



LIFE AND ACCIDENT AND HEALTH COMPANIES - ASSOCIATION EDITION

ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2017
OF THE CONDITION AND AFFAIRS OF THE

PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

NAIC Group Code 0565 (Current) 0565 (Prior) NAIC Company Code 68195 Employer's ID Number 62-0331200

Organized under the Laws of TENNESSEE, State of Domicile or Port of Entry TN

Country of Domicile United States of America

Incorporated/Organized 05/24/1887 Commenced Business 05/24/1887

Statutory Home Office 1 FOUNTAIN SQUARE CHATTANOOGA, TN, US 37402-1330
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 1 FOUNTAIN SQUARE CHATTANOOGA, TN, US 37402-1330
(Street and Number) (City or Town, State, Country and Zip Code)
423-294-1011 (Area Code) (Telephone Number)

Mail Address 1 FOUNTAIN SQUARE CHATTANOOGA, TN, US 37402-1330
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 1 FOUNTAIN SQUARE CHATTANOOGA, TN, US 37402-1330
(Street and Number) (City or Town, State, Country and Zip Code)
423-294-1882 (Area Code) (Telephone Number)

Internet Website Address www.unum.com

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

OFFICERS

Chairman, President and Chief Executive Officer MICHAEL QUINN SIMONDS Executive Vice President, Global Services CHRISTOPHER JOSEPH JEROME

Executive Vice President, Finance JOHN FRANCIS MCGARRY Executive Vice President, General Counsel LISA GONZALEZ IGLESIAS

Senior Vice President, Chief Financial Officer STEPHEN JOSEPH MITCHELL Senior Vice President, Corporate Marketing and Public Relations JOSEPH RICHARD FOLEY

Senior Vice President, Chief Accounting Officer DANIEL JASON WAXENBERG # Senior Vice President, Tax and Treasury CHERIE ANTOINETTE PASHLEY #

Senior Vice President, Chief Actuary MARYLOU RYAN MURPHY Vice President, Managing Counsel and Corporate Secretary JEAN PAUL JULLIENNE

Vice President, Treasurer TYLER WALTER SIIRA

DIRECTORS OR TRUSTEES

LISA GONZALEZ IGLESIAS CHRISTOPHER JOSEPH JEROME
MICHAEL QUINN SIMONDS STEPHEN JOSEPH MITCHELL # JOHN FRANCIS MCGARRY

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
Chairman, President and Chief Executive Officer

Signature of Jean Paul Jullienne

JEAN PAUL JULLIENNE
Vice President, Managing Counsel and Corporate Secretary

Signature of Tyler Walter Siira

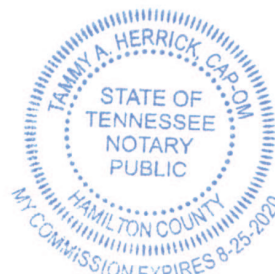
TYLER WALTER SIIRA
Vice President, Treasurer

Subscribed and sworn to before me this 20 day of February, 2018

Signature of Tammy Herrick, Notary Public

Tammy Herrick
My Commission Expires August 25, 2020

- 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





ANNUAL STATEMENT FOR THE YEAR 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Alabama

DURING THE YEAR 2017

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68195

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, and Direct Claims and Benefits Paid.

Table with 10 columns: 1 No., 2 Amount, 3 No. of Ind.Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No., 8 Amount, 9 No., 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 Dividends Paid Or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and Individual 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 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Alaska

DURING THE YEAR 2017

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68195

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	82,789		2,527		85,315
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	82,789		2,527		85,315
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	48,000		190,057		238,057
10. Matured endowments	1,000				1,000
11. Annuity benefits			19,821		19,821
12. Surrender values and withdrawals for life contracts	12,813		2,554		15,367
13. Aggregate write-ins for miscellaneous direct claims and benefits paid			131,241		131,241
14. All other benefits, except accident and health					
15. Totals	61,813		343,673		405,486
DETAILS OF WRITE-INS					
1301. Disability Benefits					
1302. Supplementary Contracts			131,241		131,241
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)			131,241		131,241

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.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year					.3	10,835			.3	10,835
17. Incurred during current year	2	49,000			.3	190,057			.5	239,057
Settled during current year:										
18.1 By payment in full	2	49,000			.3	190,057			.5	239,057
18.2 By payment on compromised claims										
18.3 Totals paid	2	49,000			.3	190,057			.5	239,057
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	2	49,000			.3	190,057			.5	239,057
19. Unpaid Dec. 31, current year (16+17-18.6)					.3	10,835			.3	10,835
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	333	6,859,862	(a)		.0	416,233			333	7,276,094
21. Issued during year	74	973,009							74	973,009
22. Other changes to in force (Net)	(63)	(1,515,974)				(2,554)			(63)	(1,518,528)
23. In force December 31 of current year	344	6,316,897	(a)		.0	413,678			344	6,730,576

(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	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	1,834	1,834		64,736	79,047
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)	486,038	497,884		208,908	188,650
25.2 Guaranteed renewable (b)	271,903	276,437		94,592	92,329
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)	757,941	774,321		303,500	280,979
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	759,775	776,155		368,236	360,026

(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 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Arizona

DURING THE YEAR 2017

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68195

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	3,679,225		24,015		3,703,239
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	3,679,225		24,015		3,703,239
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	939,263		60,198		999,461
10. Matured endowments	4,000				4,000
11. Annuity benefits			1,140,110		1,140,110
12. Surrender values and withdrawals for life contracts	1,650,932				1,650,932
13. Aggregate write-ins for miscellaneous direct claims and benefits paid			44,024		44,024
14. All other benefits, except accident and health	29,796		430		30,226
15. Totals	2,623,991		1,244,763		3,868,754
DETAILS OF WRITE-INS					
1301. Disability Benefits					
1302. Supplementary Contracts			44,024		44,024
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)			44,024		44,024

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.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	3	6,814				0			3	6,815
17. Incurred during current year	41	995,943			10	60,198			51	1,056,141
Settled during current year:										
18.1 By payment in full	43	943,263			10	60,198			53	1,003,461
18.2 By payment on compromised claims										
18.3 Totals paid	43	943,263			10	60,198			53	1,003,461
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	43	943,263			10	60,198			53	1,003,461
19. Unpaid Dec. 31, current year (16+17-18.6)	1	59,494				0			1	59,494
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	16,369	358,969,696	(a)		2	2,855,495			16,371	361,825,191
21. Issued during year	1,791	34,878,285							1,791	34,878,285
22. Other changes to in force (Net)	(3,327)	(100,112,562)				(214,244)			(3,327)	(100,326,806)
23. In force December 31 of current year	14,833	293,735,418	(a)		2	2,641,251			14,835	296,376,670

(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	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	31,275	31,290		277,259	131,961
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	7,314,587	7,914,137		22,384,196	20,213,559
25.2 Guaranteed renewable (b)	3,695,146	3,766,747		980,882	991,300
25.3 Non-renewable for stated reasons only (b)	1,826	2,015		3,061	2,366
25.4 Other accident only	1,088	1,281		(5,380)	(4,021)
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	11,012,646	11,684,180		23,362,759	21,203,204
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	11,043,921	11,715,470		23,640,017	21,335,165

(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 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Arkansas

DURING THE YEAR 2017

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68195

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	6,836,995		2,991		6,839,985
2. Annuity considerations					
3. Deposit-type contract funds	1,000	XXX		XXX	1,000
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	6,837,995		2,991		6,840,985
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	1,541,046		467,000		2,008,046
10. Matured endowments					
11. Annuity benefits			342,429		342,429
12. Surrender values and withdrawals for life contracts	1,232,916				1,232,916
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health	14,876		592		15,468
15. Totals	2,788,839		810,020		3,598,859
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.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	2	260,000			2	56,358			4	316,358
17. Incurred during current year	131	1,380,043			11	467,000			142	1,847,043
Settled during current year:										
18.1 By payment in full	120	1,541,046			11	467,000			131	2,008,046
18.2 By payment on compromised claims										
18.3 Totals paid	120	1,541,046			11	467,000			131	2,008,046
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	120	1,541,046			11	467,000			131	2,008,046
19. Unpaid Dec. 31, current year (16+17-18.6)	13	98,997			2	56,358			15	155,355
POLICY EXHIBIT										
20. In force December 31, prior year	31,680	535,239,271	(a)		No. of Policies 4	720,172			31,684	535,959,443
21. Issued during year	5,496	74,487,185							5,496	74,487,185
22. Other changes to in force (Net)	(5,796)	(111,757,561)				(73,753)			(5,796)	(111,831,314)
23. In force December 31 of current year	31,380	497,968,895	(a)		4	646,419			31,384	498,615,313

(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	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	9,848	10,020		312,867	126,246
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	6,063,700	6,129,370			
25.2 Guaranteed renewable (b)	1,538,297	1,556,441		536,681	587,253
25.3 Non-renewable for stated reasons only (b)	10,189	11,247		26,146	20,209
25.4 Other accident only	39	46			
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	7,612,225	7,697,104		562,827	607,462
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	7,622,073	7,707,124		875,694	733,708

(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 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF California

DURING THE YEAR 2017

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68195

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	18,454,357		145,633		18,599,990
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	18,454,357		145,633		18,599,990
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	1,507				1,507
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)	1,507				1,507
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)	1,507				1,507
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	4,496,344		1,332,138		5,828,482
10. Matured endowments	10,610				10,610
11. Annuity benefits	2,690		10,132,549		10,135,240
12. Surrender values and withdrawals for life contracts	4,711,807		9,967		4,721,773
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	2,186		16,000		18,186
14. All other benefits, except accident and health	22,564		1,385		23,949
15. Totals	9,246,201		11,492,039		20,738,240
DETAILS OF WRITE-INS					
1301. Disability Benefits					
1302. Supplementary Contracts	2,186		16,000		18,186
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	2,186		16,000		18,186

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.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	32	426,885			2	53,521			34	480,406
17. Incurred during current year	187	4,792,697			59	1,325,580			246	6,118,277
Settled during current year:										
18.1 By payment in full	192	4,506,954			60	1,332,138			252	5,839,092
18.2 By payment on compromised claims										
18.3 Totals paid	192	4,506,954			60	1,332,138			252	5,839,092
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	192	4,506,954			60	1,332,138			252	5,839,092
19. Unpaid Dec. 31, current year (16+17-18.6)	27	712,628			1	46,963			28	759,591
POLICY EXHIBIT										
20. In force December 31, prior year	60,443	1,469,400,218	(a)	0	15	25,082,498			60,458	1,494,482,716
21. Issued during year	12,391	269,802,769							12,391	269,802,769
22. Other changes to in force (Net)	(11,941)	(300,287,788)			1	723,660			(11,940)	(299,564,128)
23. In force December 31 of current year	60,893	1,438,915,199	(a)	0	16	25,806,158			60,909	1,464,721,357

