.0046		0.0046	
55.		Commercial Mortgages - All Other			XXX		0.0000		0.1942		0.1942	
56.		Total Affiliated (Sum of Lines 38 through 55)			XXX		XXX		XXX		XXX	
57.		Unaffiliated - In Good Standing With Covenants			XXX		(c)		(c)		(c)	
58.		Unaffiliated - In Good Standing Defeased With Government Securities			XXX		0.0011		0.0057		0.0074	
59.		Unaffiliated - In Good Standing Primarily Senior			XXX		0.0040		0.0114		0.0149	
60.		Unaffiliated - In Good Standing All Other			XXX		0.0069		0.0200		0.0257	
61.		Unaffiliated - Overdue, Not in Process			XXX		0.0480		0.0868		0.1371	
62.		Unaffiliated - In Process of Foreclosure			XXX		0.0000		0.1942		0.1942	
63.		Total Unaffiliated (Sum of Lines 57 through 62)			XXX		XXX		XXX		XXX	
64.		Total with Mortgage Loan Characteristics (Lines 56 + 63)			XXX		XXX		XXX		XXX	

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

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution		Reserve Objective		Maximum Reserve	
							5 Factor	6 Amount (Cols. 4 x 5)	7 Factor	8 Amount (Cols. 4 x 7)	9 Factor	10 Amount (Cols. 4 x 9)
INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF COMMON STOCK												
65.		Unaffiliated Public		XXX	XXX		0.0000		0.1580 (a)		0.1580 (a)	
66.		Unaffiliated Private		XXX	XXX		0.0000		0.1945		0.1945	
67.		Affiliated Life with AVR		XXX	XXX		0.0000		0.0000		0.0000	
68.		Affiliated Certain Other (See SVO Purposes & Procedures Manual)		XXX	XXX		0.0000		0.1580		0.1580	
69.		Affiliated Other - All Other		XXX	XXX		0.0000		0.1945		0.1945	
70.		Total with Common Stock Characteristics (Sum of Lines 65 through 69)		XXX	XXX		XXX		XXX		XXX	
INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF REAL ESTATE												
71.		Home Office Property (General Account only)					0.0000		0.0912		0.0912	
72.		Investment Properties					0.0000		0.0912		0.0912	
73.		Properties Acquired in Satisfaction of Debt					0.0000		0.1337		0.1337	
74.		Total with Real Estate Characteristics (Sum of Lines 71 through 73)					XXX		XXX		XXX	
LOW INCOME HOUSING TAX CREDIT INVESTMENTS												
75.		Guaranteed Federal Low Income Housing Tax Credit					0.0003		0.0006		0.0010	
76.		Non-guaranteed Federal Low Income Housing Tax Credit					0.0063		0.0120		0.0190	
77.		Guaranteed State Low Income Housing Tax Credit					0.0003		0.0006		0.0010	
78.		Non-guaranteed State Low Income Housing Tax Credit					0.0063		0.0120		0.0190	
79.		All Other Low Income Housing Tax Credit					0.0273		0.0600		0.0975	
80.		Total LIHTC (Sum of Lines 75 through 79)					XXX		XXX		XXX	
ALL OTHER INVESTMENTS												
81.		NAIC 1 Working Capital Finance Investments		XXX			0.0000		0.0042		0.0042	
82.		NAIC 2 Working Capital Finance Investments		XXX			0.0000		0.0137		0.0137	
83.		Other Invested Assets - Schedule BA		XXX			0.0000		0.1580		0.1580	
84.		Other Short-Term Invested Assets - Schedule DA		XXX			0.0000		0.1580		0.1580	
85.		Total All Other (Sum of Lines 81, 82, 83 and 84)		XXX			XXX		XXX		XXX	
86.		Total Other Invested Assets - Schedules BA & DA (Sum of Lines 29, 37, 64, 70, 74, 80 and 85)					XXX		XXX		XXX	

(a) Times the company's weighted average portfolio beta (Minimum .1215, Maximum .2431).
 (b) Determined using the same factors and breakdowns used for directly owned real estate.
 (c) This will be the factor associated with the risk category determined in the company generated worksheet.

Asset Valuation Reserve - Replications (Synthetic) Assets

NONE

Schedule F - Claims

NONE

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT

	Total		Group Accident and Health		Credit Accident and Health (Group and Individual)		Collectively Renewable		Other Individual Contracts										
	1 Amount	2 %	3 Amount	4 %	5 Amount	6 %	7 Amount	8 %	Non-Cancelable		Guaranteed Renewable		Non-Renewable for Stated Reasons Only		Other Accident Only		All Other		
									9 Amount	10 %	11 Amount	12 %	13 Amount	14 %	15 Amount	16 %	17 Amount	18 %	
PART 1. - ANALYSIS OF UNDERWRITING OPERATIONS																			
1. Premiums written	252,206,850	XXX	241,409,704	XXX		XXX		XXX		XXX	13,414	XXX		XXX		XXX		10,783,732	XXX
2. Premiums earned	252,242,882	XXX	241,409,704	XXX		XXX		XXX		XXX	49,446	XXX		XXX		XXX		10,783,732	XXX
3. Incurred claims	152,122,106	60.3	145,974,627	60.5							837	1.7						6,146,642	57.0
4. Cost containment expenses	4,281,357	1.7	4,092,060	1.7							933	1.9						188,364	1.7
5. Incurred claims and cost containment expenses (Lines 3 and 4)	156,403,463	62.0	150,066,687	62.2							1,770	3.6						6,335,006	58.7
6. Increase in contract reserves	265,898	0.1	500,000	0.2							(234,102)	(473.5)							
7. Commissions (a)	26,343,675	10.4	25,334,443	10.5							(1,009)	(2.0)						1,010,241	9.4
8. Other general insurance expenses	45,557,878	18.1	44,578,475	18.5							7,187	14.5						972,216	9.0
9. Taxes, licenses and fees	14,092,579	5.6	13,412,698	5.6							4,055	8.2						675,827	6.3
10. Total other expenses incurred	85,994,131	34.1	83,325,615	34.5							10,233	20.7						2,658,284	24.7
11. Aggregate write-ins for deductions	(742,817)	(0.3)	(709,303)	(0.3)							13	0.0						(33,527)	(0.3)
12. Gain from underwriting before dividends or refunds	10,322,206	4.1	8,226,705	3.4							271,532	549.2						1,823,969	16.9
13. Dividends or refunds																			
14. Gain from underwriting after dividends or refunds	10,322,206	4.1	8,226,705	3.4							271,532	549.2						1,823,969	16.9
DETAILS OF WRITE-INS																			
1101. Fines and Penalties	15,419	0.0	14,353	0.0							13	0.0						1,053	0.0
1102. Interchange fee income	(758,235)	(0.3)	(723,655)	(0.3)														(34,580)	(0.3)
1103.																			
1198. Summary of remaining write-ins for Line 11 from overflow page																			
1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)	(742,817)	(0.3)	(709,303)	(0.3)							13	0.0						(33,527)	(0.3)

(a) Includes \$0 reported as "Contract, membership and other fees retained by agents."

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY
SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT (Continued)

	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
PART 2. - RESERVES AND LIABILITIES									
A. Premium Reserves:									
1. Unearned premiums	650					650			
2. Advance premiums	4,999,093	4,999,093							
3. Reserve for rate credits									
4. Total premium reserves, current year	4,999,743	4,999,093				650			
5. Total premium reserves, prior year	5,669,580	5,627,963				41,617			
6. Increase in total premium reserves	(669,837)	(628,870)				(40,967)			
B. Contract Reserves:									
1. Additional reserves (a)	7,400,143	7,400,000				143			
2. Reserve for future contingent benefits									
3. Total contract reserves, current year	7,400,143	7,400,000				143			
4. Total contract reserves, prior year	7,134,245	6,900,000				234,245			
5. Increase in contract reserves	265,898	500,000				(234,102)			
C. Claim Reserves and Liabilities:									
1. Total current year	11,040,395	10,525,623				1,000			.513,772
2. Total prior year	15,071,133	14,254,093				1,000			.816,040
3. Increase	(4,030,738)	(3,728,470)							(302,268)

PART 3. - TEST OF PRIOR YEAR'S CLAIM RESERVES AND LIABILITIES									
1. Claims paid during the year:									
1.1 On claims incurred prior to current year	11,468,450	10,781,276							.687,174
1.2 On claims incurred during current year	144,684,394	138,921,821				837			5,761,736
2. Claim reserves and liabilities, December 31, current year:									
2.1 On claims incurred prior to current year	40,394	38,466							.1,928
2.2 On claims incurred during current year	11,000,001	10,487,157				1,000			511,844
3. Test:									
3.1 Lines 1.1 and 2.1	11,508,844	10,819,742							.689,102
3.2 Claim reserves and liabilities, December 31, prior year	15,071,133	14,254,093				1,000			.816,040
3.3 Line 3.1 minus Line 3.2	(3,562,289)	(3,434,351)				(1,000)			(126,938)

PART 4. - REINSURANCE									
A. Reinsurance Assumed:									
1. Premiums written	(6,194)	(6,211)							.17
2. Premiums earned	(6,194)	(6,211)							.17
3. Incurred claims	3,324	3,375							(51)
4. Commissions	(2,152)	(2,155)							3
B. Reinsurance Ceded:									
1. Premiums written	2,625,683					44,016			2,581,668
2. Premiums earned	2,625,683					44,016			2,581,668
3. Incurred claims	1,394,593					200,000			1,194,593
4. Commissions	780,318								780,318

(a) Includes \$7,400,000 premium deficiency reserve.

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

SCHEDULE H - PART 5 - HEALTH CLAIMS

	1 Medical	2 Dental	3 Other	4 Total
A. Direct:				
1. Incurred Claims		135,966,300	17,547,074	153,513,375
2. Beginning Claim Reserves and Liabilities		13,867,905	1,387,745	15,255,650
3. Ending Claim Reserves and Liabilities		10,113,241	1,041,369	11,154,610
4. Claims Paid		139,720,964	17,893,450	157,614,415
B. Assumed Reinsurance:				
5. Incurred Claims.....		3,583	(259)	3,324
6. Beginning Claim Reserves and Liabilities		1,913	251	2,164
7. Ending Claim Reserves and Liabilities		5	272	277
8. Claims Paid		5,491	(280)	5,211
C. Ceded Reinsurance:				
9. Incurred Claims.....		1,194,593	200,000	1,394,593
10. Beginning Claim Reserves and Liabilities		342,974		342,974
11. Ending Claim Reserves and Liabilities		234,515	200,000	434,515
12. Claims Paid		1,303,051		1,303,051
D. Net:				
13. Incurred Claims.....		134,775,290	17,346,815	152,122,106
14. Beginning Claim Reserves and Liabilities		13,526,844	1,387,996	14,914,840
15. Ending Claim Reserves and Liabilities		9,878,731	841,641	10,720,372
16. Claims Paid		138,423,404	17,893,170	156,316,574
E. Net Incurred Claims and Cost Containment Expenses:				
17. Incurred Claims and Cost Containment Expenses		138,250,435	18,153,027	156,403,463
18. Beginning Reserves and Liabilities		13,526,844	1,387,996	14,914,840
19. Ending Reserves and Liabilities		9,878,731	841,641	10,720,372
20. Paid Claims and Cost Containment Expenses		141,898,549	18,699,382	160,597,931

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

SCHEDULE S - PART 1 - SECTION 2

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

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Reinsured	5 Domiciliary Jurisdiction	6 Type of Reinsurance Assumed	7 Type of Business Assumed	8 Premiums	9 Unearned Premiums	10 Reserve Liability Other Than for Unearned Premiums	11 Reinsurance Payable on Paid and Unpaid Losses	12 Modified Coinsurance Reserve	13 Funds Withheld Under Coinsurance	
0399999. Total - U.S. Affiliates													
0699999. Total - Non-U.S. Affiliates													
0799999. Total - Affiliates													
66583	39-0493780	03/01/2002	NATIONAL GUARDIAN LIFE INS CO	WI	QA/G	D	2,438			5			
66583	39-0493780	03/01/2002	NATIONAL GUARDIAN LIFE INS CO	WI	QA/G	OH	(8,649)			262			
66583	39-0493780	03/01/2002	NATIONAL GUARDIAN LIFE INS CO	WI	QA/I	D	17						
66583	39-0493780	03/01/2002	NATIONAL GUARDIAN LIFE INS CO	WI	QA/G	STD I				10			
0899999. U.S. Non-Affiliates							(6,194)			277			
1099999. Total - Non-Affiliates							(6,194)			277			
1199999. Total U.S. (Sum of 0399999 and 0899999)							(6,194)			277			
1299999. Total Non-U.S. (Sum of 0699999 and 0999999)													
9999999 - Totals							(6,194)			277			