(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	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	168,851	168,624		4,464,250	2,564,412
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)	579	630		3,010	2,155
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	68,061,004	71,296,305		97,536,889	88,078,555
25.2 Guaranteed renewable (b)	14,494,388	14,752,465		5,341,932	5,020,236
25.3 Non-renewable for stated reasons only (b)	251,261	277,388		25,933	20,011
25.4 Other accident only	238,402	280,727		53,264	39,815
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	83,045,055	86,606,885		102,958,018	93,158,617
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	83,214,485	86,776,139		107,425,278	95,725,184

(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 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Colorado

DURING THE YEAR 2017

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68195

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	2,176,623		10,287		2,186,909
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	2,176,623		10,287		2,186,909
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	411				411
6.2 Applied to pay renewal premiums	593				593
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)	1,005				1,005
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)	1,005				1,005
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	878,413		1,187		879,600
10. Matured endowments					
11. Annuity benefits			511,858		511,858
12. Surrender values and withdrawals for life contracts	425,459				425,459
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	364				364
14. All other benefits, except accident and health	8,103		377		8,480
15. Totals	1,312,339		513,422		1,825,761
DETAILS OF WRITE-INS					
1301. Disability Benefits					
1302. Supplementary Contracts	364				364
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	364				364

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.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	4	161,062				0			4	161,062
17. Incurred during current year	36	767,255			1	1,187			37	768,442
Settled during current year:										
18.1 By payment in full	37	878,413			1	1,187			38	879,600
18.2 By payment on compromised claims										
18.3 Totals paid	37	878,413			1	1,187			38	879,600
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	37	878,413			1	1,187			38	879,600
19. Unpaid Dec. 31, current year (16+17-18.6)	3	49,904				0			3	49,904
POLICY EXHIBIT										
20. In force December 31, prior year	8,570	163,225,043	(a)		0	2,760,636			8,570	165,985,680
21. Issued during year	1,544	26,595,437							1,544	26,595,437
22. Other changes to in force (Net)	(1,566)	(31,668,593)				(639,842)			(1,566)	(32,308,435)
23. In force December 31 of current year	8,548	158,151,887	(a)		0	2,120,794			8,548	160,272,682

(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	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	24,791	24,804		484,493	126,248
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	6,893,944	7,225,578		11,298,365	10,202,742
25.2 Guaranteed renewable (b)	2,382,749	2,436,721		1,056,629	1,013,130
25.3 Non-renewable for stated reasons only (b)	2,883	3,182		166	128
25.4 Other accident only	170,897	201,237		90,153	67,390
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	9,450,472	9,866,718		12,445,313	11,283,390
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	9,475,264	9,891,522		12,929,805	11,409,638

(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 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Connecticut

DURING THE YEAR 2017

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68195

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	2,651,096		7,289		2,658,385
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	2,651,096		7,289		2,658,385
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	5,931,151		2,557		5,933,708
10. Matured endowments	2,000				2,000
11. Annuity benefits			1,275,094		1,275,094
12. Surrender values and withdrawals for life contracts	723,734				723,734
13. Aggregate write-ins for miscellaneous direct claims and benefits paid			10,500		10,500
14. All other benefits, except accident and health	425				425
15. Totals	6,657,310		1,288,151		7,945,462
DETAILS OF WRITE-INS					
1301. Disability Benefits					
1302. Supplementary Contracts			10,500		10,500
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)			10,500		10,500

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.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	9	227,826			0	0			9	227,826
17. Incurred during current year	50	496,109			2	2,557			52	498,666
Settled during current year:										
18.1 By payment in full	55	582,808			2	2,557			57	585,365
18.2 By payment on compromised claims										
18.3 Totals paid	55	582,808			2	2,557			57	585,365
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	55	582,808			2	2,557			57	585,365
19. Unpaid Dec. 31, current year (16+17-18.6)	4	141,127			0	0			4	141,127
POLICY EXHIBIT										
20. In force December 31, prior year	9,333	225,116,420	(a)		5	1,090,364			9,338	226,206,784
21. Issued during year	1,244	22,634,123							1,244	22,634,123
22. Other changes to in force (Net)	(1,097)	(23,611,705)				(39,717)			(1,097)	(23,651,421)
23. In force December 31 of current year	9,480	224,138,838	(a)		5	1,050,647			9,485	225,189,485

(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	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	14,892	14,860		299,249	76,283
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	7,413,538	7,682,261		6,442,823	5,818,051
25.2 Guaranteed renewable (b)	2,613,597	2,688,800		973,253	1,056,984
25.3 Non-renewable for stated reasons only (b)	12,801	14,130		12,322	9,523
25.4 Other accident only	15,201	17,900			
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	10,055,138	10,403,092		7,428,397	6,884,558
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	10,070,029	10,417,952		7,727,646	6,960,841

(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 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Delaware

DURING THE YEAR 2017

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68195

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	616,998		22,063		639,061
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	616,998		22,063		639,061
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	213,889		2,397		216,285
10. Matured endowments	2,000				2,000
11. Annuity benefits			616,343		616,343
12. Surrender values and withdrawals for life contracts	131,953				131,953
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health	1,547				1,547
15. Totals	349,388		618,740		968,128
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.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	(1)	417				0			(1)	417
17. Incurred during current year	6	195,728			1	2,397			7	198,124
Settled during current year:										
18.1 By payment in full	9	215,889			1	2,397			10	218,285
18.2 By payment on compromised claims										
18.3 Totals paid	9	215,889			1	2,397			10	218,285
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	9	215,889			1	2,397			10	218,285
19. Unpaid Dec. 31, current year (16+17-18.6)	(4)	(19,744)				0			(4)	(19,744)
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	2,057	39,897,397	(a)		1	365,184			2,058	40,262,580
21. Issued during year	445	8,414,254							445	8,414,254
22. Other changes to in force (Net)	(403)	(9,235,103)				(84,000)			(403)	(9,319,103)
23. In force December 31 of current year	2,099	39,076,547	(a)		1	281,184			2,100	39,357,731

(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	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	8,429	8,333		69,251	17,723
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)	1,422,874	1,481,640		1,362,946	1,230,779
25.2 Guaranteed renewable (b)	640,431	659,780		299,620	272,209
25.3 Non-renewable for stated reasons only (b)	1,550	1,711			
25.4 Other accident only	15	18		117,126	87,552
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	2,064,871	2,143,148		1,779,693	1,590,540
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	2,073,300	2,151,482		1,848,944	1,608,263

(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 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF District of Columbia

DURING THE YEAR 2017

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68195

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	660,872		2,427		663,299
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	660,872		2,427		663,299
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	551,691				551,691
10. Matured endowments					
11. Annuity benefits			76,493		76,493
12. Surrender values and withdrawals for life contracts	154,462				154,462
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health	85				85
15. Totals	706,238		76,493		782,731
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.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	6	81,202							6	81,202
17. Incurred during current year	30	510,125							30	510,125
Settled during current year:										
18.1 By payment in full	30	559,229							30	559,229
18.2 By payment on compromised claims										
18.3 Totals paid	30	559,229							30	559,229
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	30	559,229							30	559,229
19. Unpaid Dec. 31, current year (16+17-18.6)	6	32,098							6	32,098
POLICY EXHIBIT										
20. In force December 31, prior year	2,357	57,462,166	(a)		2	217,763			2,359	57,679,929
21. Issued during year	167	3,864,127							167	3,864,127
22. Other changes to in force (Net)	(319)	(8,115,044)				(37,000)			(319)	(8,152,044)
23. In force December 31 of current year	2,205	53,211,248	(a)		2	180,763			2,207	53,392,011

(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	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	6,312	6,303		134,900	38,905
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)	3,672,266	3,768,435		1,167,848	1,054,599
25.2 Guaranteed renewable (b)	1,105,703	1,136,234		987,210	1,074,810
25.3 Non-renewable for stated reasons only (b)	1,483	1,637			
25.4 Other accident only	24	28			
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	4,779,477	4,906,335		2,155,058	2,129,409
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	4,785,789	4,912,638		2,289,958	2,168,314

(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 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Florida

DURING THE YEAR 2017

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68195

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	17,114,794		67,138		17,181,932
2. Annuity considerations	15,555				15,555
3. Deposit-type contract funds	20,142	XXX		XXX	20,142
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	17,150,491		67,138		17,217,629
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	625				625
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	428				428
6.5 Totals (Sum of Lines 6.1 to 6.4)	1,052				1,052
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)	1,052				1,052
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	6,519,876		757,019		7,276,895
10. Matured endowments	8,613				8,613
11. Annuity benefits	5,031		4,567,685		4,572,716
12. Surrender values and withdrawals for life contracts	5,573,708		377		5,574,085
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	26,699		32,760		59,459
14. All other benefits, except accident and health	150,633		360		150,993
15. Totals	12,284,559		5,358,201		17,642,760
DETAILS OF WRITE-INS					
1301. Disability Benefits	20,146				20,146
1302. Supplementary Contracts	6,552		32,760		39,312
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	26,699		32,760		59,459

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.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	27	602,227			1	9,393			28	611,620
17. Incurred during current year	411	6,725,065			19	757,019			430	7,482,083
Settled during current year:										
18.1 By payment in full	415	6,520,951			19	757,019			434	7,277,970
18.2 By payment on compromised claims										
18.3 Totals paid	415	6,520,951			19	757,019			434	7,277,970
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	415	6,520,951			19	757,019			434	7,277,970
19. Unpaid Dec. 31, current year (16+17-18.6)	23	806,341			1	9,393			24	815,734
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	68,346	1,553,126,915	(a)	0	8	12,552,648			68,354	1,565,679,563
21. Issued during year	6,583	124,290,409							6,583	124,290,409
22. Other changes to in force (Net)	(9,106)	(233,548,479)			(1)	(2,637,306)			(9,107)	(236,185,785)
23. In force December 31 of current year	65,823	1,443,868,845	(a)	0	7	9,915,342			65,830	1,453,784,186

(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	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	109,210	109,705		1,960,817	847,022
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	28,869,079	31,190,052		108,851,239	98,295,731
25.2 Guaranteed renewable (b)	16,286,113	16,554,219		8,283,341	9,292,015
25.3 Non-renewable for stated reasons only (b)	3,438	3,795		6,328	4,891
25.4 Other accident only	2,620,593	3,085,845		173	129
25.5 All other (b)	(9)	(9)			
25.6 Totals (sum of Lines 25.1 to 25.5)	47,779,215	50,833,903		117,141,082	107,592,767
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	47,888,425	50,943,608		119,101,899	108,439,789

(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 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Georgia

DURING THE YEAR 2017

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68195

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	26,947,629		78,299		27,025,927
2. Annuity considerations	4,820				4,820
3. Deposit-type contract funds	34,000	XXX		XXX	34,000
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	26,986,449		78,299		27,064,748
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	220				220
6.2 Applied to pay renewal premiums	109				109
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	2,822				2,822
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)	3,151				3,151
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)	3,151				3,151
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	16,595,800		815,243		17,411,043
10. Matured endowments	2,000				2,000
11. Annuity benefits			1,492,010		1,492,010
12. Surrender values and withdrawals for life contracts	5,802,722		4,804		5,807,526
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	402		24,494		24,896
14. All other benefits, except accident and health	48,105		1,416		49,521
15. Totals	22,449,029		2,337,967		24,786,996
DETAILS OF WRITE-INS					
1301. Disability Benefits					
1302. Supplementary Contracts	402		24,494		24,896
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	402		24,494		24,896

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.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	33	928,112			4	119,080			37	1,047,191
17. Incurred during current year Settled during current year:	493	6,979,898			52	722,252			545	7,702,150
18.1 By payment in full	500	7,374,956			54	815,243			554	8,190,199
18.2 By payment on compromised claims										
18.3 Totals paid	500	7,374,956			54	815,243			554	8,190,199
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	500	7,374,956			54	815,243			554	8,190,199
19. Unpaid Dec. 31, current year (16+17-18.6)	26	533,054			2	26,089			28	559,143
POLICY EXHIBIT										
20. In force December 31, prior year	101,346	2,468,761,505	(a)	0	No. of Policies 38	7,994,266			101,384	2,476,755,771
21. Issued during year	14,787	251,981,464							14,787	251,981,464
22. Other changes to in force (Net)	(12,503)	(240,544,026)			(5)	(555,329)			(12,508)	(241,099,355)
23. In force December 31 of current year	103,630	2,480,198,943	(a)	0	33	7,438,937			103,663	2,487,637,880

(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	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	36,860	36,832		1,563,055	665,224
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)	19,534,577	20,371,968		26,957,979	24,343,813
25.2 Guaranteed renewable (b)	8,619,341	8,760,321		3,318,069	3,251,798
25.3 Non-renewable for stated reasons only (b)	12,687	14,004		69,515	53,729
25.4 Other accident only	7,934	9,343			
25.5 All other (b)	130	135			
25.6 Totals (sum of Lines 25.1 to 25.5)	28,174,669	29,155,770		30,345,563	27,649,340
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	28,211,530	29,192,603		31,908,618	28,314,564

(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 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Hawaii

DURING THE YEAR 2017

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68195

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	1,458,513		1,316		1,459,829
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	1,458,513		1,316		1,459,829
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	133,088		26,000		159,088
10. Matured endowments					
11. Annuity benefits			92,559		92,559
12. Surrender values and withdrawals for life contracts	265,562				265,562
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health	880				880
15. Totals	399,530		118,559		518,090
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.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year		0								0
17. Incurred during current year	2	133,088			2	31,636			4	164,724
Settled during current year:										
18.1 By payment in full	2	133,088			1	26,000			3	159,088
18.2 By payment on compromised claims										
18.3 Totals paid	2	133,088			1	26,000			3	159,088
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	2	133,088			1	26,000			3	159,088
19. Unpaid Dec. 31, current year (16+17-18.6)		0			1	5,636			1	5,636
POLICY EXHIBIT										
20. In force December 31, prior year	4,162	105,409,289	(a)		0	611,581			4,162	106,020,870
21. Issued during year	77	1,477,834							77	1,477,834
22. Other changes to in force (Net)	(332)	(9,674,699)				(70,000)			(332)	(9,744,699)
23. In force December 31 of current year	3,907	97,212,424	(a)		0	541,581			3,907	97,754,005

(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	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	21,275	21,275		152,380	246,254
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)	1,741,240	1,805,001		1,327,512	1,198,781
25.2 Guaranteed renewable (b)	2,697,807	2,837,536		495,186	856,474
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)	4,439,047	4,642,537		1,822,698	2,055,255
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	4,460,321	4,663,812		1,975,079	2,301,508

(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 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Idaho

DURING THE YEAR 2017

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68195

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	645,192		1,412		646,604
2. Annuity considerations	528				528
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	645,719		1,412		647,131
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	876				876
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)	876				876
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)	876				876
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	120,526		41,330		161,856
10. Matured endowments					
11. Annuity benefits			80,849		80,849
12. Surrender values and withdrawals for life contracts	108,852				108,852
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health	3,067				3,067
15. Totals	232,445		122,179		354,624
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.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	.1	2,500			.1	5,006			.2	7,506
17. Incurred during current year Settled during current year:	12	118,026			.3	36,324			.15	154,349
18.1 By payment in full	.13	120,526			.4	41,330			.17	161,856
18.2 By payment on compromised claims										
18.3 Totals paid	.13	120,526			.4	41,330			.17	161,856
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	.13	120,526			.4	41,330			.17	161,856
19. Unpaid Dec. 31, current year (16+17-18.6)		0								0
POLICY EXHIBIT										
20. In force December 31, prior year	2,272	37,648,342	(a)		2	197,460			2,274	37,845,801
21. Issued during year	.880	15,331,839							.880	15,331,839
22. Other changes to in force (Net)	(594)	(11,768,527)			(1)				(595)	(11,768,527)
23. In force December 31 of current year	2,558	41,211,654	(a)		1	197,460			2,559	41,409,113

(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	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	9,129	9,143		37,499	9,612
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)	875,400	916,344		1,134,542	1,024,523
25.2 Guaranteed renewable (b)	643,633	654,428		392,437	380,401
25.3 Non-renewable for stated reasons only (b)	762	841		471	364
25.4 Other accident only	18	21			
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	1,519,813	1,571,634		1,527,449	1,405,287
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	1,528,942	1,580,777		1,564,948	1,414,900

(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 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Illinois

DURING THE YEAR 2017

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68195

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	9,179,772		79,248		9,259,020
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	9,179,772		79,248		9,259,020
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	3,534,708		296,055		3,830,763
10. Matured endowments	10,000				10,000
11. Annuity benefits			2,518,255		2,518,255
12. Surrender values and withdrawals for life contracts	2,310,948		(78)		2,310,870
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	2,645		37,507		40,152
14. All other benefits, except accident and health	16,699		729		17,428
15. Totals	5,875,000		2,852,468		8,727,468
DETAILS OF WRITE-INS					
1301. Disability Benefits					
1302. Supplementary Contracts	2,645		37,507		40,152
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	2,645		37,507		40,152

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.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	10	107,455				0			10	107,455
17. Incurred during current year	164	4,309,995			22	305,918			186	4,615,913
Settled during current year:										
18.1 By payment in full	165	3,544,708			20	296,055			185	3,840,763
18.2 By payment on compromised claims										
18.3 Totals paid	165	3,544,708			20	296,055			185	3,840,763
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	165	3,544,708			20	296,055			185	3,840,763
19. Unpaid Dec. 31, current year (16+17-18.6)	9	872,742			2	9,863			11	882,605
POLICY EXHIBIT										
20. In force December 31, prior year	34,260	679,326,974	(a)		15	8,952,574			34,275	688,279,548
21. Issued during year	4,099	70,006,579							4,099	70,006,579
22. Other changes to in force (Net)	(5,069)	(118,114,481)			(1)	(1,294,262)			(5,070)	(119,408,743)
23. In force December 31 of current year	33,290	631,219,072	(a)		14	7,658,311			33,304	638,877,384

(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	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	81,930	42,342		1,717,771	871,113
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)	6,932	7,547		609	436
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	21,371,819	22,008,350		11,344,811	10,244,684
25.2 Guaranteed renewable (b)	8,830,830	9,038,187		3,371,629	3,390,814
25.3 Non-renewable for stated reasons only (b)	11,371	12,551		5,685	4,394
25.4 Other accident only	6,250	7,360		74,920	56,003
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	30,220,270	31,066,448		14,797,045	13,695,895
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	30,309,131	31,116,337		16,515,425	14,567,444

(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 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Indiana

DURING THE YEAR 2017

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68195

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	6,514,698		60,130		6,574,828
2. Annuity considerations					
3. Deposit-type contract funds	450	XXX		XXX	450
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	6,515,148		60,130		6,575,278
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	463				463
6.2 Applied to pay renewal premiums	2,965				2,965
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	659				659
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)	4,087				4,087
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)	4,087				4,087
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	2,088,099		83,438		2,171,537
10. Matured endowments					
11. Annuity benefits	337		860,869		861,206
12. Surrender values and withdrawals for life contracts	2,226,170		239		2,226,408
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	485		14,266		14,751
14. All other benefits, except accident and health	15,137		3,106		18,243
15. Totals	4,330,228		961,917		5,292,145
DETAILS OF WRITE-INS					
1301. Disability Benefits					
1302. Supplementary Contracts	485		14,266		14,751
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	485		14,266		14,751

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.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	6	84,927				0			6	84,927
17. Incurred during current year	159	2,230,958			6	83,438			165	2,314,396
Settled during current year:										
18.1 By payment in full	161	2,088,099			6	83,438			167	2,171,537
18.2 By payment on compromised claims										
18.3 Totals paid	161	2,088,099			6	83,438			167	2,171,537
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	161	2,088,099			6	83,438			167	2,171,537
19. Unpaid Dec. 31, current year (16+17-18.6)	4	227,786				0			4	227,787
POLICY EXHIBIT										
20. In force December 31, prior year	26,648	524,630,174	(a)	0	No. of Policies 1	4,522,337			26,649	529,152,511
21. Issued during year	4,860	91,208,520							4,860	91,208,520
22. Other changes to in force (Net)	(5,304)	(117,778,224)				(490,325)			(5,304)	(118,268,549)
23. In force December 31 of current year	26,204	498,060,470	(a)	0	1	4,032,012			26,205	502,092,482

(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	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	25,181	25,466		399,940	146,906
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)				1,892	1,354
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	5,458,217	5,700,949		5,470,825	4,940,309
25.2 Guaranteed renewable (b)	3,522,996	3,562,281		1,243,939	1,242,633
25.3 Non-renewable for stated reasons only (b)	3,934	4,343		9,313	7,198
25.4 Other accident only				178,967	133,779
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	8,985,147	9,267,572		6,903,044	6,323,919
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	9,010,328	9,293,038		7,304,875	6,472,180