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

SCHEDULE S - PART 3 - SECTION 1

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

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domi- ciliary Juris- diction	6 Type of Reinsurance Ceded	7 Type of Business Ceded	8 Amount in Force at End of Year	Reserve Credit Taken		11 Premiums	Outstanding Surplus Relief		14 Modified Coinsurance Reserve	15 Funds Withheld Under Coinsurance
								9 Current Year	10 Prior Year		12 Current Year	13 Prior Year		
0399999. Total General Account - Authorized U.S. Affiliates														
0699999. Total General Account - Authorized Non-U.S. Affiliates														
0799999. Total General Account - Authorized Affiliates														
.82627	.06-0839705	11/01/1994	SWISS RE LIFE & HLTH AMER INC	MO	YRT/I	DL	31,250	268	244	284				
.88099	.75-1608507	12/31/1993	OPTIMUM RE INS CO	TX	YRT/I	DL	1,000,500	4,726	5,242	13,756				
.86231	.39-0989781	05/01/1992	TRANSAMERICA LIFE INS CO	IA	YRT/I	DL	8,942,850	109,902	111,194	142,474				
.82627	.06-0839705	01/01/2001	SWISS RE LIFE & HLTH AMER INC	MO	CO/L	DL	18,997,500	660,584	662,017	237,704				
.82627	.06-0839705	01/01/2002	SWISS RE LIFE & HLTH AMER INC	MO	CO/G	ADB				13,617				
0899999. General Account - Authorized U.S. Non-Affiliates														
1099999. Total General Account - Authorized Non-Affiliates														
1199999. Total General Account Authorized														
1499999. Total General Account - Unauthorized U.S. Affiliates														
1799999. Total General Account - Unauthorized Non-U.S. Affiliates														
1899999. Total General Account - Unauthorized Affiliates														
2199999. Total General Account - Unauthorized Non-Affiliates														
2299999. Total General Account Unauthorized														
2599999. Total General Account - Certified U.S. Affiliates														
2899999. Total General Account - Certified Non-U.S. Affiliates														
2999999. Total General Account - Certified Affiliates														
3299999. Total General Account - Certified Non-Affiliates														
3399999. Total General Account Certified														
3699999. Total General Account - Reciprocal Jurisdiction U.S. Affiliates														
3999999. Total General Account - Reciprocal Jurisdiction Non-U.S. Affiliates														
4099999. Total General Account - Reciprocal Jurisdiction Affiliates														
4399999. Total General Account - Reciprocal Jurisdiction Non-Affiliates														
4499999. Total General Account Reciprocal Jurisdiction														
4599999. Total General Account Authorized, Unauthorized, Reciprocal Jurisdiction, and Certified														
4899999. Total Separate Accounts - Authorized U.S. Affiliates														
5199999. Total Separate Accounts - Authorized Non-U.S. Affiliates														
5299999. Total Separate Accounts - Authorized Affiliates														
5599999. Total Separate Accounts - Authorized Non-Affiliates														
5699999. Total Separate Accounts Authorized														
5999999. Total Separate Accounts - Unauthorized U.S. Affiliates														
6299999. Total Separate Accounts - Unauthorized Non-U.S. Affiliates														
6399999. Total Separate Accounts - Unauthorized Affiliates														
6699999. Total Separate Accounts - Unauthorized Non-Affiliates														
6799999. Total Separate Accounts Unauthorized														
7099999. Total Separate Accounts - Certified U.S. Affiliates														
7399999. Total Separate Accounts - Certified Non-U.S. Affiliates														
7499999. Total Separate Accounts - Certified Affiliates														
7799999. Total Separate Accounts - Certified Non-Affiliates														
7899999. Total Separate Accounts Certified														
8199999. Total Separate Accounts - Reciprocal Jurisdiction U.S. Affiliates														
8499999. Total Separate Accounts - Reciprocal Jurisdiction Non-U.S. Affiliates														
8599999. Total Separate Accounts - Reciprocal Jurisdiction Affiliates														
8899999. Total Separate Accounts - Reciprocal Jurisdiction Non-Affiliates														
8999999. Total Separate Accounts Reciprocal Jurisdiction														
9099999. Total Separate Accounts Authorized, Unauthorized, Reciprocal Jurisdiction and Certified														
9199999. Total U.S. (Sum of 0399999, 0899999, 1499999, 1999999, 2599999, 3099999, 3699999, 4199999, 4899999, 5399999, 5999999, 6499999, 7099999, 7599999, 8199999 and 8699999)														
9299999. Total Non-U.S. (Sum of 0699999, 0999999, 1799999, 2099999, 2899999, 3199999, 3999999, 4299999, 5199999, 5499999, 6299999, 6599999, 7399999, 7699999, 8499999 and 8799999)														
9999999 - Totals														

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

SCHEDULE S - PART 3 - SECTION 2

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

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domi- ciliary Juris- diction	6 Type of Reinsur- ance Ceded	7 Type of Business Ceded	8 Premiums	9 Unearned Premiums (Estimated)	10 Reserve Credit Taken Other than for Unearned Premiums	Outstanding Surplus Relief		13 Modified Coinsurance Reserve	14 Funds Withheld Under Coinsurance
										11 Current Year	12 Prior Year		
0399999. Total General Account - Authorized U.S. Affiliates													
0699999. Total General Account - Authorized Non-U.S. Affiliates													
0799999. Total General Account - Authorized Affiliates													
82627	06-0839705	01/01/2002	SWISS RE LIFE & HLTH AMER INC	MO	QA/I	A	44,016						
82538	74-1541799	10/01/2013	NATIONAL HEALTH INS CO	TX	QA/I	D	2,581,668						
0899999. General Account - Authorized U.S. Non-Affiliates													
1099999. Total General Account - Authorized Non-Affiliates													
1199999. Total General Account Authorized													
1499999. Total General Account - Unauthorized U.S. Affiliates													
1799999. Total General Account - Unauthorized Non-U.S. Affiliates													
1899999. Total General Account - Unauthorized Affiliates													
2199999. Total General Account - Unauthorized Non-Affiliates													
2299999. Total General Account Unauthorized													
2599999. Total General Account - Certified U.S. Affiliates													
2899999. Total General Account - Certified Non-U.S. Affiliates													
2999999. Total General Account - Certified Affiliates													
3299999. Total General Account - Certified Non-Affiliates													
3399999. Total General Account Certified													
3699999. Total General Account - Reciprocal Jurisdiction U.S. Affiliates													
3999999. Total General Account - Reciprocal Jurisdiction Non-U.S. Affiliates													
4099999. Total General Account - Reciprocal Jurisdiction Affiliates													
4399999. Total General Account - Reciprocal Jurisdiction Non-Affiliates													
4499999. Total General Account Reciprocal Jurisdiction													
4599999. Total General Account Authorized, Unauthorized, Reciprocal Jurisdiction and Certified													
4899999. Total Separate Accounts - Authorized U.S. Affiliates													
5199999. Total Separate Accounts - Authorized Non-U.S. Affiliates													
5299999. Total Separate Accounts - Authorized Affiliates													
5599999. Total Separate Accounts - Authorized Non-Affiliates													
5699999. Total Separate Accounts Authorized													
5999999. Total Separate Accounts - Unauthorized U.S. Affiliates													
6299999. Total Separate Accounts - Unauthorized Non-U.S. Affiliates													
6399999. Total Separate Accounts - Unauthorized Affiliates													
6699999. Total Separate Accounts - Unauthorized Non-Affiliates													
6799999. Total Separate Accounts Unauthorized													
7099999. Total Separate Accounts - Certified U.S. Affiliates													
7399999. Total Separate Accounts - Certified Non-U.S. Affiliates													
7499999. Total Separate Accounts - Certified Affiliates													
7799999. Total Separate Accounts - Certified Non-Affiliates													
7899999. Total Separate Accounts Certified													
8199999. Total Separate Accounts - Reciprocal Jurisdiction U.S. Affiliates													
8499999. Total Separate Accounts - Reciprocal Jurisdiction Non-U.S. Affiliates													
8599999. Total Separate Accounts - Reciprocal Jurisdiction Affiliates													
8899999. Total Separate Accounts - Reciprocal Jurisdiction Non-Affiliates													
8999999. Total Separate Accounts Reciprocal Jurisdiction													
9099999. Total Separate Accounts Authorized, Unauthorized, Reciprocal Jurisdiction and Certified													
9199999. Total U.S. (Sum of 0399999, 0899999, 1499999, 1999999, 2599999, 3099999, 3699999, 4199999, 4899999, 5399999, 5999999, 6499999, 7099999, 7599999, 8199999 and 8699999)													
9299999. Total Non-U.S. (Sum of 0699999, 0999999, 1799999, 2099999, 2899999, 3199999, 3999999, 4299999, 5199999, 5499999, 6299999, 6599999, 7399999, 7699999, 8499999 and 8799999)													
9999999 - Totals													

Schedule S - Part 4

NONE

Schedule S - Part 4 - Bank Footnote

NONE

Schedule S - Part 5

NONE

Schedule S - Part 5 - Bank Footnote

NONE

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

SCHEDULE S - PART 6

Five Year Exhibit of Reinsurance Ceded Business
(\$000 Omitted)

	1 2020	2 2019	3 2018	4 2017	5 2016
A. OPERATIONS ITEMS					
1. Premiums and annuity considerations for life and accident and health contracts	3,034	3,896	5,403	5,652	5,092
2. Commissions and reinsurance expense allowances	780	1,032	1,830	2,045	2,043
3. Contract claims	1,889	2,444	3,707	3,309	2,980
4. Surrender benefits and withdrawals for life contracts					
5. Dividends to policyholders and refunds to members					
6. Reserve adjustments on reinsurance ceded					
7. Increase in aggregate reserve for life and accident and health contracts	3	94	26	(24)	(37)
B. BALANCE SHEET ITEMS					
8. Premiums and annuity considerations for life and accident and health contracts deferred and uncollected	267	329	430	509	485
9. Aggregate reserves for life and accident and health contracts	775	779	872	898	938
10. Liability for deposit-type contracts					
11. Contract claims unpaid	284	247	495	372	259
12. Amounts recoverable on reinsurance	320	195	515	451	496
13. Experience rating refunds due or unpaid					
14. Policyholders' dividends and refunds to members (not included in Line 10)					
15. Commissions and reinsurance expense allowances due	117	139	241	220	355
16. Unauthorized reinsurance offset					
17. Offset for reinsurance with Certified Reinsurers					
C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)					
18. Funds deposited by and withheld from (F)					
19. Letters of credit (L)					
20. Trust agreements (T)					
21. Other (O)					
D. REINSURANCE WITH CERTIFIED REINSURERS (DEPOSITS BY AND FUNDS WITHHELD FROM)					
22. Multiple Beneficiary Trust					
23. Funds deposited by and withheld from (F)					
24. Letters of credit (L)					
25. Trust agreements (T)					
26. Other (O)					

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

SCHEDULE S - PART 7

Restatement of Balance Sheet to Identify Net Credit for Ceded Reinsurance

	1 As Reported (net of ceded)	2 Restatement Adjustments	3 Restated (gross of ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12)	110,554,870		110,554,870
2. Reinsurance (Line 16)	437,231	(437,231)	
3. Premiums and considerations (Line 15)	10,441,194	266,944	10,708,138
4. Net credit for ceded reinsurance	XXX	1,230,258	1,230,258
5. All other admitted assets (balance)	10,308,256		10,308,256
6. Total assets excluding Separate Accounts (Line 26)	131,741,551	1,059,971	132,801,522
7. Separate Account assets (Line 27)			
8. Total assets (Line 28)	131,741,551	1,059,971	132,801,522
LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
9. Contract reserves (Lines 1 and 2)	34,438,703	775,479	35,214,182
10. Liability for deposit-type contracts (Line 3)			
11. Claim reserves (Line 4)	12,013,899	284,492	12,298,391
12. Policyholder dividends/member refunds/reserves (Lines 5 through 7)			
13. Premium & annuity considerations received in advance (Line 8)	5,053,975		5,053,975
14. Other contract liabilities (Line 9)			
15. Reinsurance in unauthorized companies (Line 24.02 minus inset amount)			
16. Funds held under reinsurance treaties with unauthorized reinsurers (Line 24.03 minus inset amount)			
17. Reinsurance with Certified Reinsurers (Line 24.02 inset amount)			
18. Funds held under reinsurance treaties with Certified Reinsurers (Line 24.03 inset amount)			
19. All other liabilities (balance)	5,951,620		5,951,620
20. Total liabilities excluding Separate Accounts (Line 26)	57,458,197	1,059,971	58,518,168
21. Separate Account liabilities (Line 27)			
22. Total liabilities (Line 28)	57,458,197	1,059,971	58,518,168
23. Capital & surplus (Line 38)	74,283,354	XXX	74,283,354
24. Total liabilities, capital & surplus (Line 39)	131,741,551	1,059,971	132,801,522
NET CREDIT FOR CEDED REINSURANCE			
25. Contract reserves	775,479		
26. Claim reserves	284,492		
27. Policyholder dividends/reserves			
28. Premium & annuity considerations received in advance			
29. Liability for deposit-type contracts			
30. Other contract liabilities			
31. Reinsurance ceded assets	437,231		
32. Other ceded reinsurance recoverables			
33. Total ceded reinsurance recoverables	1,497,202		
34. Premiums and considerations	266,944		
35. Reinsurance in unauthorized companies			
36. Funds held under reinsurance treaties with unauthorized reinsurers			
37. Reinsurance with Certified Reinsurers			
38. Funds held under reinsurance treaties with Certified Reinsurers			
39. Other ceded reinsurance payables/offsets			
40. Total ceded reinsurance payable/offsets	266,944		
41. Total net credit for ceded reinsurance	1,230,258		

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY
SCHEDULE T - PREMIUMS AND ANNUITY CONSIDERATIONS (b)