(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 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Iowa
 NAIC Group Code 0565

DURING THE YEAR 2017
 NAIC Company Code 68195

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	2,263,690		6,078		2,269,769
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	2,263,690		6,078		2,269,769
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	815,388		10,000		825,388
10. Matured endowments	414				414
11. Annuity benefits			727,349		727,349
12. Surrender values and withdrawals for life contracts	366,914				366,914
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	1,784				1,784
14. All other benefits, except accident and health	1,673		32		1,705
15. Totals	1,186,173		737,382		1,923,555
DETAILS OF WRITE-INS					
1301. Disability Benefits					
1302. Supplementary Contracts	1,784				1,784
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	1,784				1,784

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.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	2	8,900				1			2	8,901
17. Incurred during current year	32	806,902			1	10,000			33	816,902
Settled during current year:										
18.1 By payment in full	34	815,802			1	10,000			35	825,802
18.2 By payment on compromised claims										
18.3 Totals paid	34	815,802			1	10,000			35	825,802
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	34	815,802			1	10,000			35	825,802
19. Unpaid Dec. 31, current year (16+17-18.6)							1			1
POLICY EXHIBIT										
20. In force December 31, prior year	8,787	171,389,484	(a)		1	1,231,049			8,788	172,620,533
21. Issued during year	2,694	37,500,172							2,694	37,500,172
22. Other changes to in force (Net)	(1,816)	(32,090,473)				(1,071)			(1,816)	(32,091,544)
23. In force December 31 of current year	9,665	176,799,183	(a)		1	1,229,978			9,666	178,029,161

(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	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	10,031	10,031		60,725	19,284
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	2,385,958	2,477,582		1,681,728	1,518,648
25.2 Guaranteed renewable (b)	1,148,100	1,169,994		291,956	289,012
25.3 Non-renewable for stated reasons only (b)	314	347		398	307
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	3,534,373	3,647,924		1,974,082	1,807,967
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	3,544,404	3,657,955		2,034,808	1,827,251

(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 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Kansas

DURING THE YEAR 2017

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68195

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, and Direct Claims and Benefits Paid.

Table with 10 columns: 1 No., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No., 8 Amount, 9 No., 10 Amount. Rows include Unpaid December 31, prior year, Incurred during current year, 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 Dividends Paid Or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b), Medicare Title XVIII exempt from state taxes or fees, and various non-cancelable/renewable 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 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Kentucky

DURING THE YEAR 2017

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68195

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	4,385,215		15,576		4,400,791
2. Annuity considerations	382				382
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	4,385,597		15,576		4,401,173
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	219				219
6.2 Applied to pay renewal premiums	91				91
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)	310				310
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)	310				310
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	2,321,805		199,671		2,521,476
10. Matured endowments	27,531				27,531
11. Annuity benefits	117		1,397,773		1,397,890
12. Surrender values and withdrawals for life contracts	1,720,005				1,720,005
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	1,153		51,223		52,376
14. All other benefits, except accident and health	71,113		2,321		73,434
15. Totals	4,141,722		1,650,987		5,792,709
DETAILS OF WRITE-INS					
1301. Disability Benefits					
1302. Supplementary Contracts	1,153		51,223		52,376
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	1,153		51,223		52,376

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.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	10	163,934			0	0			10	163,934
17. Incurred during current year	146	2,351,885			7	200,179			153	2,552,063
Settled during current year:										
18.1 By payment in full	144	2,349,336			6	199,671			150	2,549,006
18.2 By payment on compromised claims										
18.3 Totals paid	144	2,349,336			6	199,671			150	2,549,006
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	144	2,349,336			6	199,671			150	2,549,006
19. Unpaid Dec. 31, current year (16+17-18.6)	12	166,483			1	508			13	166,991
POLICY EXHIBIT										
20. In force December 31, prior year	19,119	354,661,629	(a)	0	6	2,049,073			19,125	356,710,703
21. Issued during year	2,617	42,299,325							2,617	42,299,325
22. Other changes to in force (Net)	(2,549)	(50,408,441)				(359,129)			(2,549)	(50,767,570)
23. In force December 31 of current year	19,187	346,552,514	(a)	0	6	1,689,943			19,193	348,242,458

(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	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	22,444	22,794		833,026	215,705
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)	318	346			
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	4,095,292	4,502,266		8,679,659	7,837,976
25.2 Guaranteed renewable (b)	3,043,582	3,059,997		1,947,068	1,756,557
25.3 Non-renewable for stated reasons only (b)	24,628	27,185		60,731	46,939
25.4 Other accident only	225	265			
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	7,163,728	7,589,714		10,687,457	9,641,473
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	7,186,489	7,612,853		11,520,484	9,857,178

(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 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Louisiana

DURING THE YEAR 2017

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68195

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	7,632,623		16,472		7,649,095
2. Annuity considerations	1,181				1,181
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	7,633,804		16,472		7,650,276
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	3,116,556		153,563		3,270,119
10. Matured endowments	3,000				3,000
11. Annuity benefits			864,323		864,323
12. Surrender values and withdrawals for life contracts	1,438,249				1,438,249
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	1,507				1,507
14. All other benefits, except accident and health	3,874		574		4,448
15. Totals	4,563,185		1,018,461		5,581,646
DETAILS OF WRITE-INS					
1301. Disability Benefits					
1302. Supplementary Contracts	1,507				1,507
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	1,507				1,507

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.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	9	631,402			2	79,089			11	710,491
17. Incurred during current year	122	2,773,423			12	153,563			134	2,926,986
Settled during current year:										
18.1 By payment in full	126	3,119,556			12	153,563			138	3,273,119
18.2 By payment on compromised claims										
18.3 Totals paid	126	3,119,556			12	153,563			138	3,273,119
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	126	3,119,556			12	153,563			138	3,273,119
19. Unpaid Dec. 31, current year (16+17-18.6)	5	285,269			2	79,089			7	364,359
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	28,982	704,318,245	(a)		6	2,557,836			28,988	706,876,081
21. Issued during year	5,020	96,707,044							5,020	96,707,044
22. Other changes to in force (Net)	(4,344)	(108,826,065)			1	(470,707)			(4,343)	(109,296,772)
23. In force December 31 of current year	29,658	692,199,224	(a)		7	2,087,129			29,665	694,286,353

(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	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	14,078	15,994		551,475	197,544
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	5,385,686	5,785,574		15,879,487	14,339,623
25.2 Guaranteed renewable (b)	4,839,359	4,919,731		2,320,800	2,320,137
25.3 Non-renewable for stated reasons only (b)	11,248	12,416		15,238	11,778
25.4 Other accident only	35	41			
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	10,236,328	10,717,762		18,215,525	16,671,538
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	10,250,406	10,733,756		18,767,001	16,869,082

(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 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Maine

DURING THE YEAR 2017

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68195

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	989,711				989,711
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	989,711				989,711
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	153,151		2,343		155,494
10. Matured endowments	144				144
11. Annuity benefits	673		191,854		192,527
12. Surrender values and withdrawals for life contracts	182,265				182,265
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health	572				572
15. Totals	336,805		194,197		531,002
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.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	.1	1,000			.2	15,029			.3	16,029
17. Incurred during current year Settled during current year:	12	345,162				(12,686)			12	332,476
18.1 By payment in full	11	153,295			.2	2,343			13	155,638
18.2 By payment on compromised claims										
18.3 Totals paid	11	153,295			.2	2,343			13	155,638
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	11	153,295			.2	2,343			13	155,638
19. Unpaid Dec. 31, current year (16+17-18.6)	2	192,867				0			2	192,867
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	3,215	66,534,373	(a)		.0	15,158			3,215	66,549,531
21. Issued during year	1,077	16,837,436							1,077	16,837,436
22. Other changes to in force (Net)	(442)	(8,551,396)							(442)	(8,551,396)
23. In force December 31 of current year	3,850	74,820,413	(a)		0	15,158			3,850	74,835,571

(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	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	6,057	6,057		13,088	19,785
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)	1,762,147	1,802,905		716,044	646,608
25.2 Guaranteed renewable (b)	1,528,755	1,576,107		444,188	443,695
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only				31,244	23,355
25.5 All other (b)	29	30			
25.6 Totals (sum of Lines 25.1 to 25.5)	3,290,931	3,379,042		1,191,477	1,113,658
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	3,296,988	3,385,099		1,204,565	1,133,444

(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 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Maryland
NAIC Group Code 0565

DURING THE YEAR 2017
NAIC Company Code 68195

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, and Direct Claims and Benefits Paid.

Table with 10 columns: 1 No., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No., 8 Amount, 9 No., 10 Amount. Rows include Unpaid December 31, prior year, Incurred during current year, 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 Dividends Paid Or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and Individual 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 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Massachusetts

DURING THE YEAR 2017

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68195

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	3,718,221		14,904		3,733,125
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	3,718,221		14,904		3,733,125
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	651				651
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)	651				651
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)	651				651
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	1,557,870		84,000		1,641,870
10. Matured endowments					
11. Annuity benefits			3,189,720		3,189,720
12. Surrender values and withdrawals for life contracts	1,742,462				1,742,462
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health	4,109				4,109
15. Totals	3,304,441		3,273,720		6,578,161
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.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	5	54,310			0	0			5	54,310
17. Incurred during current year	46	1,643,289			10	84,000			56	1,727,289
Settled during current year:										
18.1 By payment in full	46	1,557,870			10	84,000			56	1,641,870
18.2 By payment on compromised claims										
18.3 Totals paid	46	1,557,870			10	84,000			56	1,641,870
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	46	1,557,870			10	84,000			56	1,641,870
19. Unpaid Dec. 31, current year (16+17-18.6)	5	139,729			0	0			5	139,729
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	11,630	354,938,626	(a)		8	2,669,622			11,638	357,608,247
21. Issued during year	1,793	34,987,018							1,793	34,987,018
22. Other changes to in force (Net)	(1,740)	(56,269,284)			(1)	(5,958)			(1,741)	(56,275,242)
23. In force December 31 of current year	11,683	333,656,360	(a)		7	2,663,663			11,690	336,320,023

(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	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	481,500	474,625		1,099,743	690,528
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	17,787,857	18,395,173		13,158,518	11,882,512
25.2 Guaranteed renewable (b)	7,214,925	7,406,528		3,462,874	3,711,024
25.3 Non-renewable for stated reasons only (b)	7,824	8,636		11,260	8,703
25.4 Other accident only	8,123	9,565		47,263	35,329
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	25,018,729	25,819,902		16,679,914	15,637,567
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	25,500,229	26,294,527		17,779,657	16,328,095