Allocated by States and Territories

States, Etc.	1	Direct Business Only					7
		2	3	4	5	6	
	Active Status (a)	Life Insurance Premiums	Annuity Considerations	Accident and Health Insurance Premiums, Including Policy, Membership and Other Fees	Other Considerations	Total Columns 2 through 5 (b)	Deposit-Type Contracts
1. Alabama	AL	L	21,941		2,725,808		2,747,749
2. Alaska	AK	L	1,387		150,363		151,749
3. Arizona	AZ	L	112,717		3,131,518		3,244,235
4. Arkansas	AR	L	230,191		773,268		1,003,459
5. California	CA	L	86,865		22,109,985		22,196,850
6. Colorado	CO	L	21,308		1,384,948		1,406,257
7. Connecticut	CT	L	20,433		1,375,006		1,395,439
8. Delaware	DE	L	2,112		361,452		363,564
9. District of Columbia	DC	L	1,153		904,104		905,257
10. Florida	FL	L	834,973		8,505,024		9,339,997
11. Georgia	GA	L	390,373		12,401,898		12,792,272
12. Hawaii	HI	L	2,647		30,964		33,611
13. Idaho	ID	L	1,211		685,675		686,886
14. Illinois	IL	L	116,039		9,782,924		9,898,963
15. Indiana	IN	L	211,327		4,675,337		4,886,664
16. Iowa	IA	L	13,558		239,881		253,440
17. Kansas	KS	L	74,312		526,624		600,936
18. Kentucky	KY	L	108,535		535,204		643,739
19. Louisiana	LA	L	925,511		41,114,053		42,039,564
20. Maine	ME	L	11,088		2,178,023		2,189,110
21. Maryland	MD	L	86,780		1,741,499		1,828,279
22. Massachusetts	MA	L	23,884		1,398,363		1,422,247
23. Michigan	MI	L	95,190		17,155,635		17,250,825
24. Minnesota	MN	L	37,973		3,788,471		3,826,444
25. Mississippi	MS	L	148,075		41,241,713		41,389,789
26. Missouri	MO	L	236,236		3,146,126		3,382,361
27. Montana	MT	L	1,523		23,009		24,532
28. Nebraska	NE	L	14,732		802,210		816,942
29. Nevada	NV	L	7,057		417,532		424,589
30. New Hampshire	NH	L	984		528,790		529,774
31. New Jersey	NJ	L	50,584		1,227,674		1,278,258
32. New Mexico	NM	L	38,629		280,635		319,264
33. New York	NY	N					
34. North Carolina	NC	L	301,060		17,305,072		17,606,132
35. North Dakota	ND	L	4,260		2,938,439		2,942,699
36. Ohio	OH	L	312,966		5,822,343		6,135,339
37. Oklahoma	OK	L	113,649		699,255		812,904
38. Oregon	OR	L	24,276		2,110,038		2,134,314
39. Pennsylvania	PA	L	229,288		2,632,382		2,861,669
40. Rhode Island	RI	L	5,782		97,308		103,090
41. South Carolina	SC	L	278,807		4,852,104		5,130,911
42. South Dakota	SD	L	12,839		655,735		668,574
43. Tennessee	TN	L	286,753		2,933,393		3,220,146
44. Texas	TX	L	618,197		19,177,012		19,795,209
45. Utah	UT	L	1,321		2,264,949		2,266,270
46. Vermont	VT	L	1,629		168,650		170,279
47. Virginia	VA	L	134,408		1,682,647		1,817,055
48. Washington	WA	L	39,301		964,751		1,004,051
49. West Virginia	WV	L	151,728		273,084		424,812
50. Wisconsin	WI	L	81,559		3,894,282		3,975,842
51. Wyoming	WY	L	777		199,575		200,352
52. American Samoa	AS	N					
53. Guam	GU	N					
54. Puerto Rico	PR	N	2,108		23,946		26,054
55. U.S. Virgin Islands	VI	N					
56. Northern Mariana Islands	MP	N					
57. Canada	CAN	N					
58. Aggregate Other Alien	OT	XXX					
59. Subtotal	XXX		6,530,067		254,038,679		260,568,745
90. Reporting entity contributions for employee benefits plans	XXX						
91. Dividends or refunds applied to purchase paid-up additions and annuities	XXX						
92. Dividends or refunds applied to shorten endowment or premium paying period	XXX						
93. Premium or annuity considerations waived under disability or other contract provisions	XXX						
94. Aggregate or other amounts not allocable by State	XXX						
95. Totals (Direct Business)	XXX		6,530,067		254,038,679		260,568,745
96. Plus reinsurance assumed	XXX				(1,579)		(1,579)
97. Totals (All Business)	XXX		6,530,067		254,037,099		260,567,166
98. Less reinsurance ceded	XXX		410,774		2,684,689		3,095,463
99. Totals (All Business) less Reinsurance Ceded	XXX		6,119,293	(c)	251,352,410		257,471,703
58001. DETAILS OF WRITE-INS							
58002. ZZZ Other Alien	XXX						
58003. Summary of remaining write-ins for Line 58 from overflow page	XXX						
58998. Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)	XXX						
9401. Summary of remaining write-ins for Line 94 from overflow page	XXX						
9402. Summary of remaining write-ins for Line 94 from overflow page	XXX						
9403. Summary of remaining write-ins for Line 94 from overflow page	XXX						
9498. Summary of remaining write-ins for Line 94 from overflow page	XXX						
9499. Totals (Lines 9401 through 9403 plus 9498)(Line 94 above)	XXX						

(a) Active Status Counts:

L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG50 R - Registered - Non-domiciled RRGs.....
E - Eligible - Reporting entities eligible or approved to write surplus lines in the state..... Q - Qualified - Qualified or accredited reinsurer.....
N - None of the above - Not allowed to write business in the state.....7

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

Individual Life and Accident & Health are allocated according to residence of the policy holder at the time premium is paid. Group premiums are allocated to the state of primary residence for groups under 500, while groups over 500 are allocated based on the # of lives in each state.

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

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

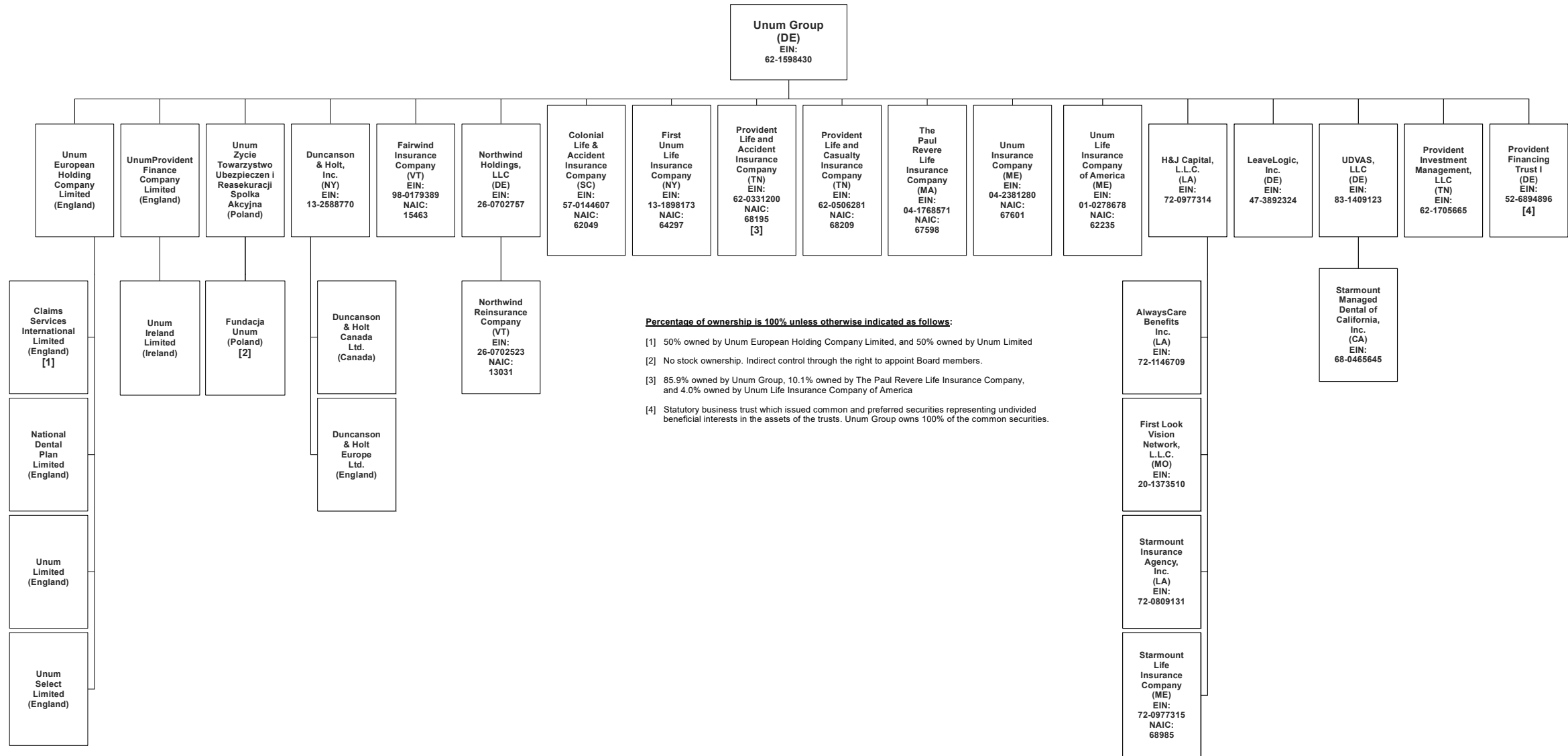
SCHEDULE T - PART 2
INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

States, Etc.		Direct Business Only					Totals
		1 Life (Group and Individual)	2 Annuities (Group and Individual)	3 Disability Income (Group and Individual)	4 Long-Term Care (Group and Individual)	5 Deposit-Type Contracts	
1. Alabama	AL	21,941					21,941
2. Alaska	AK	1,387					1,387
3. Arizona	AZ	112,717					112,717
4. Arkansas	AR	230,191					230,191
5. California	CA	86,865					86,865
6. Colorado	CO	21,308					21,308
7. Connecticut	CT	20,433					20,433
8. Delaware	DE	2,112					2,112
9. District of Columbia	DC	1,153					1,153
10. Florida	FL	834,973					834,973
11. Georgia	GA	390,373					390,373
12. Hawaii	HI	2,647					2,647
13. Idaho	ID	1,211					1,211
14. Illinois	IL	116,039					116,039
15. Indiana	IN	211,327					211,327
16. Iowa	IA	13,558					13,558
17. Kansas	KS	74,312					74,312
18. Kentucky	KY	108,535					108,535
19. Louisiana	LA	925,511					925,511
20. Maine	ME	11,088					11,088
21. Maryland	MD	86,780					86,780
22. Massachusetts	MA	23,884					23,884
23. Michigan	MI	95,190					95,190
24. Minnesota	MN	37,973					37,973
25. Mississippi	MS	148,075					148,075
26. Missouri	MO	236,236					236,236
27. Montana	MT	1,523					1,523
28. Nebraska	NE	14,732					14,732
29. Nevada	NV	7,057					7,057
30. New Hampshire	NH	984					984
31. New Jersey	NJ	50,584					50,584
32. New Mexico	NM	38,629					38,629
33. New York	NY						
34. North Carolina	NC	301,060					301,060
35. North Dakota	ND	4,260					4,260
36. Ohio	OH	312,996					312,996
37. Oklahoma	OK	113,649					113,649
38. Oregon	OR	24,276					24,276
39. Pennsylvania	PA	229,288					229,288
40. Rhode Island	RI	5,782					5,782
41. South Carolina	SC	278,807					278,807
42. South Dakota	SD	12,839					12,839
43. Tennessee	TN	286,753					286,753
44. Texas	TX	618,197					618,197
45. Utah	UT	1,321					1,321
46. Vermont	VT	1,629					1,629
47. Virginia	VA	134,408					134,408
48. Washington	WA	39,301					39,301
49. West Virginia	WV	151,728					151,728
50. Wisconsin	WI	81,559					81,559
51. Wyoming	WY	777					777
52. American Samoa	AS						
53. Guam	GU						
54. Puerto Rico	PR	2,108					2,108
55. U.S. Virgin Islands	VI						
56. Northern Mariana Islands	MP						
57. Canada	CAN						
58. Aggregate Other Alien	OT						
59. Total		6,530,067					6,530,067

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

PART 1 - ORGANIZATIONAL CHART



Percentage of ownership is 100% unless otherwise indicated as follows:

- [1] 50% owned by Unum European Holding Company Limited, and 50% owned by Unum Limited
- [2] No stock ownership. Indirect control through the right to appoint Board members.
- [3] 85.9% owned by Unum Group, 10.1% owned by The Paul Revere Life Insurance Company, and 4.0% owned by Unum Life Insurance Company of America
- [4] Statutory business trust which issued common and preferred securities representing undivided beneficial interests in the assets of the trusts. Unum Group owns 100% of the common securities.

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Required? (Y/N)	*
	Unum Group	.0000	72-1146709				AlwaysCare Benefits, Inc.	LA	NIA	H&J Capital, L.L.C.	Ownership	100.000	Unum Group	N	
	Unum Group	.0000					Claims Services International Limited	GBR	NIA	Unum European Holding Company Limited	Ownership	50.000	Unum Group	N	.0000002
	Unum Group	.0000					Claims Services International Limited	GBR	NIA	Unum Limited	Ownership	50.000	Unum Group	N	.0000003
.0565	Unum Group	.62049	57-0144607				Colonial Life & Accident Insurance Company	SC	IA	Unum Group	Ownership	100.000	Unum Group	N	
	Unum Group	.0000					Duncanson & Holt Canada Ltd.	CAN	NIA	Duncanson & Holt, Inc.	Ownership	100.000	Unum Group	N	
	Unum Group	.0000					Duncanson & Holt Europe Ltd.	GBR	NIA	Duncanson & Holt, Inc.	Ownership	100.000	Unum Group	N	
	Unum Group	.0000	13-2588770				Duncanson & Holt, Inc.	NY	NIA	Unum Group	Ownership	100.000	Unum Group	N	
	Unum Group	.15463	98-0179389				Fairwind Insurance Company	VT	IA	Unum Group	Ownership	100.000	Unum Group	N	
	Unum Group	.0000	20-1373510				First Look Vision Network, L.L.C.	MO	NIA	H&J Capital, L.L.C.	Ownership	100.000	Unum Group	N	
.0565	Unum Group	.64297	13-1898173				First Unum Life Insurance Company	NY	IA	Unum Group	Ownership	100.000	Unum Group	N	
	Unum Group	.0000					Fundacja Unum	POL	NIA	Reasekuracji Spolka Akcyjna	Board of Directors	0.000	Unum Group	N	.0000011
	Unum Group	.0000	72-0977314				H&J Capital, L.L.C.	LA	UDP	Unum Group	Ownership	100.000	Unum Group	N	
	Unum Group	.0000	47-3892324				LeaveLogic, Inc.	DE	NIA	Unum Group	Ownership	100.000	Unum Group	N	
	Unum Group	.0000					National Dental Plan Limited	GBR	NIA	Unum European Holding Company Limited	Ownership	100.000	Unum Group	N	
	Unum Group	.0000	26-0702757				Northwind Holdings, LLC	DE	NIA	Unum Group	Ownership	100.000	Unum Group	N	
.0565	Unum Group	.13031	26-0702523				Northwind Reinsurance Company	VT	IA	Northwind Holdings, LLC	Ownership	100.000	Unum Group	N	
	Unum Group	.0000	52-6894896				Provident Financing Trust I	DE	NIA	Unum Group	Ownership	100.000	Unum Group	N	.0000017
	Unum Group	.0000	62-1705665				Provident Investment Management, LLC	TN	NIA	Unum Group	Ownership	100.000	Unum Group	N	
.0565	Unum Group	.68195	62-0331200				Provident Life and Accident Insurance Company	TN	IA	Unum Group	Ownership	85.900	Unum Group	N	.0000019
.0565	Unum Group	.68195	62-0331200				Provident Life and Accident Insurance Company	TN	IA	The Paul Revere Life Insurance Company	Ownership	10.100	Unum Group	N	.0000020
.0565	Unum Group	.68209	62-0506281				Provident Life and Casualty Insurance Company	TN	IA	Unum Group	Ownership	100.000	Unum Group	N	
	Unum Group	.0000	72-0809131				Starmount Insurance Agency, Inc.	LA	NIA	H&J Capital, L.L.C.	Ownership	100.000	Unum Group	N	
.0565	Unum Group	.68985	72-0977315				Starmount Life Insurance Company	ME	RE	H&J Capital, L.L.C.	Ownership	100.000	Unum Group	N	
	Unum Group	.0000	68-0465645				Starmount Managed Dental of California, Inc.	CA	NIA	UDVAS, LLC	Ownership	100.000	Unum Group	N	
.0565	Unum Group	.67598	04-1788571				The Paul Revere Life Insurance Company	MA	IA	Unum Group	Ownership	100.000	Unum Group	N	
	Unum Group	.0000	83-1409123				UDVAS, LLC	DE	NIA	Unum Group	Ownership	100.000	Unum Group	N	
	Unum Group	.0000					Unum European Holding Company Limited	GBR	NIA	Unum Group	Ownership	100.000	Unum Group	N	
.0565	Unum Group	.0000	62-1598430		0000005513	NYSE	Unum Group	DE	UIP	Unum Group	Ownership	0.000	Unum Group	N	
	Unum Group	.67601	04-2381280				Unum Insurance Company	ME	IA	Unum Group	Ownership	100.000	Unum Group	N	
	Unum Group	.0000					Unum Ireland Limited	JRL	NIA	UnumProvident Finance Company Limited	Ownership	100.000	Unum Group	N	
.0565	Unum Group	.62235	01-0278678				Unum Life Insurance Company of America	ME	IA	Unum Group	Ownership	100.000	Unum Group	N	
	Unum Group	.0000					Unum Limited	GBR	IA	Unum European Holding Company Limited	Ownership	100.000	Unum Group	N	
	Unum Group	.0000					Unum Select Limited	GBR	NIA	Unum European Holding Company Limited	Ownership	100.000	Unum Group	N	
	Unum Group	.0000					Unum Zycie Towarzystwo Ubezpieczen i								
	Unum Group	.0000					Reasekuracji Spolka Akcyjna	POL	IA	Unum Group	Ownership	100.000	Unum Group	N	
	Unum Group	.0000					UnumProvident Finance Company Limited	GBR	NIA	Unum Group	Ownership	100.000	Unum Group	N	

Asterisk	Explanation
0000002	50% owned by Unum European Holding Company Limited and 50% owned by Unum Limited.
0000003	50% owned by Unum European Holding Company Limited and 50% owned by Unum Limited.
0000011	No stock ownership. Indirect control through the right to appoint Board members.
0000017	Statutory business trust which issued common and preferred securities representing undivided beneficial interests in the assets of the trust. Unum Group owns 100% of the common securities.
0000019	85.9% owned by Unum Group, 10.1% owned by The Paul Revere Life Insurance Company and 4.0% owned by Unum Life Insurance Company of America.
0000020	85.9% owned by Unum Group, 10.1% owned by The Paul Revere Life Insurance Company and 4.0% owned by Unum Life Insurance Company of America.

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

SCHEDULE Y

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

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
	62-1598430	Unum Group	865,878,145	(936,613,672)			1,295,168,830				1,224,433,303	
62235	01-0278678	Unum Life Insurance Company of America, ME	(487,676,000)				(901,351,850)				(1,389,027,850)	10,547,250,621
64297	13-1898173	First Unum Life Insurance Company, NY		55,000,000			(75,787,205)				(20,787,205)	171,296,302
62049	57-0144607	Colonial Life & Accident Insurance Company, SC	(232,700,000)	70,000,000			(188,787,031)				(351,487,031)	121,507
15463	98-0179389	Fairwind Insurance Company, VT		410,613,672			13,395,421				424,009,093	(10,810,305,262)
67598	04-1768571	The Paul Revere Life Insurance Company, MA	(22,991,900)	52,000,000			(38,199,223)	(29,745,401)			(38,936,524)	41,992,018
68195	62-0331200	Provident Life and Accident Insurance Company, TN	(88,100,000)	329,000,000			(102,784,621)				138,115,379	80,662,859
68209	62-0506281	Provident Life and Casualty Insurance Company, TN		20,000,000			(8,499,018)				11,500,982	
	62-1705665	Provident Investment Management, LLC, TN					72,841,640				72,841,640	
67601	04-2381280	Unum Insurance Company, ME Unum Limited					(13,363,857)				(13,363,857)	
13031	26-0702523	Northwind Reinsurance Company, VT	(58,425,746)				(2,276,543)	29,745,401			(30,956,887)	
	26-0702757	Northwind Holdings, LLC	24,015,501								24,015,501	
68985	72-0977315	Starmount Life Insurance Company		15,700,000			(50,192,125)				(34,492,125)	
	72-0977314	H&J Capital, LLC		(15,700,000)							(15,700,000)	
	20-1373510	First Look Vision Network, LLC					(164,417)				(164,417)	
9999999 Control Totals												31,018,046

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

	Responses
MARCH FILING	
1. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	YES
2. Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?	YES
3. Will the confidential Risk-based Capital Report be filed with the state of domicile, if required, by March 1?	YES
4. Will an actuarial opinion be filed by March 1?	YES
APRIL FILING	
5. Will Management's Discussion and Analysis be filed by April 1?	YES
6. Will the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit be filed with the state of domicile and the NAIC by April 1? (Not applicable to fraternal benefit societies)	YES
7. Will the Adjustments to the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit (if required) be filed with the state of domicile and the NAIC by April 1? (Not applicable to fraternal benefit societies)	YES
8. Will the Supplemental Investment Risks Interrogatories be filed by April 1?	YES
JUNE FILING	
9. Will an audited financial report be filed by June 1?	YES
10. Will Accountant's Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	YES
AUGUST FILING	
11. Will the regulator-only (non-public) Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile and electronically with the NAIC (as a regulator-only non-public document) by August 1?	YES

The following supplemental reports are required to be filed as part of your annual statement filing **if your company is engaged in the type of business covered by the supplement. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below.** If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

MARCH FILING	
12. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1? (Not applicable to fraternal benefit societies) ...	NO
13. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	NO
14. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?	NO
15. Will the actuarial opinion on participating and non-participating policies as required in Interrogatories 1 and 2 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1?	NO
16. Will the actuarial opinion on non-guaranteed elements as required in interrogatory #3 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1?	YES
17. Will the actuarial opinion on X-Factors be filed with the state of domicile and electronically with the NAIC by March 1?	NO
18. Will the actuarial opinion on Separate Accounts Funding Guaranteed Minimum Benefit be filed with the state of domicile and electronically with the NAIC by March 1?	NO
19. Will the actuarial opinion on Synthetic Guaranteed Investment Contracts be filed with the state of domicile and electronically with the NAIC by March 1?	NO
20. Will the Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1?	NO
21. Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1?	NO
22. Will the Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI be filed with the state of domicile and electronically with the NAIC by March 1?	NO
23. Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Average Market Value) be filed with the state of domicile and electronically with the NAIC by March 1?	NO
24. Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value) be filed with the state of domicile and electronically with the NAIC by March 1?	NO
25. Will the C-3 RBC Certifications required under C-3 Phase I be filed with the state of domicile and electronically with the NAIC by March 1?	NO
26. Will the C-3 RBC Certifications required under C-3 Phase II be filed with the state of domicile and electronically with the NAIC by March 1?	NO

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

- 27. Will the Actuarial Certifications Related to Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities be filed with the state of domicile and electronically with the NAIC by March 1? NO
- 28. Will the actuarial opinion required by the Modified Guaranteed Annuity Model Regulation be filed with the state of domicile and electronically with the NAIC by March 1? NO
- 29. Will the Actuarial Certifications Related to Hedging required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?
- 30. Will the Financial Officer Certification Related to Clearly Defined Hedging Strategy required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?
- 31. Will the Management Certification That the Valuation Reflects Management's Intent required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?
- 32. Will the Actuarial Certification Related to the Reserves required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?
- 33. Will the Actuarial Certification regarding the use of 2001 Preferred Class Tables required by the Model Regulation Permitting the Recognition of Preferred Mortality Tables for Use in Determining Minimum Reserve Liabilities be filed with the state of domicile and electronically with the NAIC by March 1? NO
- 34. Will the Worker's Compensation Carve-Out Supplement be filed by March 1? (Not applicable to fraternal benefit societies) NO
- 35. Will Supplemental Schedule O be filed with the state of domicile and the NAIC by March 1? YES
- 36. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1? NO
- 37. Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1? NO
- 38. Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1? NO
- 39. Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1? NO
- 40. Will the VM-20 Reserves Supplement be filed with the state of domicile and the NAIC by March 1? NO

APRIL FILING

- 41. Will the confidential Regulatory Asset Adequacy Issues Summary (RAAIS) required by the Valuation Manual be filed with the state of domicile by April 1? YES
- 42. Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1? NO
- 43. Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1? (Not applicable to fraternal benefit societies) ... NO
- 44. Will the Accident and Health Policy Experience Exhibit be filed by April 1? YES
- 45. Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1? NO
- 46. Will the regulator only (non-public) Supplemental Health Care Exhibit's Expense Allocation Report be filed with the state of domicile and the NAIC by April 1? NO
- 47. Will the confidential Actuarial Memorandum required by Actuarial Guideline XXXVIII 8D be filed with the state of domicile by April 30? NO
- 48. Will the Supplemental Term and Universal Life Insurance Reinsurance Exhibit be filed with the state of domicile and the NAIC by April 1? NO
- 49. Will the Variable Annuities Supplement be filed with the state of domicile and the NAIC by April 1? NO
- 50. Will the confidential Executive Summary of the PBR Actuarial Report be filed with the state of domicile by April 1? NO
- 51. Will the confidential Life Summary of the PBR Actuarial Report be filed with the state of domicile by April 1? NO
- 52. Will the confidential Variable Annuities Summary of the PBR Actuarial Report be filed with the state of domicile by April 1? NO

AUGUST FILING

- 53. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1? NO

Explanations:

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Bar Codes:

- 12. SIS Stockholder Information Supplement [Document Identifier 420]



- 13. Medicare Supplement Insurance Experience Exhibit [Document Identifier 360]



- 14. Trusteed Surplus Statement [Document Identifier 490]
































- 15. Participating Opinion for Exhibit 5 [Document Identifier 371]



- 17. Actuarial Opinion on X-Factors [Document Identifier 442]



SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

18. Actuarial Opinion on Separate Accounts Funding Guaranteed Minimum Benefit [Document Identifier 443]	 6 8 9 8 5 2 0 2 0 4 4 3 0 0 0 0 0
19. Actuarial Opinion on Synthetic Guaranteed Investment Contracts [Document Identifier 444]	 6 8 9 8 5 2 0 2 0 4 4 4 0 0 0 0 0
20. Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV [Document Identifier 445]	 6 8 9 8 5 2 0 2 0 4 4 5 0 0 0 0 0
21. Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXV [Document Identifier 446]	 6 8 9 8 5 2 0 2 0 4 4 6 0 0 0 0 0
22. Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI [Document Identifier 447]	 6 8 9 8 5 2 0 2 0 4 4 7 0 0 0 0 0
23. Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI [Document Identifier 448]	 6 8 9 8 5 2 0 2 0 4 4 8 0 0 0 0 0
24. Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value) [Document Identifier 449]	 6 8 9 8 5 2 0 2 0 4 4 9 0 0 0 0 0
25. C-3 RBC Certifications Required Under C-3 Phase I [Document Identifier 450]	 6 8 9 8 5 2 0 2 0 4 5 0 0 0 0 0 0
26. C-3 RBC Certifications Required Under C-3 Phase II [Document Identifier 451]	 6 8 9 8 5 2 0 2 0 4 5 1 0 0 0 0 0
27. Actuarial Certifications Related to Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities [Document Identifier 452]	 6 8 9 8 5 2 0 2 0 4 5 2 0 0 0 0 0
28. Modified Guaranteed Annuity Model Regulation [Document Identifier 453]	 6 8 9 8 5 2 0 2 0 4 5 3 0 0 0 0 0
33. Actuarial Certification regarding the use of 2001 Preferred Class Tables required by the Model Regulation Permitting the Recognition of Preferred Mortality Tables for Use in Determining Minimum Reserve Liabilities [Document Identifier 454]	 6 8 9 8 5 2 0 2 0 4 5 4 0 0 0 0 0
34. Workers' Compensation Carve-Out Supplement [Document Identifier 495]	 6 8 9 8 5 2 0 2 0 4 9 5 0 0 0 0 0
36. Medicare Part D Coverage Supplement [Document Identifier 365]	 6 8 9 8 5 2 0 2 0 3 6 5 0 0 0 0 0
37. Relief from the five-year rotation requirement for lead audit partner [Document Identifier 224]	 6 8 9 8 5 2 0 2 0 2 2 4 0 0 0 0 0
38. Relief from the one-year cooling off period for independent CPA [Document Identifier 225]	 6 8 9 8 5 2 0 2 0 2 2 5 0 0 0 0 0
39. Relief from the Requirements for Audit Committees [Document Identifier 226]	 6 8 9 8 5 2 0 2 0 2 2 6 0 0 0 0 0
40. VM-20 Reserves Supplement [Document Identifier 456]	 6 8 9 8 5 2 0 2 0 4 5 6 0 0 0 0 0
42. Long-Term Care Experience Reporting Forms [Document Identifier 306]	 6 8 9 8 5 2 0 2 0 3 0 6 0 0 0 0 0
43. Credit Insurance Experience Exhibit [Document Identifier 230]	 6 8 9 8 5 2 0 2 0 2 3 0 0 0 0 0 0
45. Supplemental Health Care Exhibit (Parts 1, 2 and 3) [Document Identifier 216]	 6 8 9 8 5 2 0 2 0 2 2 1 6 0 0 0 0
46. Supplemental Health Care Exhibit's Expense Allocation Report [Document Identifier 217]	 6 8 9 8 5 2 0 2 0 2 1 7 0 0 0 0 0
47. Actuarial Memorandum Required by Actuarial Guideline XXXVIII 8D [Document Identifier 435]	 6 8 9 8 5 2 0 2 0 4 3 5 0 0 0 0 0
48. Supplemental Term and Universal Life Insurance Reinsurance Exhibit [Document Identifier 345]	 6 8 9 8 5 2 0 2 0 3 4 5 0 0 0 0 0
49. Variable Annuities Supplement [Document Identifier 286]	 6 8 9 8 5 2 0 2 0 2 8 6 0 0 0 0 0
50. Executive Summary of the PBR Actuarial Report [Document Identifier 457]	 6 8 9 8 5 2 0 2 0 4 5 7 0 0 0 0 0
51. Life Summary of the PBR Actuarial Report [Document Identifier 458]	 6 8 9 8 5 2 0 2 0 4 5 8 0 0 0 0 0
52. Variable Annuities Summary of the PBR Actuarial Report [Document Identifier 459]	 6 8 9 8 5 2 0 2 0 4 5 9 0 0 0 0 0
53. Management's Report of Internal Control Over Financial Reporting [Document Identifier 223]	 6 8 9 8 5 2 0 2 0 2 2 3 0 0 0 0 0