(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 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Michigan

DURING THE YEAR 2017

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68195

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	9,193,339		30,311		9,223,651
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	9,193,339		30,311		9,223,651
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	2,679,475		149,847		2,829,323
10. Matured endowments	2,501				2,501
11. Annuity benefits	73		1,708,633		1,708,706
12. Surrender values and withdrawals for life contracts	1,571,059		6,296		1,577,355
13. Aggregate write-ins for miscellaneous direct claims and benefits paid			7,575		7,575
14. All other benefits, except accident and health	9,514		143		9,657
15. Totals	4,262,623		1,872,494		6,135,117
DETAILS OF WRITE-INS					
1301. Disability Benefits					
1302. Supplementary Contracts			7,575		7,575
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)			7,575		7,575

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.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	3	15,770				0			3	15,770
17. Incurred during current year	98	2,246,227			12	164,876			110	2,411,103
Settled during current year:										
18.1 By payment in full	92	1,974,014			10	149,847			102	2,123,861
18.2 By payment on compromised claims										
18.3 Totals paid	92	1,974,014			10	149,847			102	2,123,861
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	92	1,974,014			10	149,847			102	2,123,861
19. Unpaid Dec. 31, current year (16+17-18.6)	9	287,983			2	15,029			11	303,012
POLICY EXHIBIT										
20. In force December 31, prior year	27,998	714,520,593	(a)	0	No. of Policies 8	5,469,413			28,006	719,990,006
21. Issued during year	4,882	86,933,937							4,882	86,933,937
22. Other changes to in force (Net)	(5,354)	(101,651,829)			(2)	(586,489)			(5,356)	(102,238,319)
23. In force December 31 of current year	27,526	699,802,701	(a)	0	6	4,882,924			27,532	704,685,624

(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	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	77,367	79,682		1,195,367	505,015
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)	315	343			
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	22,439,346	23,563,072		32,821,956	29,639,150
25.2 Guaranteed renewable (b)	6,106,551	6,222,726		2,521,557	2,588,993
25.3 Non-renewable for stated reasons only (b)	2,880	3,179		11,121	8,596
25.4 Other accident only	932,291	1,097,807		593,671	443,772
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	29,481,068	30,886,784		35,948,305	32,680,510
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	29,558,750	30,966,809		37,143,672	33,185,525

(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 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Minnesota

DURING THE YEAR 2017

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68195

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	2,726,874		9,825		2,736,699
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	2,726,874		9,825		2,736,699
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	840				840
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)	840				840
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)	840				840
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	897,129		5,923		903,052
10. Matured endowments	5,000				5,000
11. Annuity benefits			1,992,782		1,992,782
12. Surrender values and withdrawals for life contracts	443,055				443,055
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health	15,235		161		15,397
15. Totals	1,360,420		1,998,867		3,359,287
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.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	.1	25,000				0			.1	25,000
17. Incurred during current year	43	1,082,312			.1	5,923			44	1,088,235
Settled during current year:										
18.1 By payment in full	40	902,129			.1	5,923			41	908,052
18.2 By payment on compromised claims										
18.3 Totals paid	40	902,129			.1	5,923			41	908,052
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	40	902,129			.1	5,923			41	908,052
19. Unpaid Dec. 31, current year (16+17-18.6)	4	205,183				0			4	205,183
POLICY EXHIBIT										
20. In force December 31, prior year	8,098	171,153,224	(a)		.1	2,795,008			8,099	173,948,231
21. Issued during year	4,229	75,759,589							4,229	75,759,589
22. Other changes to in force (Net)	(2,332)	(48,956,847)				(506,164)			(2,332)	(49,463,011)
23. In force December 31 of current year	9,995	197,955,966	(a)		1	2,288,844			9,996	200,244,809

(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	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	9,903	9,903		93,327	52,511
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)	9,077,357	9,443,498		5,720,940	5,166,170
25.2 Guaranteed renewable (b)	4,200,731	4,292,892		1,711,586	1,788,985
25.3 Non-renewable for stated reasons only (b)	950	1,049		680	526
25.4 Other accident only	5,845	6,883			
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	13,284,884	13,744,323		7,433,206	6,955,681
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	13,294,786	13,754,226		7,526,534	7,008,192

(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 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Mississippi

DURING THE YEAR 2017

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68195

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	4,930,169		3,493		4,933,662
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	4,930,169		3,493		4,933,662
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	2,111,264		112,290		2,223,554
10. Matured endowments	39,264				39,264
11. Annuity benefits			408,060		408,060
12. Surrender values and withdrawals for life contracts	1,214,401				1,214,401
13. Aggregate write-ins for miscellaneous direct claims and benefits paid			3,432		3,432
14. All other benefits, except accident and health	9,568				9,568
15. Totals	3,374,496		523,782		3,898,279
DETAILS OF WRITE-INS					
1301. Disability Benefits					
1302. Supplementary Contracts			3,432		3,432
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)			3,432		3,432

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.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	9	186,319			1	2,818			10	189,137
17. Incurred during current year	108	2,001,836			5	112,290			113	2,114,126
Settled during current year:										
18.1 By payment in full	111	2,150,528			5	112,290			116	2,262,818
18.2 By payment on compromised claims										
18.3 Totals paid	111	2,150,528			5	112,290			116	2,262,818
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	111	2,150,528			5	112,290			116	2,262,818
19. Unpaid Dec. 31, current year (16+17-18.6)	6	37,627			1	2,818			7	40,445
POLICY EXHIBIT										
20. In force December 31, prior year	22,285	388,426,648	(a)	0	4	747,115			22,289	389,173,762
21. Issued during year	3,059	50,963,664							3,059	50,963,664
22. Other changes to in force (Net)	(3,465)	(70,721,310)				(125,000)			(3,465)	(70,846,310)
23. In force December 31 of current year	21,879	368,669,001	(a)	0	4	622,115			21,883	369,291,116

(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	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	8,171	10,756		331,884	127,723
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)	3,162,809	3,354,549		6,290,307	5,680,325
25.2 Guaranteed renewable (b)	3,835,447	3,917,438		1,976,728	1,954,105
25.3 Non-renewable for stated reasons only (b)	2,767	3,054		2,424	1,874
25.4 Other accident only	38	45			
25.5 All other (b)	40	42			
25.6 Totals (sum of Lines 25.1 to 25.5)	7,001,101	7,275,127		8,269,460	7,636,303
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	7,009,272	7,285,883		8,601,344	7,764,027

(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 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Missouri

DURING THE YEAR 2017

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68195

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	7,820,902		27,871		7,848,773
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	7,820,902		27,871		7,848,773
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	1,131,924		190,847		1,322,771
10. Matured endowments					
11. Annuity benefits	38		2,493,845		2,493,883
12. Surrender values and withdrawals for life contracts	1,151,229				1,151,229
13. Aggregate write-ins for miscellaneous direct claims and benefits paid			17,900		17,900
14. All other benefits, except accident and health	10,580		161		10,741
15. Totals	2,293,771		2,702,753		4,996,524
DETAILS OF WRITE-INS					
1301. Disability Benefits					
1302. Supplementary Contracts			17,900		17,900
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)			17,900		17,900

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.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	14	1,000,662				0			14	1,000,661
17. Incurred during current year	91	522,716			14	190,847			105	713,563
Settled during current year:										
18.1 By payment in full	97	1,131,924			14	190,847			111	1,322,771
18.2 By payment on compromised claims										
18.3 Totals paid	97	1,131,924			14	190,847			111	1,322,771
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	97	1,131,924			14	190,847			111	1,322,771
19. Unpaid Dec. 31, current year (16+17-18.6)	8	391,453				0			8	391,453
POLICY EXHIBIT										
20. In force December 31, prior year	18,702	906,842,915	(a)		3	4,478,581			18,705	911,321,496
21. Issued during year	3,865	59,642,952							3,865	59,642,952
22. Other changes to in force (Net)	(3,170)	(57,286,231)			(1)	(9,500)			(3,171)	(57,295,731)
23. In force December 31 of current year	19,397	909,199,636	(a)		2	4,469,081			19,399	913,668,717

(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	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	18,919	18,929		489,008	402,258
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)	165	180			
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	5,583,814	5,794,865		4,452,308	4,020,559
25.2 Guaranteed renewable (b)	8,747,595	8,851,059		3,351,729	3,406,767
25.3 Non-renewable for stated reasons only (b)	6,520	7,197		10,173	7,863
25.4 Other accident only	121,844	143,450		82,432	61,758
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	14,459,773	14,796,571		7,896,641	7,496,947
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	14,478,857	14,815,679		8,385,650	7,899,205

(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 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Montana

DURING THE YEAR 2017

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68195

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	384,188		3,344		387,532
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	384,188		3,344		387,532
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	275,147		7,000		282,147
10. Matured endowments	1,000				1,000
11. Annuity benefits			67,719		67,719
12. Surrender values and withdrawals for life contracts	103,857				103,857
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health					
15. Totals	380,004		74,719		454,723
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.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year										
17. Incurred during current year	10	319,450			1	7,000			11	326,450
Settled during current year:										
18.1 By payment in full	8	276,147			1	7,000			9	283,147
18.2 By payment on compromised claims										
18.3 Totals paid	8	276,147			1	7,000			9	283,147
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	8	276,147			1	7,000			9	283,147
19. Unpaid Dec. 31, current year (16+17-18.6)	2	43,303							2	43,303
POLICY EXHIBIT										
20. In force December 31, prior year	1,281	28,493,109	(a)		1	654,728			1,282	29,147,837
21. Issued during year	211	3,345,080							211	3,345,080
22. Other changes to in force (Net)	(370)	(7,020,273)							(370)	(7,020,273)
23. In force December 31 of current year	1,122	24,817,916	(a)		1	654,728			1,123	25,472,644

(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	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	3,126	3,126		192,870	240,939
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	677,020	738,325		1,446,413	1,306,152
25.2 Guaranteed renewable (b)	647,115	649,253		150,057	141,332
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only				161,553	120,762
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	1,324,135	1,387,579		1,758,023	1,568,245
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	1,327,261	1,390,705		1,950,893	1,809,184

(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 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Nebraska