OVERFLOW PAGE FOR WRITE-INS

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

SUMMARY INVESTMENT SCHEDULE

Investment Categories	Gross Investment Holdings		Admitted Assets as Reported in the Annual Statement			
	1 Amount	2 Percentage of Column 1 Line 13	3 Amount	4 Securities Lending Reinvested Collateral Amount	5 Total (Col. 3 + 4) Amount	6 Percentage of Column 5 Line 13
1. Long-Term Bonds (Schedule D, Part 1):						
1.01 U.S. governments	2,105,120	1.904	2,105,120		2,105,120	1.904
1.02 All other governments		0.000				0.000
1.03 U.S. states, territories and possessions, etc. guaranteed	1,672,852	1.513	1,672,852		1,672,852	1.513
1.04 U.S. political subdivisions of states, territories, and possessions, guaranteed	2,604,528	2.356	2,604,528		2,604,528	2.356
1.05 U.S. special revenue and special assessment obligations, etc. non-guaranteed	7,781,708	7.039	7,781,708		7,781,708	7.039
1.06 Industrial and miscellaneous	73,097,139	66.118	73,097,139		73,097,139	66.118
1.07 Hybrid securities		0.000				0.000
1.08 Parent, subsidiaries and affiliates		0.000				0.000
1.09 SVO identified funds		0.000				0.000
1.10 Unaffiliated Bank loans		0.000				0.000
1.11 Total long-term bonds	87,261,347	78.930	87,261,347		87,261,347	78.930
2. Preferred stocks (Schedule D, Part 2, Section 1):						
2.01 Industrial and miscellaneous (Unaffiliated)		0.000				0.000
2.02 Parent, subsidiaries and affiliates		0.000				0.000
2.03 Total preferred stocks		0.000				0.000
3. Common stocks (Schedule D, Part 2, Section 2):						
3.01 Industrial and miscellaneous Publicly traded (Unaffiliated)	10,000	0.009	10,000		10,000	0.009
3.02 Industrial and miscellaneous Other (Unaffiliated)		0.000				0.000
3.03 Parent, subsidiaries and affiliates Publicly traded		0.000				0.000
3.04 Parent, subsidiaries and affiliates Other		0.000				0.000
3.05 Mutual funds		0.000				0.000
3.06 Unit investment trusts		0.000				0.000
3.07 Closed-end funds		0.000				0.000
3.08 Total common stocks	10,000	0.009	10,000		10,000	0.009
4. Mortgage loans (Schedule B):						
4.01 Farm mortgages		0.000				0.000
4.02 Residential mortgages		0.000				0.000
4.03 Commercial mortgages		0.000				0.000
4.04 Mezzanine real estate loans		0.000				0.000
4.05 Total valuation allowance		0.000				0.000
4.06 Total mortgage loans		0.000				0.000
5. Real estate (Schedule A):						
5.01 Properties occupied by company	5,265,382	4.763	5,265,382		5,265,382	4.763
5.02 Properties held for production of income		0.000				0.000
5.03 Properties held for sale		0.000				0.000
5.04 Total real estate	5,265,382	4.763	5,265,382		5,265,382	4.763
6. Cash, cash equivalents and short-term investments:						
6.01 Cash (Schedule E, Part 1)	8,945,399	8.091	8,945,399		8,945,399	8.091
6.02 Cash equivalents (Schedule E, Part 2)	8,032,186	7.265	8,032,186		8,032,186	7.265
6.03 Short-term investments (Schedule DA)		0.000	0		0	0.000
6.04 Total cash, cash equivalents and short-term investments	16,977,585	15.357	16,977,585		16,977,585	15.357
7. Contract loans	1,035,557	0.937	1,035,557		1,035,557	0.937
8. Derivatives (Schedule DB)		0.000				0.000
9. Other invested assets (Schedule BA)		0.000				0.000
10. Receivables for securities	5,000	0.005	5,000		5,000	0.005
11. Securities Lending (Schedule DL, Part 1).....		0.000		XXX	XXX	XXX
12. Other invested assets (Page 2, Line 11)		0.000				0.000
13. Total invested assets	110,554,871	100.000	110,554,871		110,554,871	100.000

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

SCHEDULE A - VERIFICATION BETWEEN YEARS

Real Estate

1.	Book/adjusted carrying value, December 31 of prior year	5,389,211
2.	Cost of acquired:	
2.1	Actual cost at time of acquisition (Part 2, Column 6)	
2.2	Additional investment made after acquisition (Part 2, Column 9)	
3.	Current year change in encumbrances:	
3.1	Totals, Part 1, Column 13	
3.2	Totals, Part 3, Column 11	
4.	Total gain (loss) on disposals, Part 3, Column 18	
5.	Deduct amounts received on disposals, Part 3, Column 15	
6.	Total foreign exchange change in book/adjusted carrying value:	
6.1	Totals, Part 1, Column 15	
6.2	Totals, Part 3, Column 13	
7.	Deduct current year's other than temporary impairment recognized:	
7.1	Totals, Part 1, Column 12	
7.2	Totals, Part 3, Column 10	
8.	Deduct current year's depreciation:	
8.1	Totals, Part 1, Column 11	123,829
8.2	Totals, Part 3, Column 9	123,829
9.	Book/adjusted carrying value at the end of current period (Lines 1+2+3+4-5+6-7-8)	5,265,382
10.	Deduct total nonadmitted amounts	
11.	Statement value at end of current period (Line 9 minus Line 10)	5,265,382

SCHEDULE B - VERIFICATION BETWEEN YEARS

Mortgage Loans

1.	Book value/recorded investment excluding accrued interest, December 31 of prior year	
2.	Cost of acquired:	
2.1	Actual cost at time of acquisition (Part 2, Column 7)	
2.2	Additional investment made after acquisition (Part 2, Column 8)	
3.	Capitalized deferred interest and other:	
3.1	Totals, Part 1, Column 12	
3.2	Totals, Part 3, Column 11	
4.	Accrual of discount	
5.	Unrealized valuation increase (decrease):	
5.1	Totals, Part 1, Column 9	
5.2	Totals, Part 3, Column 8	
6.	Total gain (loss) on disposals, Part 3, Column 18	
7.	Deduct amounts received on disposals, Part 3, Column 15	
8.	Deduct amortization of premium and mortgage interest points and commitment fees	
9.	Total foreign exchange change in book value/recorded investment excluding accrued interest:	
9.1	Totals, Part 1, Column 13	
9.2	Totals, Part 3, Column 13	
10.	Deduct current year's other than temporary impairment recognized:	
10.1	Totals, Part 1, Column 11	
10.2	Totals, Part 3, Column 10	
11.	Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)	
12.	Total valuation allowance	
13.	Subtotal (Line 11 plus 12)	
14.	Deduct total nonadmitted amounts	
15.	Statement value of mortgages owned at end of current period (Line 13 minus Line 14)	

NONE

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

SCHEDULE BA - VERIFICATION BETWEEN YEARS

Other Long-Term Invested Assets

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

NONE

SCHEDULE D - VERIFICATION BETWEEN YEARS

Bonds and Stocks

1.	Book/adjusted carrying value, December 31 of prior year	48,341,767
2.	Cost of bonds and stocks acquired, Part 3, Column 7	40,827,386
3.	Accrual of discount	30,467
4.	Unrealized valuation increase (decrease):	
4.1.	Part 1, Column 12	
4.2.	Part 2, Section 1, Column 15	
4.3.	Part 2, Section 2, Column 13	
4.4.	Part 4, Column 11	
5.	Total gain (loss) on disposals, Part 4, Column 19	689
6.	Deduction consideration for bonds and stocks disposed of, Part 4, Column 7	1,844,577
7.	Deduct amortization of premium	121,505
8.	Total foreign exchange change in book/adjusted carrying value:	
8.1.	Part 1, Column 15	
8.2.	Part 2, Section 1, Column 19	
8.3.	Part 2, Section 2, Column 16	
8.4.	Part 4, Column 15	
9.	Deduct current year's other than temporary impairment recognized:	
9.1.	Part 1, Column 14	
9.2.	Part 2, Section 1, Column 17	
9.3.	Part 2, Section 2, Column 14	
9.4.	Part 4, Column 13	
10.	Total investment income recognized as a result of prepayment penalties and/or acceleration fees, Note 5Q, Line 2	37,119
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10)	87,271,347
12.	Deduct total nonadmitted amounts	
13.	Statement value at end of current period (Line 11 minus Line 12)	87,271,347

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

SCHEDULE D - SUMMARY BY COUNTRY

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

Description		1 Book/Adjusted Carrying Value	2 Fair Value	3 Actual Cost	4 Par Value of Bonds
BONDS					
Governments (Including all obligations guaranteed by governments)	1. United States	2,105,120	2,352,786	2,113,789	2,062,100
	2. Canada				
	3. Other Countries				
	4. Totals	2,105,120	2,352,786	2,113,789	2,062,100
U.S. States, Territories and Possessions (Direct and guaranteed)	5. Totals	1,672,852	1,827,978	1,747,456	1,550,000
U.S. Political Subdivisions of States, Territories and Possessions (Direct and guaranteed)	6. Totals	2,604,528	2,761,635	2,656,883	2,600,000
U.S. Special Revenue and Special Assessment Obligations and all Non- Guaranteed Obligations of Agencies and Authorities of Governments and their Political Subdivisions	7. Totals	7,781,708	8,714,067	8,022,507	7,435,170
Industrial and Miscellaneous, SVO Identified Funds, Unaffiliated Bank Loans and Hybrid Securities (unaffiliated)	8. United States	63,335,611	69,513,557	63,394,553	63,375,000
	9. Canada	1,247,212	1,464,687	1,246,663	1,250,000
	10. Other Countries	8,514,316	9,073,533	8,517,921	8,500,000
	11. Totals	73,097,139	80,051,777	73,159,137	73,125,000
Parent, Subsidiaries and Affiliates	12. Totals				
	13. Total Bonds	87,261,347	95,708,243	87,699,771	86,772,270
PREFERRED STOCKS					
Industrial and Miscellaneous (unaffiliated)	14. United States				
	15. Canada				
	16. Other Countries				
	17. Totals				
Parent, Subsidiaries and Affiliates	18. Totals				
	19. Total Preferred Stocks				
COMMON STOCKS					
Industrial and Miscellaneous (unaffiliated)	20. United States	10,000	10,000	10,000	
	21. Canada				
	22. Other Countries				
	23. Totals	10,000	10,000	10,000	
Parent, Subsidiaries and Affiliates	24. Totals				
	25. Total Common Stocks	10,000	10,000	10,000	
	26. Total Stocks	10,000	10,000	10,000	
	27. Total Bonds and Stocks	87,271,347	95,718,243	87,709,771	

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

SCHEDULE D - PART 1A - SECTION 1

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

NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 No Maturity Date	7 Total Current Year	8 Col. 7 as a % of Line 11.7	9 Total from Col. 7 Prior Year	10 % From Col. 8 Prior Year	11 Total Publicly Traded	12 Total Privately Placed (a)
1. U.S. Governments												
1.1 NAIC 1		514,284	1,590,836			XXX	2,105,120	2.4	1,705,030	2.3	2,105,120	
1.2 NAIC 2						XXX						
1.3 NAIC 3						XXX						
1.4 NAIC 4						XXX						
1.5 NAIC 5						XXX						
1.6 NAIC 6						XXX						
1.7 Totals		514,284	1,590,836			XXX	2,105,120	2.4	1,705,030	2.3	2,105,120	
2. All Other Governments												
2.1 NAIC 1						XXX						
2.2 NAIC 2						XXX						
2.3 NAIC 3						XXX						
2.4 NAIC 4						XXX						
2.5 NAIC 5						XXX						
2.6 NAIC 6						XXX						
2.7 Totals						XXX						
3. U.S. States, Territories and Possessions etc., Guaranteed												
3.1 NAIC 1			1,672,852			XXX	1,672,852	1.9	1,190,658	1.6	1,672,852	
3.2 NAIC 2						XXX						
3.3 NAIC 3						XXX						
3.4 NAIC 4						XXX						
3.5 NAIC 5						XXX						
3.6 NAIC 6						XXX						
3.7 Totals			1,672,852			XXX	1,672,852	1.9	1,190,658	1.6	1,672,852	
4. U.S. Political Subdivisions of States, Territories and Possessions, Guaranteed												
4.1 NAIC 1	503,894	850,634	1,250,000			XXX	2,604,528	3.0	1,816,406	2.5	2,604,528	
4.2 NAIC 2						XXX						
4.3 NAIC 3						XXX						
4.4 NAIC 4						XXX						
4.5 NAIC 5						XXX						
4.6 NAIC 6						XXX						
4.7 Totals	503,894	850,634	1,250,000			XXX	2,604,528	3.0	1,816,406	2.5	2,604,528	
5. U.S. Special Revenue & Special Assessment Obligations, etc., Non-Guaranteed												
5.1 NAIC 1	137	4,003,807	3,127,593	650,170		XXX	7,781,708	8.9	8,688,596	11.9	7,781,708	
5.2 NAIC 2						XXX						
5.3 NAIC 3						XXX						
5.4 NAIC 4						XXX						
5.5 NAIC 5						XXX						
5.6 NAIC 6						XXX						
5.7 Totals	137	4,003,807	3,127,593	650,170		XXX	7,781,708	8.9	8,688,596	11.9	7,781,708	

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

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

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

NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 No Maturity Date	7 Total Current Year	8 Col. 7 as a % of Line 11.7	9 Total from Col. 7 Prior Year	10 % From Col. 8 Prior Year	11 Total Publicly Traded	12 Total Privately Placed (a)
6. Industrial & Miscellaneous (Unaffiliated)												
6.1 NAIC 1	134,831	3,991,639	13,517,920	766,625	454,784	XXX	18,865,800	21.6	16,073,713	22.1	18,865,800	0
6.2 NAIC 2	254,677	5,837,513	44,393,220	1,747,230		XXX	52,232,640	59.9	43,386,269	59.5	52,232,640	
6.3 NAIC 3			1,998,699			XXX	1,998,699	2.3			1,998,699	
6.4 NAIC 4						XXX						
6.5 NAIC 5						XXX						
6.6 NAIC 6						XXX						
6.7 Totals	389,509	9,829,152	59,909,839	2,513,855	454,784	XXX	73,097,139	83.8	59,459,982	81.6	73,097,139	0
7. Hybrid Securities												
7.1 NAIC 1						XXX						
7.2 NAIC 2						XXX						
7.3 NAIC 3						XXX						
7.4 NAIC 4						XXX						
7.5 NAIC 5						XXX						
7.6 NAIC 6						XXX						
7.7 Totals						XXX						
8. Parent, Subsidiaries and Affiliates												
8.1 NAIC 1						XXX						
8.2 NAIC 2						XXX						
8.3 NAIC 3						XXX						
8.4 NAIC 4						XXX						
8.5 NAIC 5						XXX						
8.6 NAIC 6						XXX						
8.7 Totals						XXX						
9. SVO Identified Funds												
9.1 NAIC 1	XXX	XXX	XXX	XXX	XXX							
9.2 NAIC 2	XXX	XXX	XXX	XXX	XXX							
9.3 NAIC 3	XXX	XXX	XXX	XXX	XXX							
9.4 NAIC 4	XXX	XXX	XXX	XXX	XXX							
9.5 NAIC 5	XXX	XXX	XXX	XXX	XXX							
9.6 NAIC 6	XXX	XXX	XXX	XXX	XXX							
9.7 Totals	XXX	XXX	XXX	XXX	XXX							
10. Unaffiliated Bank Loans												
10.1 NAIC 1						XXX						
10.2 NAIC 2						XXX						
10.3 NAIC 3						XXX						
10.4 NAIC 4						XXX						
10.5 NAIC 5						XXX						
10.6 NAIC 6						XXX						
10.7 Totals						XXX						