DURING THE YEAR 2017

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68195

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	1,429,935		299		1,430,234
2. Annuity considerations	93				93
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	1,430,028		299		1,430,327
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	554				554
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)	554				554
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)	554				554
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	153,792		145,954		299,746
10. Matured endowments					
11. Annuity benefits			528,531		528,531
12. Surrender values and withdrawals for life contracts	191,922				191,922
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health	798				798
15. Totals	346,511		674,485		1,020,996
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.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year					.0	.0			.0	.0
17. Incurred during current year	19	153,792			.8	206,069			.27	359,861
Settled during current year:										
18.1 By payment in full	19	153,792			.6	145,954			.25	299,746
18.2 By payment on compromised claims										
18.3 Totals paid	19	153,792			.6	145,954			.25	299,746
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	19	153,792			.6	145,954			.25	299,746
19. Unpaid Dec. 31, current year (16+17-18.6)					2	60,115			2	60,115
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	5,772	97,595,810	(a)		.3	98,447			5,775	97,694,257
21. Issued during year	1,483	22,008,916							1,483	22,008,916
22. Other changes to in force (Net)	(1,293)	(21,941,063)			(1)	(31,084)			(1,294)	(21,972,147)
23. In force December 31 of current year	5,962	97,663,663	(a)		2	67,363			5,964	97,731,026

(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	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	5,635	5,647		77,025	21,464
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)	1,779,902	1,843,255		1,239,974	1,119,732
25.2 Guaranteed renewable (b)	1,230,103	1,264,323		429,471	658,723
25.3 Non-renewable for stated reasons only (b)	3,067	3,385		5,617	4,342
25.4 Other accident only				11,158	8,340
25.5 All other (b)	4	4			
25.6 Totals (sum of Lines 25.1 to 25.5)	3,013,077	3,110,968		1,686,221	1,791,137
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	3,018,711	3,116,615		1,763,246	1,812,601

(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 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Nevada

DURING THE YEAR 2017

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68195

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	1,508,787		678		1,509,465
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	1,508,787		678		1,509,465
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	256				256
6.2 Applied to pay renewal premiums	794				794
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)	1,050				1,050
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)	1,050				1,050
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	570,403		8,358		578,761
10. Matured endowments	1,000				1,000
11. Annuity benefits			546,220		546,220
12. Surrender values and withdrawals for life contracts	590,633				590,633
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health	918				918
15. Totals	1,162,954		554,578		1,717,532
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.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year					0					0
17. Incurred during current year	33	571,403			2	8,358			35	579,761
Settled during current year:										
18.1 By payment in full	33	571,403			2	8,358			35	579,761
18.2 By payment on compromised claims										
18.3 Totals paid	33	571,403			2	8,358			35	579,761
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	33	571,403			2	8,358			35	579,761
19. Unpaid Dec. 31, current year (16+17-18.6)					0					0
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	6,438	133,166,612	(a)		2	265,443			6,440	133,432,055
21. Issued during year	472	10,820,453							472	10,820,453
22. Other changes to in force (Net)	(1,270)	(29,651,949)				(10,000)			(1,270)	(29,661,949)
23. In force December 31 of current year	5,640	114,335,116	(a)		2	255,443			5,642	114,590,559

(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	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	11,953	11,940		66,848	24,561
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	1,796,225	1,911,160		2,950,751	2,664,611
25.2 Guaranteed renewable (b)	1,926,758	1,973,338		1,055,645	1,106,454
25.3 Non-renewable for stated reasons only (b)	157	173			
25.4 Other accident only	6,089	7,170			
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	3,729,229	3,891,840		4,006,396	3,771,065
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	3,741,182	3,903,780		4,073,244	3,795,626

(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 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF New Hampshire

DURING THE YEAR 2017

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68195

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	610,505				610,505
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	610,505				610,505
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	125,673		1,750		127,423
10. Matured endowments	1,000				1,000
11. Annuity benefits			413,317		413,317
12. Surrender values and withdrawals for life contracts	183,769				183,769
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health	6,412				6,412
15. Totals	316,854		415,067		731,922
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.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	.1	40,000							.1	40,000
17. Incurred during current year	12	86,673			.1	1,750			13	88,423
Settled during current year:										
18.1 By payment in full	13	126,673			.1	1,750			14	128,423
18.2 By payment on compromised claims										
18.3 Totals paid	13	126,673			.1	1,750			14	128,423
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	13	126,673			.1	1,750			14	128,423
19. Unpaid Dec. 31, current year (16+17-18.6)										
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	1,946	43,908,540	(a)		.1	66,612			1,947	43,975,152
21. Issued during year	349	7,486,550							349	7,486,550
22. Other changes to in force (Net)	(255)	(5,304,803)				562			(255)	(5,304,241)
23. In force December 31 of current year	2,040	46,090,287	(a)		1	67,174			2,041	46,157,461

(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	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	10,641	10,563		78,627	37,887
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)	1,790,800	1,879,550		2,269,223	2,049,173
25.2 Guaranteed renewable (b)	1,139,433	1,166,926		332,576	329,103
25.3 Non-renewable for stated reasons only (b)	1,454	1,605			
25.4 Other accident only	147,514	173,703		166,869	124,735
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	3,079,201	3,221,784		2,768,667	2,503,011
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	3,089,842	3,232,347		2,847,294	2,540,898

(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 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF New Jersey

DURING THE YEAR 2017

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68195

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	5,486,940		30,952		5,517,892
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	5,486,940		30,952		5,517,892
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	1,076				1,076
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)	1,076				1,076
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)	1,076				1,076
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	3,125,354		1,345,457		4,470,812
10. Matured endowments	1,500				1,500
11. Annuity benefits			948,994		948,994
12. Surrender values and withdrawals for life contracts	1,398,574		283		1,398,857
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	729		5,329		6,058
14. All other benefits, except accident and health	13,582		574		14,156
15. Totals	4,539,739		2,300,638		6,840,376
DETAILS OF WRITE-INS					
1301. Disability Benefits					
1302. Supplementary Contracts	729		5,329		6,058
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	729		5,329		6,058

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.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	4	857,417			0				4	857,417
17. Incurred during current year	117	2,793,718			11	1,345,457			128	4,139,175
Settled during current year:										
18.1 By payment in full	106	3,126,854			11	1,345,457			117	4,472,312
18.2 By payment on compromised claims										
18.3 Totals paid	106	3,126,854			11	1,345,457			117	4,472,312
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	106	3,126,854			11	1,345,457			117	4,472,312
19. Unpaid Dec. 31, current year (16+17-18.6)	15	524,281			0				15	524,281
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	19,804	438,144,592	(a)		2	5,021,419			19,806	443,166,011
21. Issued during year	3,392	63,721,037							3,392	63,721,037
22. Other changes to in force (Net)	(2,653)	(67,753,259)			(1)	(364,560)			(2,654)	(68,117,819)
23. In force December 31 of current year	20,543	434,112,370	(a)		1	4,656,859			20,544	438,769,229

(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	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	1,067,947	1,051,706		608,332	464,794
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)	689	750			
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	20,384,795	21,145,753		19,064,499	17,215,779
25.2 Guaranteed renewable (b)	12,597,216	12,916,325		7,578,872	7,331,267
25.3 Non-renewable for stated reasons only (b)	83,903	92,614		134,734	104,137
25.4 Other accident only				26,367	19,710
25.5 All other (b)	46	48			
25.6 Totals (sum of Lines 25.1 to 25.5)	33,065,959	34,154,740		26,804,473	24,670,893
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	34,134,595	35,207,196		27,412,805	25,135,687

(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 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF New Mexico

DURING THE YEAR 2017

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68195

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	1,582,330		4,840		1,587,170
2. Annuity considerations	2,172				2,172
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	1,584,502		4,840		1,589,342
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	337,733		93,868		431,601
10. Matured endowments	4,000				4,000
11. Annuity benefits			166,227		166,227
12. Surrender values and withdrawals for life contracts	414,764				414,764
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health	242				242
15. Totals	756,739		260,095		1,016,834
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.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	4	164,161				0			4	164,162
17. Incurred during current year	31	380,659			6	93,868			37	474,527
Settled during current year:										
18.1 By payment in full	31	341,733			6	93,868			37	435,601
18.2 By payment on compromised claims										
18.3 Totals paid	31	341,733			6	93,868			37	435,601
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	31	341,733			6	93,868			37	435,601
19. Unpaid Dec. 31, current year (16+17-18.6)	4	203,087				0			4	203,088
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	6,618	161,847,122	(a)		2	885,893			6,620	162,733,015
21. Issued during year	535	10,420,945							535	10,420,945
22. Other changes to in force (Net)	(1,325)	(50,420,424)				(153,000)			(1,325)	(50,573,424)
23. In force December 31 of current year	5,828	121,847,643	(a)		2	732,893			5,830	122,580,536

(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	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	9,564	9,566		80,068	79,771
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	1,529,063	1,589,172		1,433,057	1,294,091
25.2 Guaranteed renewable (b)	856,528	870,224		183,444	229,496
25.3 Non-renewable for stated reasons only (b)	1,420	1,567			
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	2,387,011	2,460,963		1,616,500	1,523,587
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	2,396,575	2,470,529		1,696,568	1,603,358

(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 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF New York

DURING THE YEAR 2017

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68195

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	501,051		85,098		586,149
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	501,051		85,098		586,149
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	75,325		147,857		223,182
10. Matured endowments					
11. Annuity benefits	52		1,305,724		1,305,775
12. Surrender values and withdrawals for life contracts	126,106				126,106
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health	15,220		10,424		25,644
15. Totals	216,703		1,464,004		1,680,707
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.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year		0			0	0			0	0
17. Incurred during current year	11	75,325			5	147,857			16	223,182
Settled during current year:										
18.1 By payment in full	11	75,325			5	147,857			16	223,182
18.2 By payment on compromised claims										
18.3 Totals paid	11	75,325			5	147,857			16	223,182
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	11	75,325			5	147,857			16	223,182
19. Unpaid Dec. 31, current year (16+17-18.6)		0			0	0			0	0
POLICY EXHIBIT										
20. In force December 31, prior year	1,182	33,079,204	0	(a) 0	0	10,716,302			1,182	43,795,506
21. Issued during year	258	4,933,949							258	4,933,949
22. Other changes to in force (Net)	(158)	(4,657,627)				(332,607)			(158)	(4,990,234)
23. In force December 31 of current year	1,282	33,355,526	0	(a) 0	0	10,383,695			1,282	43,739,221

(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	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	19,909	19,596		1,211,404	371,870
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)	4,926,201	5,132,741		5,141,935	4,643,312
25.2 Guaranteed renewable (b)	625,518	639,431		114,751	97,707
25.3 Non-renewable for stated reasons only (b)	49	55			
25.4 Other accident only	8,809	10,373			
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	5,560,578	5,782,600		5,256,686	4,741,019
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	5,580,487	5,802,196		6,468,090	5,112,889