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

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

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

NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 No Maturity Date	7 Total Current Year	8 Col. 7 as a % of Line 11.7	9 Total from Col. 7 Prior Year	10 % From Col. 8 Prior Year	11 Total Publicly Traded	12 Total Privately Placed (a)
11. Total Bonds Current Year												
11.1 NAIC 1	(d) 638,862	9,360,364	21,159,201	1,416,796	454,784		33,030,008	37.9	XXX	XXX	33,030,008	0
11.2 NAIC 2	(d) 254,677	5,837,513	44,393,220	1,747,230			52,232,640	59.9	XXX	XXX	52,232,640	
11.3 NAIC 3	(d)		1,998,699				1,998,699	2.3	XXX	XXX	1,998,699	
11.4 NAIC 4	(d)								XXX	XXX		
11.5 NAIC 5	(d)								XXX	XXX		
11.6 NAIC 6	(d)								XXX	XXX		
11.7 Totals	893,540	15,197,877	67,551,121	3,164,025	454,784		(b) 87,261,347	100.0	XXX	XXX	87,261,347	0
11.8 Line 11.7 as a % of Col. 7	1.0	17.4	77.4	3.6	0.5		100.0	XXX	XXX	XXX	100.0	0.0
12. Total Bonds Prior Year												
12.1 NAIC 1	7,075,843	4,705,784	14,761,451	2,476,406	454,919		XXX	XXX	29,474,403	40.5	29,222,536	251,867
12.2 NAIC 2	18,526,481	3,159,695	20,184,326	1,515,767			XXX	XXX	43,386,269	59.5	43,137,144	249,125
12.3 NAIC 3							XXX	XXX				
12.4 NAIC 4							XXX	XXX				
12.5 NAIC 5							XXX	XXX				
12.6 NAIC 6							XXX	XXX				
12.7 Totals	25,602,324	7,865,479	34,945,777	3,992,173	454,919		XXX	XXX	(b) 72,860,672	100.0	72,359,680	500,992
12.8 Line 12.7 as a % of Col. 9	35.1	10.8	48.0	5.5	0.6		XXX	XXX	100.0	XXX	99.3	0.7
13. Total Publicly Traded Bonds												
13.1 NAIC 1	638,862	9,360,364	21,159,201	1,416,796	454,784		33,030,008	37.9	29,222,536	40.1	33,030,008	XXX
13.2 NAIC 2	254,677	5,837,513	44,393,220	1,747,230			52,232,640	59.9	43,137,144	59.2	52,232,640	XXX
13.3 NAIC 3			1,998,699				1,998,699	2.3			1,998,699	XXX
13.4 NAIC 4												XXX
13.5 NAIC 5												XXX
13.6 NAIC 6												XXX
13.7 Totals	893,540	15,197,877	67,551,121	3,164,025	454,784		87,261,347	100.0	72,359,680	99.3	87,261,347	XXX
13.8 Line 13.7 as a % of Col. 7	1.0	17.4	77.4	3.6	0.5		100.0	XXX	XXX	XXX	100.0	XXX
13.9 Line 13.7 as a % of Line 11.7, Col. 7, Section 11	1.0	17.4	77.4	3.6	0.5		100.0	XXX	XXX	XXX	100.0	XXX
14. Total Privately Placed Bonds												
14.1 NAIC 1									251,867	0.3	XXX	
14.2 NAIC 2									249,125	0.3	XXX	
14.3 NAIC 3											XXX	
14.4 NAIC 4											XXX	
14.5 NAIC 5											XXX	
14.6 NAIC 6											XXX	
14.7 Totals									500,992	0.7	XXX	
14.8 Line 14.7 as a % of Col. 7									XXX	XXX	XXX	
14.9 Line 14.7 as a % of Line 11.7, Col. 7, Section 11									XXX	XXX	XXX	

(a) Includes \$ _____ freely tradable under SEC Rule 144 or qualified for resale under SEC Rule 144A.

(b) Includes \$ _____ current year of bonds with Z designations and \$ 45,567 prior year of bonds with Z designations. The letter "Z" means the NAIC designation was not assigned by the Securities Valuation Office (SVO) at the date of the statement.

(c) Includes \$ _____ current year, \$ _____ prior year of bonds with 5GI designations and \$ _____ current year, \$ _____ prior year of bonds with 6* designations. "5GI" means the NAIC designation was assigned by the (SVO) in reliance on the insurer's certification that the issuer is current in all principal and interest payments. "6*" means the NAIC designation was assigned by the SVO due to inadequate certification of principal and interest payments.

(d) Includes the following amount of short-term and cash equivalent bonds by NAIC designation: NAIC 1 \$ _____ ; NAIC 2 \$ _____ ; NAIC 3 \$ _____ ; NAIC 4 \$ _____ ; NAIC 5 \$ _____ ; NAIC 6 \$ _____

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

SCHEDULE D - PART 1A - SECTION 2

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

Distribution by Type	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 No Maturity Date	7 Total Current Year	8 Col. 7 as a % of Line 11.08	9 Total from Col. 7 Prior Year	10 % From Col. 8 Prior Year	11 Total Publicly Traded	12 Total Privately Placed
1. U.S. Governments												
1.01 Issuer Obligations		514,284	1,590,836			XXX	2,105,120	2.4	1,705,030	2.3	2,105,120	
1.02 Residential Mortgage-Backed Securities						XXX						
1.03 Commercial Mortgage-Backed Securities						XXX						
1.04 Other Loan-Backed and Structured Securities						XXX						
1.05 Totals		514,284	1,590,836			XXX	2,105,120	2.4	1,705,030	2.3	2,105,120	
2. All Other Governments												
2.01 Issuer Obligations						XXX						
2.02 Residential Mortgage-Backed Securities						XXX						
2.03 Commercial Mortgage-Backed Securities						XXX						
2.04 Other Loan-Backed and Structured Securities						XXX						
2.05 Totals						XXX						
3. U.S. States, Territories and Possessions, Guaranteed												
3.01 Issuer Obligations			1,672,852			XXX	1,672,852	1.9	1,190,658	1.6	1,672,852	
3.02 Residential Mortgage-Backed Securities						XXX						
3.03 Commercial Mortgage-Backed Securities						XXX						
3.04 Other Loan-Backed and Structured Securities						XXX						
3.05 Totals			1,672,852			XXX	1,672,852	1.9	1,190,658	1.6	1,672,852	
4. U.S. Political Subdivisions of States, Territories and Possessions, Guaranteed												
4.01 Issuer Obligations	503,894	850,634	1,250,000			XXX	2,604,528	3.0	1,816,406	2.5	2,604,528	
4.02 Residential Mortgage-Backed Securities						XXX						
4.03 Commercial Mortgage-Backed Securities						XXX						
4.04 Other Loan-Backed and Structured Securities						XXX						
4.05 Totals	503,894	850,634	1,250,000			XXX	2,604,528	3.0	1,816,406	2.5	2,604,528	
5. U.S. Special Revenue & Special Assessment Obligations etc., Non-Guaranteed												
5.01 Issuer Obligations		4,003,771	3,127,593	650,170		XXX	7,781,535	8.9	8,688,183	11.9	7,781,535	
5.02 Residential Mortgage-Backed Securities	137	36				XXX	173	0.0	413	0.0	173	
5.03 Commercial Mortgage-Backed Securities						XXX						
5.04 Other Loan-Backed and Structured Securities						XXX						
5.05 Totals	137	4,003,807	3,127,593	650,170		XXX	7,781,708	8.9	8,688,596	11.9	7,781,708	
6. Industrial and Miscellaneous												
6.01 Issuer Obligations	389,509	9,829,152	59,909,839	2,513,855	454,784	XXX	73,097,139	83.8	59,459,982	81.6	73,097,139	
6.02 Residential Mortgage-Backed Securities						XXX						
6.03 Commercial Mortgage-Backed Securities						XXX						
6.04 Other Loan-Backed and Structured Securities						XXX						
6.05 Totals	389,509	9,829,152	59,909,839	2,513,855	454,784	XXX	73,097,139	83.8	59,459,982	81.6	73,097,139	
7. Hybrid Securities												
7.01 Issuer Obligations						XXX						
7.02 Residential Mortgage-Backed Securities						XXX						
7.03 Commercial Mortgage-Backed Securities						XXX						
7.04 Other Loan-Backed and Structured Securities						XXX						
7.05 Totals						XXX						
8. Parent, Subsidiaries and Affiliates												
8.01 Issuer Obligations						XXX						
8.02 Residential Mortgage-Backed Securities						XXX						
8.03 Commercial Mortgage-Backed Securities						XXX						
8.04 Other Loan-Backed and Structured Securities						XXX						
8.05 Affiliated Bank Loans - Issued						XXX						
8.06 Affiliated Bank Loans - Acquired						XXX						
8.07 Totals						XXX						

S108

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

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

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

Distribution by Type	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 No Maturity Date	7 Total Current Year	8 Col. 7 as a % of Line 11.08	9 Total from Col. 7 Prior Year	10 % From Col. 8 Prior Year	11 Total Publicly Traded	12 Total Privately Placed
9. SVO Identified Funds												
9.01 Exchange Traded Funds Identified by the SVO	XXX	XXX	XXX	XXX	XXX							
9.02 Bond Mutual Funds Identified by the SVO	XXX	XXX	XXX	XXX	XXX							
9.03 Totals	XXX	XXX	XXX	XXX	XXX							
10. Unaffiliated Bank Loans												
10.01 Unaffiliated Bank Loans - Issued						XXX						
10.02 Unaffiliated Bank Loans - Acquired						XXX						
10.03 Totals						XXX						
11. Total Bonds Current Year												
11.01 Issuer Obligations	893,402	15,197,842	67,551,121	3,164,025	454,784	XXX	87,261,174	100.0	XXX	XXX	87,261,174	
11.02 Residential Mortgage-Backed Securities	137	36				XXX	173	0.0	XXX	XXX	173	
11.03 Commercial Mortgage-Backed Securities						XXX			XXX	XXX		
11.04 Other Loan-Backed and Structured Securities						XXX			XXX	XXX		
11.05 SVO Identified Funds	XXX	XXX	XXX	XXX	XXX				XXX	XXX		
11.06 Affiliated Bank Loans						XXX			XXX	XXX		
11.07 Unaffiliated Bank Loans						XXX			XXX	XXX		
11.08 Totals	893,540	15,197,877	67,551,121	3,164,025	454,784		87,261,347	100.0	XXX	XXX	87,261,347	
11.09 Line 11.08 as a % of Col. 7	1.0	17.4	77.4	3.6	0.5		100.0	XXX	XXX	XXX	100.0	
12. Total Bonds Prior Year												
12.01 Issuer Obligations	25,602,100	7,865,290	34,945,777	3,992,173	454,919	XXX	XXX	XXX	72,860,259	100.0	72,359,267	500,992
12.02 Residential Mortgage-Backed Securities	224	189				XXX	XXX	XXX	413	0.0	413	
12.03 Commercial Mortgage-Backed Securities						XXX	XXX	XXX				
12.04 Other Loan-Backed and Structured Securities						XXX	XXX	XXX				
12.05 SVO Identified Funds	XXX	XXX	XXX	XXX	XXX		XXX	XXX				
12.06 Affiliated Bank Loans						XXX	XXX	XXX				
12.07 Unaffiliated Bank Loans						XXX	XXX	XXX				
12.08 Totals	25,602,324	7,865,479	34,945,777	3,992,173	454,919		XXX	XXX	72,860,672	100.0	72,359,680	500,992
12.09 Line 12.08 as a % of Col. 9	35.1	10.8	48.0	5.5	0.6		XXX	XXX	100.0	XXX	99.3	0.7
13. Total Publicly Traded Bonds												
13.01 Issuer Obligations	893,402	15,197,842	67,551,121	3,164,025	454,784	XXX	87,261,174	100.0	72,359,267	99.3	87,261,174	XXX
13.02 Residential Mortgage-Backed Securities	137	36				XXX	173	0.0	413	0.0	173	XXX
13.03 Commercial Mortgage-Backed Securities						XXX						XXX
13.04 Other Loan-Backed and Structured Securities						XXX						XXX
13.05 SVO Identified Funds	XXX	XXX	XXX	XXX	XXX							XXX
13.06 Affiliated Bank Loans						XXX						XXX
13.07 Unaffiliated Bank Loans						XXX						XXX
13.08 Totals	893,540	15,197,877	67,551,121	3,164,025	454,784		87,261,347	100.0	72,359,680	99.3	87,261,347	XXX
13.09 Line 13.08 as a % of Col. 7	1.0	17.4	77.4	3.6	0.5		100.0	XXX	XXX	XXX	100.0	XXX
13.10 Line 13.08 as a % of Line 11.08, Col. 7, Section 11	1.0	17.4	77.4	3.6	0.5		100.0	XXX	XXX	XXX	100.0	XXX
14. Total Privately Placed Bonds												
14.01 Issuer Obligations		0				XXX	0	0.0	500,992	0.7	XXX	0
14.02 Residential Mortgage-Backed Securities						XXX					XXX	
14.03 Commercial Mortgage-Backed Securities						XXX					XXX	
14.04 Other Loan-Backed and Structured Securities						XXX					XXX	
14.05 SVO Identified Funds	XXX	XXX	XXX	XXX	XXX						XXX	
14.06 Affiliated Bank Loans						XXX					XXX	
14.07 Unaffiliated Bank Loans						XXX					XXX	
14.08 Totals		0							500,992	0.7	XXX	0
14.09 Line 14.08 as a % of Col. 7								XXX	XXX	XXX	XXX	
14.10 Line 14.08 as a % of Line 11.08, Col. 7, Section 11		0.0						XXX	XXX	XXX	XXX	0.0

6015

Schedule DA - Verification - Short-Term Investments

NONE

Schedule DB - Part A - Verification - Options, Caps, Floors, Collars, Swaps and Forwards

NONE

Schedule DB - Part B - Verification - Futures Contracts

NONE

Schedule DB - Part C - Section 1 - Replication (Synthetic Asset) Transactions (RSATs) Open

NONE

Schedule DB-Part C-Section 2-Reconciliation of Replication (Synthetic Asset) Transactions Open

NONE

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

NONE

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY
SCHEDULE E - PART 2 - VERIFICATION BETWEEN YEARS

(Cash Equivalents)

	1 Total	2 Bonds	3 Money Market Mutual funds	4 Other (a)
1. Book/adjusted carrying value, December 31 of prior year	24,581,592	24,557,104	24,488	
2. Cost of cash equivalents acquired	477,164,348	431,637,805	45,526,543	
3. Accrual of discount	62,420	62,420		
4. Unrealized valuation increase (decrease)				
5. Total gain (loss) on disposals	113	113		
6. Deduct consideration received on disposals	493,776,287	456,257,442	37,518,845	
7. Deduct amortization of premium				
8. Total foreign exchange change in book/adjusted carrying value				
9. Deduct current year's other than temporary impairment recognized				
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	8,032,186		8,032,186	
11. Deduct total nonadmitted amounts				
12. Statement value at end of current period (Line 10 minus Line 11)	8,032,186		8,032,186	

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

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

SCHEDULE A - PART 1

Showing All Real Estate OWNED December 31 of Current Year

1	2	Location		5	6	7	8	9	10	Change in Book/Adjusted Carrying Value Less Encumbrances					16	17
		3	4							11	12	13	14	15		
Description of Property	Code	City	State	Date Acquired	Date of Last Appraisal	Actual Cost	Amount of Encumbrances	Book/Adjusted Carrying Value Less Encumbrances	Fair Value Less Encumbrances	Current Year's Depreciation	Current Year's Other-Than-Temporary Impairment Recognized	Current Year's Change in Encumbrances	Total Change in Book/Adjusted Carrying Value (13-11-12)	Total Foreign Exchange Change in Book/Adjusted Carrying Value	Gross Income Earned Less Interest Incurred on Encumbrances	Taxes, Repairs and Expenses Incurred
8485 GOODWOOD BLVD.		BATON ROUGE	LA	06/13/2006	06/24/2016	8,266,669		5,265,382	5,800,000	123,829			(123,829)		426,217	146,509
0299999. Property occupied by the reporting entity - Administrative						8,266,669		5,265,382	5,800,000	123,829			(123,829)		426,217	146,509
0399999. Total Property occupied by the reporting entity						8,266,669		5,265,382	5,800,000	123,829			(123,829)		426,217	146,509
0699999 - Totals						8,266,669		5,265,382	5,800,000	123,829			(123,829)		426,217	146,509

Schedule A - Part 2 - Real Estate Acquired and Additions Made

NONE

Schedule A - Part 3 - Real Estate Disposed

NONE

Schedule B - Part 1 - Mortgage Loans Owned

NONE

Schedule B - Part 2 - Mortgage Loans Acquired and Additions Made

NONE

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

NONE

Schedule BA - Part 1 - Other Long-Term Invested Assets Owned

NONE

Schedule BA - Part 2 - Other Long-Term Invested Assets Acquired and Additions Made

NONE

Schedule BA - Part 3 - Other Long-Term Invested Assets Disposed, Transferred or Repaid

NONE

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

SCHEDULE D - PART 1

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

1	2	Codes			6	7	Fair Value		10	11	Change in Book/Adjusted Carrying Value				Interest					Dates	
		3	4	5			8	9			12	13	14	15	16	17	18	19	20	21	22
CUSIP Identification	Description	C o d e	F o r e i g n	B o n d C h a r	NAIC Designation, NAIC Designation Modifier and SVO Administrative Symbol	Actual Cost	Rate Used to Obtain Fair Value	Fair Value	Par Value	Book/ Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amortization) Accretion	Current Year's Other-Than-Temporary Impairment Recognized	Total Foreign Exchange Change in Book/ Adjusted Carrying Value	Rate of	Effective Rate of	When Paid	Admitted Amount Due and Accrued	Amount Received During Year	Acquired	Stated Contractual Maturity Date
94974B-0P-9	WELLS FARGO & CO				2.A FE	247,263	112.3992	280,998	250,000	248,423		300			3.550	3.696	MS	2,268	8,875	12/22/2016	09/29/2025
95000U-2J-1	WELLS FARGO & CO			1,2,5	2.A FE	1,500,000	106.1520	1,592,280	1,500,000	1,500,000					2.572	2.572	FA	15,003	19,290	02/04/2020	02/11/2031
962166-BX-1	WEYERHAEUSER CO			1,2	2.B FE	994,620	117.8040	1,178,040	1,000,000	995,389		429			4.000	4.063	MN	5,111	40,000	02/21/2019	11/15/2029
98934K-AB-6	ZENECA WILMINGTON INC				2.A FE	251,800	117.4632	234,926	200,000	217,141		(5,554)			7.000	3.818	MN	1,789	14,000	01/07/2014	11/15/2023
98978V-AK-9	ZOETIS INC			1,2	2.B FE	249,423	116.7235	291,809	250,000	249,696		55			4.500	4.528	MN	1,500	11,250	11/09/2015	11/13/2025
3299999	Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated) - Issuer Obligations					73,159,137	XXX	80,051,777	73,125,000	73,097,139		(9,892)			XXX	XXX	XXX	577,358	1,822,943	XXX	XXX
3899999	Total - Industrial and Miscellaneous (Unaffiliated) Bonds					73,159,137	XXX	80,051,777	73,125,000	73,097,139		(9,892)			XXX	XXX	XXX	577,358	1,822,943	XXX	XXX
4899999	Total - Hybrid Securities						XXX								XXX	XXX	XXX			XXX	XXX
5599999	Total - Parent, Subsidiaries and Affiliates Bonds						XXX								XXX	XXX	XXX			XXX	XXX
6099999	Subtotal - SVO Identified Funds						XXX								XXX	XXX	XXX			XXX	XXX
6599999	Subtotal - Unaffiliated Bank Loans						XXX								XXX	XXX	XXX			XXX	XXX
7699999	Total - Issuer Obligations					87,699,559	XXX	95,708,068	86,772,100	87,261,174		(85,948)			XXX	XXX	XXX	713,343	2,352,652	XXX	XXX
7799999	Total - Residential Mortgage-Backed Securities					212	XXX	175	170	173		(1)			XXX	XXX	XXX	1	10	XXX	XXX
7899999	Total - Commercial Mortgage-Backed Securities						XXX								XXX	XXX	XXX			XXX	XXX
7999999	Total - Other Loan-Backed and Structured Securities						XXX								XXX	XXX	XXX			XXX	XXX
8099999	Total - SVO Identified Funds						XXX								XXX	XXX	XXX			XXX	XXX
8199999	Total - Affiliated Bank Loans						XXX								XXX	XXX	XXX			XXX	XXX
8299999	Total - Unaffiliated Bank Loans						XXX								XXX	XXX	XXX			XXX	XXX
8399999	Total Bonds					87,699,771	XXX	95,708,243	86,772,270	87,261,347		(85,949)			XXX	XXX	XXX	713,343	2,352,662	XXX	XXX

Book/Adjusted Carrying Value by NAIC Designation Category Footnote:

1A ..\$	2,682,139	1B ..\$	2,132,117	1C ..\$	4,698,872	1D ..\$	4,980,207	1E ..\$	819,128	1F ..\$	5,355,844	1G ..\$	12,361,700
2A ..\$	18,907,458	2B ..\$	28,335,173	2C ..\$	4,990,009								
3A ..\$	1,998,699	3B ..\$		3C ..\$									
4A ..\$		4B ..\$		4C ..\$									
5A ..\$		5B ..\$		5C ..\$									
6 ..\$													

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

SCHEDULE D - PART 2 - SECTION 1

Showing All PREFERRED STOCKS Owned December 31 of Current Year

1 CUSIP Identification	2 Description	Codes		5 Number of Shares	6 Par Value Per Share	7 Rate Per Share	8 Book/Adjusted Carrying Value	Fair Value		11 Actual Cost	Dividends			Change in Book/Adjusted Carrying Value				20 NAIC Designation, NAIC Designation Modifier and SVO Administrative Symbol	21 Date Acquired		
		3 Code	4 Foreign					9 Rate Per Share Used to Obtain Fair Value	10 Fair Value		12 Declared but Unpaid	13 Amount Received During Year	14 Nonadmitted Declared But Unpaid	15 Unrealized Valuation Increase/ (Decrease)	16 Current Year's (Amortization) Accretion	17 Current Year's Other-Than-Temporary Impairment Recognized	18 Total Change in Book/Adjusted Carrying Value (15 + 16 - 17)			19 Total Foreign Exchange Change in Book/Adjusted Carrying Value	
NONE																					
8999999 - Total Preferred Stocks								XXX												XXX	XXX

Book/Adjusted Carrying Value by NAIC Designation Category Footnote:

1A ..\$ 1B ..\$ 1C ..\$ 1D ..\$ 1E ..\$ 1F ..\$ 1G ..\$
 2A ..\$ 2B ..\$ 2C ..\$
 3A ..\$ 3B ..\$ 3C ..\$
 4A ..\$ 4B ..\$ 4C ..\$
 5A ..\$ 5B ..\$ 5C ..\$
 6 ..\$

E11

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

SCHEDULE D - PART 2 - SECTION 2

Showing All COMMON STOCKS Owned December 31 of Current Year

1	2	Codes		5	6	Fair Value		9	Dividends			Change in Book/Adjusted Carrying Value				17	18
		3	4			7	8		10	11	12	13	14	15	16		
CUSIP Identification	Description	Code	Foreign	Number of Shares	Book/Adjusted Carrying Value	Rate Per Share Used to Obtain Fair Value	Fair Value	Actual Cost	Declared but Unpaid	Amount Received During Year	Nonadmitted Declared But Unpaid	Unrealized Valuation Increase/ (Decrease)	Current Year's Other-Than-Temporary Impairment Recognized	Total Change in Book/Adjusted Carrying Value (13 - 14)	Total Foreign Exchange Change in Book/Adjusted Carrying Value	Date Acquired	NAIC Designation, NAIC Designation Modifier and SVO Administrative Symbol
000000-00-0	FHLB BOSTON	RF		10,000.000	10,000	1.000	10,000	10,000								06/10/2020	
9099999. Subtotal - Common Stock - Industrial and Miscellaneous (Unaffiliated) Publicly Traded					10,000	XXX	10,000	10,000								XXX	XXX
9799999 - Total Common Stocks					10,000	XXX	10,000	10,000								XXX	XXX
9899999 - Total Preferred and Common Stocks					10,000	XXX	10,000	10,000								XXX	XXX

Book/Adjusted Carrying Value by NAIC Designation Category Footnote:

- 1A .\$. 1B .\$. 1C .\$. 1D .\$. 1E .\$. 1F .\$. 1G .\$.
- 2A .\$. 2B .\$. 2C .\$.
- 3A .\$. 3B .\$. 3C .\$.
- 4A .\$. 4B .\$. 4C .\$.
- 5A .\$. 5B .\$. 5C .\$.
- 6 .\$.

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

SCHEDULE D - PART 3

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

1	2	3	4	5	6	7	8	9
CUSIP Identification	Description	Foreign	Date Acquired	Name of Vendor	Number of Shares of Stock	Actual Cost	Par Value	Paid for Accrued Interest and Dividends
91282C-AC-5	UNITED STATES TREASURY		08/24/2020	CANTOR FITZGERALD & CO. INC.		404,826	405,000	34
0599999	Subtotal - Bonds - U.S. Governments					404,826	405,000	34
57582R-L6-1	MASSACHUSETTS (COMMONWEALTH OF)		11/19/2020	MORGAN STANLEY CO		500,000	500,000	
1799999	Subtotal - Bonds - U.S. States, Territories and Possessions					500,000	500,000	
982696-RZ-1	WYANDOTTE CNTY KANS UNI SCH DIST NO 500		02/04/2020	PIPER JAFFRAY INC		1,000,000	1,000,000	
2499999	Subtotal - Bonds - U.S. Political Subdivisions of States, Territories and Possessions					1,000,000	1,000,000	
025537-AN-1	AMERICAN ELECTRIC POWER COMPANY INC		03/03/2020	JP Morgan		1,499,340	1,500,000	
053611-AK-5	AVERY DENNISON CORP		03/04/2020	MERRILL LYNCH PIERCE FENNER		1,494,930	1,500,000	
060516-HZ-5	BANK OF AMERICA CORP		02/10/2020	BANK OF AMERICA N.A.		1,000,000	1,000,000	
142339-AJ-9	CARLISLE COMPANIES INC		02/13/2020	JP Morgan		1,481,340	1,500,000	
191241-AH-1	COCA-COLA FEMSA SAB DE CV	C	01/08/2020	CITIGROUP GLOBAL MARKETS INC.		1,979,440	2,000,000	
26443C-AJ-2	DUKE UNIVERSITY HEALTH SYSTEM INC		01/07/2020	JP Morgan		1,000,000	1,000,000	
29278N-AP-8	ENERGY TRANSFER OPERATING LP		01/07/2020	DEUTSCHE BANK SECURITIES, INC.		1,498,860	1,500,000	
29379V-BX-0	ENTERPRISE PRODUCTS OPERATING LLC		01/06/2020	CITIGROUP GLOBAL MARKETS INC.		1,498,815	1,500,000	
337932-AL-1	FIRSTENERGY CORP		02/18/2020	MORGAN STANLEY CO		1,998,580	2,000,000	
372460-AA-3	GENUINE PARTS CO		10/30/2020	BANK OF AMERICA N.A.		2,456,175	2,500,000	521
373334-KL-4	GEORGIA POWER CO		01/08/2020	Barclays Capital		1,970,320	2,000,000	17,667
38141G-XG-4	GOLDMAN SACHS GROUP INC		02/05/2020	Goldman Sachs		1,499,475	1,500,000	
466313-AJ-2	JABIL INC		01/08/2020	MERRILL LYNCH PIERCE FENNER		1,002,150	1,000,000	
485170-BD-5	KANSAS CITY SOUTHERN		01/10/2020	BANK OF AMERICA N.A.		1,709,673	1,700,000	7,603
502431-AN-9	L3HARRIS TECHNOLOGIES INC		11/10/2020	MORGAN STANLEY CO		2,499,050	2,500,000	
539439-AV-1	LLOYDS BANKING GROUP PLC	C	01/29/2020	CITIGROUP GLOBAL MARKETS INC.		2,000,000	2,000,000	
548661-DR-5	LOWE'S COMPANIES INC		01/09/2020	MORGAN STANLEY CO		1,596,045	1,500,000	17,082
58506Y-AT-9	MEDSTAR HEALTH, INC.		01/09/2020	JP Morgan		1,000,000	1,000,000	
67103H-AK-3	O'REILLY AUTOMOTIVE INC		11/05/2020	BANK OF AMERICA N.A.		1,493,220	1,500,000	3,354
714046-AG-4	PERKINELMER INC		01/10/2020	MERRILL LYNCH PIERCE FENNER		514,795	500,000	5,592
74834L-BB-5	QUEST DIAGNOSTICS INC		01/10/2020	Goldman Sachs		1,710,302	1,700,000	3,901
83192P-AA-6	SMITH & NEPHEW PLC	C	11/05/2020	BANK OF AMERICA N.A.		2,514,790	2,500,000	2,117
844741-BF-4	SOUTHWEST AIRLINES CO		02/05/2020	Barclays Capital		1,989,360	2,000,000	
95000U-2J-1	WELLS FARGO & CO		02/04/2020	WELLS FARGO SECURITIES LLC		1,500,000	1,500,000	
3899999	Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)					38,906,660	38,900,000	57,835
8399997	Total - Bonds - Part 3					40,811,486	40,805,000	57,870
8399998	Total - Bonds - Part 5							
8399999	Total - Bonds					40,811,486	40,805,000	57,870
8999997	Total - Preferred Stocks - Part 3						XXX	
8999998	Total - Preferred Stocks - Part 5						XXX	
8999999	Total - Preferred Stocks						XXX	
000000-00-0	FHLB BOSTON		06/10/2020	FHLB BOSTON	10,000.000	10,000		
9099999	Subtotal - Common Stocks - Industrial and Miscellaneous (Unaffiliated) Publicly Traded					10,000	XXX	
9799997	Total - Common Stocks - Part 3					10,000	XXX	
9799998	Total - Common Stocks - Part 5					5,900	XXX	
9799999	Total - Common Stocks					15,900	XXX	
9899999	Total - Preferred and Common Stocks					15,900	XXX	
9999999	Totals					40,827,386	XXX	57,870