(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 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF North Carolina

DURING THE YEAR 2017

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68195

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	24,037,938		98,382		24,136,319
2. Annuity considerations	1,897				1,897
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	24,039,834		98,382		24,138,216
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	220				220
6.2 Applied to pay renewal premiums	1,030				1,030
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	1,465				1,465
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)	2,714				2,714
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)	2,714				2,714
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	37,301,827		470,790		37,772,617
10. Matured endowments	21,335				21,335
11. Annuity benefits	3,763		2,271,921		2,275,684
12. Surrender values and withdrawals for life contracts	6,051,780		2,351		6,054,132
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	23,184		10,775		33,959
14. All other benefits, except accident and health	172,647		5,010		177,657
15. Totals	43,574,537		2,760,848		46,335,384
DETAILS OF WRITE-INS					
1301. Disability Benefits	21,996				21,996
1302. Supplementary Contracts	1,188		10,775		11,963
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	23,184		10,775		33,959

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.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	.62	2,968,561			.1	940			.63	2,969,501
17. Incurred during current year	882	11,402,668			72	470,790			954	11,873,458
Settled during current year:										
18.1 By payment in full	885	12,123,907			72	470,790			957	12,594,698
18.2 By payment on compromised claims										
18.3 Totals paid	885	12,123,907			72	470,790			957	12,594,698
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	885	12,123,907			72	470,790			957	12,594,698
19. Unpaid Dec. 31, current year (16+17-18.6)	59	2,247,321			1	940			60	2,248,262
POLICY EXHIBIT										
20. In force December 31, prior year	102,222	3,214,095,544	(a)	1	38	15,103,592			102,260	3,229,199,137
21. Issued during year	7,362	121,591,176							7,362	121,591,176
22. Other changes to in force (Net)	(10,175)	(177,783,132)			(4)	(913,241)			(10,179)	(178,696,373)
23. In force December 31 of current year	99,409	3,157,903,589	(a)	1	34	14,190,351			99,443	3,172,093,940

(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	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	38,839	38,751		1,989,525	578,696
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	17,723,053	18,378,864		14,553,926	13,142,605
25.2 Guaranteed renewable (b)	8,448,630	8,543,844		3,943,440	4,261,681
25.3 Non-renewable for stated reasons only (b)	32,011	35,334		27,544	21,289
25.4 Other accident only	47	55		26,313	19,669
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	26,203,740	26,958,098		18,551,223	17,445,244
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	26,242,579	26,996,849		20,540,748	18,023,941

(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 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF North Dakota

DURING THE YEAR 2017

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68195

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	511,456				511,456
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	511,456				511,456
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	210,886				210,886
10. Matured endowments	2,000				2,000
11. Annuity benefits			55,612		55,612
12. Surrender values and withdrawals for life contracts	60,874				60,874
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health					
15. Totals	273,760		55,612		329,373
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.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year		0								0
17. Incurred during current year	6	212,886							6	212,886
Settled during current year:										
18.1 By payment in full	6	212,886							6	212,886
18.2 By payment on compromised claims										
18.3 Totals paid	6	212,886							6	212,886
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	6	212,886							6	212,886
19. Unpaid Dec. 31, current year (16+17-18.6)		0								0
POLICY EXHIBIT										
20. In force December 31, prior year	1,658	39,915,776	(a)		1	23,062			1,659	39,938,838
21. Issued during year	760	16,735,703							760	16,735,703
22. Other changes to in force (Net)	(378)	(10,071,540)							(378)	(10,071,540)
23. In force December 31 of current year	2,040	46,579,939	(a)		1	23,062			2,041	46,603,001

(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	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	1,970	1,970		62	55
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)	343,528	362,799		520,809	470,306
25.2 Guaranteed renewable (b)	373,299	380,020		74,931	69,286
25.3 Non-renewable for stated reasons only (b)	437	482		439	339
25.4 Other accident only					
25.5 All other (b)	47	48			
25.6 Totals (sum of Lines 25.1 to 25.5)	717,311	743,349		596,179	539,930
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	719,281	745,320		596,241	539,985

(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 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Ohio

DURING THE YEAR 2017

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68195

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	17,681,298		60,322		17,741,620
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	17,681,298		60,322		17,741,620
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	122				122
6.2 Applied to pay renewal premiums	462				462
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)	583				583
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)	583				583
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	42,121,305		49,944		42,171,248
10. Matured endowments	1,932				1,932
11. Annuity benefits	176		4,568,942		4,569,118
12. Surrender values and withdrawals for life contracts	2,827,280		0		2,827,280
13. Aggregate write-ins for miscellaneous direct claims and benefits paid			15,527		15,527
14. All other benefits, except accident and health	17,449		1,707		19,156
15. Totals	44,968,142		4,636,120		49,604,261
DETAILS OF WRITE-INS					
1301. Disability Benefits					
1302. Supplementary Contracts			15,527		15,527
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)			15,527		15,527

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.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	38	1,309,348			1	1,878			39	1,311,226
17. Incurred during current year	238	4,210,384			12	49,944			250	4,260,327
Settled during current year:										
18.1 By payment in full	251	4,313,395			12	49,944			263	4,363,339
18.2 By payment on compromised claims										
18.3 Totals paid	251	4,313,395			12	49,944			263	4,363,339
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	251	4,313,395			12	49,944			263	4,363,339
19. Unpaid Dec. 31, current year (16+17-18.6)	25	1,206,336			1	1,878			26	1,208,215
POLICY EXHIBIT										
20. In force December 31, prior year	46,160	1,815,960,062	(a)	0	No. of Policies 39	5,987,634			46,199	1,821,947,695
21. Issued during year	10,076	191,720,856							10,076	191,720,856
22. Other changes to in force (Net)	(6,881)	(123,272,589)			(2)	(435,412)			(6,883)	(123,708,001)
23. In force December 31 of current year	49,355	1,884,408,329	(a)	0	37	5,552,222			49,392	1,889,960,551

(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	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	70,329	70,352		654,874	322,868
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)	726	790			
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	14,783,231	15,383,057		16,167,489	14,599,698
25.2 Guaranteed renewable (b)	9,169,986	9,337,199		3,956,590	4,161,280
25.3 Non-renewable for stated reasons only (b)	8,953	9,882		6,258	4,837
25.4 Other accident only	9,695	41,544		148,239	110,809
25.5 All other (b)	95	99			
25.6 Totals (sum of Lines 25.1 to 25.5)	23,971,960	24,771,781		20,278,576	18,876,624
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	24,043,015	24,842,924		20,933,450	19,199,492

(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 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Oklahoma

DURING THE YEAR 2017

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68195

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	2,320,125		10,678		2,330,803
2. Annuity considerations	101				101
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	2,320,226		10,678		2,330,904
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	349,300		55,468		404,767
10. Matured endowments					
11. Annuity benefits			392,260		392,260
12. Surrender values and withdrawals for life contracts	402,527				402,527
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health	9,315				9,315
15. Totals	761,142		447,728		1,208,870
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.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	2	2,950				0			2	2,950
17. Incurred during current year	18	346,350			5	55,468			23	401,817
Settled during current year:										
18.1 By payment in full	20	349,300			5	55,468			25	404,767
18.2 By payment on compromised claims										
18.3 Totals paid	20	349,300			5	55,468			25	404,767
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	20	349,300			5	55,468			25	404,767
19. Unpaid Dec. 31, current year (16+17-18.6)						0				0
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	8,197	174,289,016	(a)		2	767,313			8,199	175,056,329
21. Issued during year	1,423	25,723,641							1,423	25,723,641
22. Other changes to in force (Net)	(1,578)	(38,550,944)				(70,000)			(1,578)	(38,620,944)
23. In force December 31 of current year	8,042	161,461,714	(a)		2	697,313			8,044	162,159,027

(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	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	23,873	23,878		156,208	72,662
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	2,336,655	2,466,089		3,343,734	3,019,486
25.2 Guaranteed renewable (b)	1,195,926	1,222,895		688,832	667,509
25.3 Non-renewable for stated reasons only (b)	1,697	1,874		2,549	1,970
25.4 Other accident only	20	24			
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	3,534,299	3,690,881		4,035,116	3,688,966
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	3,558,171	3,714,759		4,191,324	3,761,628

(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 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Oregon

DURING THE YEAR 2017

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68195

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	1,559,413		11,234		1,570,648
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	1,559,413		11,234		1,570,648
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	305,719		535,680		841,399
10. Matured endowments					
11. Annuity benefits			671,349		671,349
12. Surrender values and withdrawals for life contracts	368,803				368,803
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	779				779
14. All other benefits, except accident and health	8,343				8,343
15. Totals	683,643		1,207,030		1,890,672
DETAILS OF WRITE-INS					
1301. Disability Benefits	779				779
1302. Supplementary Contracts					
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	779				779

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.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year						0				0
17. Incurred during current year	17	646,791			6	535,680			23	1,182,471
Settled during current year:										
18.1 By payment in full	15	305,719			6	535,680			21	841,399
18.2 By payment on compromised claims										
18.3 Totals paid	15	305,719			6	535,680			21	841,399
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	15	305,719			6	535,680			21	841,399
19. Unpaid Dec. 31, current year (16+17-18.6)	2	341,072				0			2	341,072
POLICY EXHIBIT										
20. In force December 31, prior year	5,689	113,679,939	(a)		0	1,778,525			5,689	115,458,464
21. Issued during year	1,064	19,602,824							1,064	19,602,824
22. Other changes to in force (Net)	(1,207)	(27,236,239)				(24,987)			(1,207)	(27,261,225)
23. In force December 31 of current year	5,546	106,046,524	(a)		0	1,753,539			5,546	107,800,063

(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	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	19,920	19,924		129,717	37,327
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)	4,896,161	5,116,037		5,731,938	5,176,101
25.2 Guaranteed renewable (b)	3,561,577	3,653,159		1,385,731	1,388,723
25.3 Non-renewable for stated reasons only (b)	325	359		2,237	1,729
25.4 Other accident only	37	43		16,778	12,542
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	8,458,100	8,769,597		7,136,685	6,579,096
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	8,478,020	8,789,521		7,266,402	6,616,423

(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 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Pennsylvania