E13

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

SCHEDULE D - PART 4

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

1	2	3	4	5	6	7	8	9	10	Change In Book/Adjusted Carrying Value					16	17	18	19	20	21	
										11	12	13	14	15							
CUSIP Identification	Description	Foreign	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consideration	Par Value	Actual Cost	Prior Year Book/ Adjusted Carrying Value	Unrealized Valuation Increase/ Decrease	Current Year's (Amortization)/ Accretion	Current Year's Other-Than-Temporary Impairment Recognized	Total Change in Book/ Adjusted Carrying Value (11+12-13)	Total Foreign Exchange Change in Book/ Adjusted Carrying Value	Book/ Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/ Stock Dividends Received During Year	Stated Contractual Maturity Date	
649726-VZ-4	NEW YORK N Y CITY MUN WTR FIN AUTH WTR &		06/15/2020	Call @ 100.00		200,000	200,000	226,004	202,520		(2,520)		(2,520)		200,000				8,302	06/15/2042	
2499999	Subtotal - Bonds - U.S. Political Subdivisions of States, Territories and Possessions					200,000	200,000	226,004	202,520		(2,520)		(2,520)		200,000				8,302	XXX	
312912-MK-1	FHR 1395 G - CMO/RMBS		12/01/2020	Paydown		92	92	117	94		(2)		(2)		92				3	10/15/2022	
313590-ZE-8	FNR 69259 D - CMO/RMBS		12/01/2020	Paydown		141	141	171	144		(3)		(3)		141				4	10/25/2022	
546282-EC-4	LOUISIANA LOC GOVT ENVIRONMENTAL FACS &		09/28/2020	Direct		140,000	140,000	152,564	140,249		(249)		(249)		140,000				7,000	10/01/2023	
546282-PE-8	LOUISIANA LOC GOVT ENVIRONMENTAL FACS & C		10/01/2020	Maturity @ 100.00		200,000	200,000	143,198	194,433		5,567		5,567		200,000					10/01/2020	
57419R-YY-5	MARYLAND ST CMINTY DEV ADMIN DEPT HSG & C		08/04/2020	Direct		15,000	15,000	15,000	15,000						15,000				241	09/01/2032	
60636Y-HM-6	MISSOURI ST HSG DEV COMM MULTIFAMILY HS		12/24/2020	Direct		5,000	5,000	5,130	5,016		(16)		(16)		5,000				208	07/01/2033	
751120-AJ-5	RALEIGH N C LTD OBLIG		06/18/2020	Direct		250,000	250,000	296,250	252,812		(2,812)		(2,812)		250,000				7,623	06/01/2035	
79739G-BD-7	SAN DIEGO CNTY CALIF REGU ARPT AUTH ARPT		06/26/2020	Direct		250,000	250,000	288,625	254,021		(4,021)		(4,021)		250,000				16,570	07/01/2040	
3199999	Subtotal - Bonds - U.S. Special Revenues					860,233	860,233	901,055	861,769		(1,536)		(1,536)		860,233				31,649	XXX	
001055-AJ-1	AFLAC INC		01/07/2020	Direct		208,514	200,000	200,400	200,103		(103)		(103)		200,000				11,736	02/15/2022	
212015-AL-5	CONTINENTAL RESOURCES INC		08/26/2020	JEFFERIES & COMPANY		253,125	250,000	257,905	253,063		(627)		(627)		252,436		689	689	9,781	04/15/2023	
460146-CJ-0	INTERNATIONAL PAPER CO		12/09/2020	Direct		278,605	250,000	250,603	250,301		(301)		(301)		250,000				37,705	06/15/2024	
3899999	Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)					740,244	700,000	708,908	703,467		(1,032)		(1,032)		702,436		689	689	59,222	XXX	
8399997	Total - Bonds - Part 4					1,800,477	1,760,233	1,835,967	1,767,757		(5,088)		(5,088)		1,762,668		689	689	99,173	XXX	
8399998	Total - Bonds - Part 5																			XXX	
8399999	Total - Bonds					1,800,477	1,760,233	1,835,967	1,767,757		(5,088)		(5,088)		1,762,668		689	689	99,173	XXX	
8999997	Total - Preferred Stocks - Part 4							XXX												XXX	
8999998	Total - Preferred Stocks - Part 5							XXX												XXX	
8999999	Total - Preferred Stocks							XXX												XXX	
000000-00-0	FHLB DALLAS		06/10/2020	FHLB Dallas		38,200	38,200	38,200	38,200						38,200					371	
9099999	Subtotal - Common Stocks - Industrial and Miscellaneous (Unaffiliated) Publicly Traded					38,200	XXX	38,200	38,200						38,200					371	XXX
9799997	Total - Common Stocks - Part 4					38,200	XXX	38,200	38,200						38,200					371	XXX
9799998	Total - Common Stocks - Part 5					5,900	XXX	5,900							5,900						XXX
9799999	Total - Common Stocks					44,100	XXX	44,100	38,200						44,100					371	XXX
9899999	Total - Preferred and Common Stocks					44,100	XXX	44,100	38,200						44,100					371	XXX
9999999	- Totals					1,844,577	XXX	1,880,067	1,805,957		(5,088)		(5,088)		1,806,768		689	689	99,545	XXX	

E14

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

SCHEDULE D - PART 5

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

1 CUSIP Identi- fication	2 Description	3 For- eign	4 Date Acquired	5 Name of Vendor	6 Disposal Date	7 Name of Purchaser	8 Par Value (Bonds) or Number of Shares (Stock)	9 Actual Cost	10 Consid- eration	11 Book/ Adjusted Carrying Value at Disposal	Change in Book/Adjusted Carrying Value					17 Foreign Exchange Gain (Loss) on Disposal	18 Realized Gain (Loss) on Disposal	19 Total Gain (Loss) on Disposal	20 Interest and Dividends Received During Year	21 Paid for Accrued Interest and Dividends
											12 Unrealized Valuation Increase/ (Decrease)	13 Current Year's (Amort- ization)/ Accretion	14 Current Year's Other- Than- Temporary Impairment Recognized	15 Total Change in Book/ Adjusted Carrying Valu (12 + 13 - 14)	16 Total Foreign Exchange Change in Book/ Adjusted Carrying Value					
8399998. Total - Bonds																				
8999998. Total - Preferred Stocks																				
000000-00-0	FHLB DALLAS		04/20/2020	FHLB DALLAS	06/10/2020	FHLB Dallas	59,000	5,900	5,900	5,900										
9099999. Subtotal - Common Stocks - Industrial and Miscellaneous (Unaffiliated) Publicly Traded																				
9799998. Total - Common Stocks																				
9899999. Total - Preferred and Common Stocks																				
9999999 - Totals																				

Schedule D-Part 6-Section 1-Valuation of Shares of Subsidiary, Controlled or Affiliated Companies

NONE

Schedule D - Part 6 - Section 2

NONE

Schedule DA - Part 1 - Short-Term Investments Owned

NONE

Schedule DB - Part A - Section 1 - Options, Caps, Floors, Collars, Swaps and Forwards Open

NONE

Schedule DB - Part A - Section 2 - Options, Caps, Floors, Collars, Swaps and Forwards Terminated

NONE

Schedule DB - Part B - Section 1 - Futures Contracts Open

NONE

Schedule DB - Part B - Section 1B - Brokers with whom cash deposits have been made

NONE

Schedule DB - Part B - Section 2 - Futures Contracts Terminated

NONE

Schedule DB - Part D - Section 1 - Counterparty Exposure for Derivative Instruments Open

NONE

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged By

NONE

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged To

NONE

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

NONE

Schedule DL - Part 1 - Reinvested Collateral Assets Owned

NONE

Schedule DL - Part 2 - Reinvested Collateral Assets Owned

NONE

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

SCHEDULE E - PART 1 - CASH

1	2	3	4	5	6	7
Depository	Code	Rate of Interest	Amount of Interest Received During Year	Amount of Interest Accrued December 31 of Current Year	Balance	*
Bank of America Richmond, VA					(528,445)	XXX
JPMorgan Chase Bank New York, NY					8,506,206	XXX
Regions Bank Baton Rouge, LA					967,638	XXX
0199998 Deposits in ... depositories which do not exceed the allowable limit in any one depository (See instructions) - open depositories	XXX	XXX				XXX
0199999. Totals - Open Depositories	XXX	XXX			8,945,399	XXX
0299998 Deposits in ... depositories which do not exceed the allowable limit in any one depository (See instructions) - suspended depositories	XXX	XXX				XXX
0299999. Totals - Suspended Depositories	XXX	XXX				XXX
0399999. Total Cash on Deposit	XXX	XXX			8,945,399	XXX
0499999. Cash in Company's Office	XXX	XXX	XXX	XXX		XXX
.....						
.....						
.....						
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.....						
0599999 Total - Cash	XXX	XXX			8,945,399	XXX

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

1. January.....	(1,129,284)	4. April.....	16,909,470	7. July.....	8,647,534	10. October.....	14,975,621
2. February.....	(307,620)	5. May.....	8,568,519	8. August.....	9,961,794	11. November.....	3,485,573
3. March.....	4,931,752	6. June.....	8,449,418	9. September.....	5,556,339	12. December.....	8,945,399

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE STARMOUNT LIFE INSURANCE COMPANY

SCHEDULE E - PART 3 - SPECIAL DEPOSITS

States, Etc.	1 Type of Deposit	2 Purpose of Deposit	Deposits For the Benefit of All Policyholders		All Other Special Deposits	
			3 Book/Adjusted Carrying Value	4 Fair Value	5 Book/Adjusted Carrying Value	6 Fair Value
1. Alabama	AL					
2. Alaska	AK					
3. Arizona	AZ					
4. Arkansas	AR					
5. California	CA					
6. Colorado	CO					
7. Connecticut	CT					
8. Delaware	DE					
9. District of Columbia	DC					
10. Florida	FL	C. REQUIRED STATUTORY DEPOSIT			100,000	100,000
11. Georgia	GA					
12. Hawaii	HI					
13. Idaho	ID					
14. Illinois	IL					
15. Indiana	IN					
16. Iowa	IA					
17. Kansas	KS					
18. Kentucky	KY					
19. Louisiana	LA					
20. Maine	ME	B. REQUIRED STATUTORY DEPOSIT	1,590,836	1,830,896		
21. Maryland	MD					
22. Massachusetts	MA	B. REQUIRED STATUTORY DEPOSIT			119,958	120,009
23. Michigan	MI					
24. Minnesota	MN					
25. Mississippi	MS					
26. Missouri	MO					
27. Montana	MT					
28. Nebraska	NE					
29. Nevada	NV	B. REQUIRED STATUTORY DEPOSIT			218,644	248,771
30. New Hampshire	NH					
31. New Jersey	NJ					
32. New Mexico	NM	B. REQUIRED STATUTORY DEPOSIT			205,332	232,137
33. New York	NY					
34. North Carolina	NC	B. REQUIRED STATUTORY DEPOSIT			428,493	448,495
35. North Dakota	ND					
36. Ohio	OH					
37. Oklahoma	OK					
38. Oregon	OR					
39. Pennsylvania	PA					
40. Rhode Island	RI					
41. South Carolina	SC					
42. South Dakota	SD					
43. Tennessee	TN					
44. Texas	TX					
45. Utah	UT					
46. Vermont	VT					
47. Virginia	VA	B. REQUIRED STATUTORY DEPOSIT			250,000	276,225
48. Washington	WA					
49. West Virginia	WV					
50. Wisconsin	WI					
51. Wyoming	WY					
52. American Samoa	AS					
53. Guam	GU					
54. Puerto Rico	PR					
55. U.S. Virgin Islands	VI					
56. Northern Mariana Islands	MP					
57. Canada	CAN					
58. Aggregate Alien and Other	OT	XXX	XXX			
59. Subtotal	XXX	XXX	1,590,836	1,830,896	1,322,427	1,425,638
DETAILS OF WRITE-INS						
5801.						
5802.						
5803.						
5898. Summary of remaining write-ins for Line 58 from overflow page	XXX	XXX				
5899. Totals (Lines 5801 thru 5803 plus 5898)(Line 58 above)	XXX	XXX				