DURING THE YEAR 2017

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68195

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	9,539,997		53,306		9,593,303
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	9,539,997		53,306		9,593,303
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	108				108
6.2 Applied to pay renewal premiums	565				565
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	3,309				3,309
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)	3,981				3,981
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)	3,981				3,981
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	3,260,574		284,538		3,545,112
10. Matured endowments	6,849				6,849
11. Annuity benefits	2,876		2,433,995		2,436,871
12. Surrender values and withdrawals for life contracts	2,148,918				2,148,918
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	2,079		19,000		21,079
14. All other benefits, except accident and health	34,002		1,419		35,421
15. Totals	5,455,299		2,738,951		8,194,250
DETAILS OF WRITE-INS					
1301. Disability Benefits					
1302. Supplementary Contracts	2,079		19,000		21,079
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	2,079		19,000		21,079

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.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	24	439,049			1	7,572			25	446,622
17. Incurred during current year	190	3,031,815			9	276,965			199	3,308,780
Settled during current year:										
18.1 By payment in full	202	3,009,218			10	284,538			212	3,293,756
18.2 By payment on compromised claims										
18.3 Totals paid	202	3,009,218			10	284,538			212	3,293,756
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	202	3,009,218			10	284,538			212	3,293,756
19. Unpaid Dec. 31, current year (16+17-18.6)	12	461,646				(1)			12	461,645
POLICY EXHIBIT										
20. In force December 31, prior year	35,078	739,506,452	(a)	0	7	7,370,622			35,085	746,877,073
21. Issued during year	5,685	114,578,440							5,685	114,578,440
22. Other changes to in force (Net)	(5,026)	(112,377,185)			(1)	(381,151)			(5,027)	(112,758,336)
23. In force December 31 of current year	35,737	741,707,707	(a)	0	6	6,989,471			35,743	748,697,177

(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	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	379,063	374,394		1,042,805	574,813
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)	205	223			
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	24,448,924	25,428,359		28,509,511	25,744,890
25.2 Guaranteed renewable (b)	13,282,884	13,576,517		6,902,398	6,672,689
25.3 Non-renewable for stated reasons only (b)	46,206	51,003		40,380	31,210
25.4 Other accident only	103,059	121,355		1,280,213	956,965
25.5 All other (b)	4	4			
25.6 Totals (sum of Lines 25.1 to 25.5)	37,881,076	39,177,239		36,732,501	33,405,754
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	38,260,344	39,551,856		37,775,306	33,980,567

(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 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Rhode Island

DURING THE YEAR 2017

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68195

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	397,648		1,235		398,882
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	397,648		1,235		398,882
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	237,807				237,807
10. Matured endowments	1,000				1,000
11. Annuity benefits			204,936		204,936
12. Surrender values and withdrawals for life contracts	166,495				166,495
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health	3,809				3,809
15. Totals	409,111		204,936		614,047
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.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	4	9,500							4	9,500
17. Incurred during current year	14	265,388							14	265,388
Settled during current year:										
18.1 By payment in full	14	238,807							14	238,807
18.2 By payment on compromised claims										
18.3 Totals paid	14	238,807							14	238,807
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	14	238,807							14	238,807
19. Unpaid Dec. 31, current year (16+17-18.6)	4	36,082							4	36,082
POLICY EXHIBIT										
20. In force December 31, prior year	1,909	39,643,987	(a)		No. of Policies	67,858			1,909	39,711,845
21. Issued during year	366	6,899,431							366	6,899,431
22. Other changes to in force (Net)	(280)	(5,476,309)				(11,301)			(280)	(5,487,610)
23. In force December 31 of current year	1,995	41,067,109	(a)			56,557			1,995	41,123,666

(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	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	20,984	20,783		22,741	5,813
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	1,409,464	1,482,495		1,364,853	1,232,500
25.2 Guaranteed renewable (b)	549,034	564,399		224,029	291,042
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)	1,958,498	2,046,894		1,588,882	1,523,542
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	1,979,482	2,067,677		1,611,623	1,529,355

(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 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF South Carolina

DURING THE YEAR 2017

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68195

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, and Direct Claims and Benefits Paid.

Table with 10 columns: 1 No., 2 Amount, 3 No. of Ind.Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No., 8 Amount, 9 No., 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 Dividends Paid Or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and Individual 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 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF South Dakota

DURING THE YEAR 2017

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68195

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, DIRECT CLAIMS AND BENEFITS PAID, and DETAILS OF WRITE-INS.

Table with 10 columns: 1 No., 2 Amount, 3 No. of Ind. Pol. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No., 8 Amount, 9 No., 10 Amount. 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 Dividends Paid 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 (b), 24.4 Medicare Title XVIII exempt from state taxes or fees, 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 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Tennessee

DURING THE YEAR 2017

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68195

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	18,220,606		44,473		18,265,079
2. Annuity considerations	40,924				40,924
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	18,261,529		44,473		18,306,003
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	2,698				2,698
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	1,748				1,748
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)	4,445				4,445
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)	4,445				4,445
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	22,856,909		1,014,261		23,871,170
10. Matured endowments	19,118				19,118
11. Annuity benefits	8,687		3,728,588		3,737,274
12. Surrender values and withdrawals for life contracts	7,461,742		14,767		7,476,508
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	5,353		48,349		53,702
14. All other benefits, except accident and health	233,717		9,789		243,506
15. Totals	30,585,525		4,815,754		35,401,279
DETAILS OF WRITE-INS					
1301. Disability Benefits	2,844				2,844
1302. Supplementary Contracts	2,510		48,349		50,859
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	5,353		48,349		53,702

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.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	58	1,939,403			18	196,465			76	2,135,867
17. Incurred during current year	694	16,458,363			185	940,903			879	17,399,267
Settled during current year:										
18.1 By payment in full	704	15,110,379			194	1,014,261			898	16,124,641
18.2 By payment on compromised claims										
18.3 Totals paid	704	15,110,379			194	1,014,261			898	16,124,641
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	704	15,110,379			194	1,014,261			898	16,124,641
19. Unpaid Dec. 31, current year (16+17-18.6)	48	3,287,387			9	123,107			57	3,410,493
POLICY EXHIBIT										
20. In force December 31, prior year	55,665	2,071,218,646	(a)	0	110	21,803,004			55,775	2,093,021,650
21. Issued during year	4,136	66,399,549							4,136	66,399,549
22. Other changes to in force (Net)	(6,880)	(144,515,392)			(9)	(1,521,667)			(6,889)	(146,037,058)
23. In force December 31 of current year	52,921	1,993,102,803	(a)	0	101	20,281,337			53,022	2,013,384,140

(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	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	19,714	21,136		1,261,175	330,829
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)	232	469		8,822	6,317
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	12,634,799	13,225,399		19,073,671	17,224,061
25.2 Guaranteed renewable (b)	4,951,118	5,063,448		2,427,176	2,629,029
25.3 Non-renewable for stated reasons only (b)	78,444	86,588		70,263	54,307
25.4 Other accident only	1,269	1,482		17,479	13,066
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	17,665,631	18,376,917		21,588,588	19,920,463
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	17,685,576	18,398,522		22,858,585	20,257,609

(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 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Texas

DURING THE YEAR 2017

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68195

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, and Direct Claims and Benefits Paid.

Table with 10 columns: 1 No., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No., 8 Amount, 9 No., 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 Dividends Paid Or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and Individual 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 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Utah

DURING THE YEAR 2017

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68195

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	996,398		4,778		1,001,176
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	996,398		4,778		1,001,176
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	929,425		55,000		984,425
10. Matured endowments					
11. Annuity benefits			106,913		106,913
12. Surrender values and withdrawals for life contracts	267,183				267,183
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health					
15. Totals	1,196,608		161,913		1,358,521
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.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	2	54,667				1			2	54,667
17. Incurred during current year Settled during current year:	52	874,758			1	55,000			53	929,758
18.1 By payment in full	54	929,425			1	55,000			55	984,425
18.2 By payment on compromised claims										
18.3 Totals paid	54	929,425			1	55,000			55	984,425
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	54	929,425			1	55,000			55	984,425
19. Unpaid Dec. 31, current year (16+17-18.6)		0					1			0
POLICY EXHIBIT										
20. In force December 31, prior year	3,600	82,718,820	(a)		0	773,175			3,600	83,491,995
21. Issued during year	811	15,542,532							811	15,542,532
22. Other changes to in force (Net)	(709)	(16,515,950)							(709)	(16,515,950)
23. In force December 31 of current year	3,702	81,745,402	(a)		0	773,175			3,702	82,518,577

(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	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	2,925	2,921		234,626	59,857
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)	1,459,913	1,535,196		2,221,023	2,005,646
25.2 Guaranteed renewable (b)	650,056	660,232		203,372	182,540
25.3 Non-renewable for stated reasons only (b)	324	358			
25.4 Other accident only	19	22			
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	2,110,312	2,195,808		2,424,395	2,188,186
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	2,113,237	2,198,730		2,659,021	2,248,043

(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 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Vermont

DURING THE YEAR 2017

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68195

	1	2	3	4	5
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	648,456				648,456
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	648,456				648,456
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	55,295		614		55,909
10. Matured endowments					
11. Annuity benefits			26,984		26,984
12. Surrender values and withdrawals for life contracts	187,959				187,959
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health					
15. Totals	243,255		27,598		270,852
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.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	.1	10,000							.1	10,000
17. Incurred during current year	12	52,028			.1	614			.1	52,642
Settled during current year:										
18.1 By payment in full	12	55,295			.1	614			.1	55,909
18.2 By payment on compromised claims										
18.3 Totals paid	12	55,295			.1	614			.1	55,909
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	12	55,295			.1	614			.1	55,909
19. Unpaid Dec. 31, current year (16+17-18.6)	1	6,733							1	6,733
POLICY EXHIBIT										
20. In force December 31, prior year	3,091	70,621,721	(a)		.0	8,439			3,091	70,630,160
21. Issued during year	78	1,474,986							78	1,474,986
22. Other changes to in force (Net)	(374)	(8,050,361)			.1	(911)			(373)	(8,051,272)
23. In force December 31 of current year	2,795	64,046,346	(a)		1	7,528			2,796	64,053,874

(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	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	2,346	2,338		72,889	18,630
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	778,332	819,216		1,033,185	932,995
25.2 Guaranteed renewable (b)	645,489	651,547		189,860	215,884
25.3 Non-renewable for stated reasons only (b)	1,075	1,187			
25.4 Other accident only	786	925			
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	1,425,682	1,472,875		1,223,044	1,148,879
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	1,428,027	1,475,213		1,295,933	1,167,509

(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 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Virginia

DURING THE YEAR 2017

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68195

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	9,243,056		37,867		9,280,923
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	9,243,056		37,867		9,280,923
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	179				179
6.2 Applied to pay renewal premiums	391				391
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	1,752				1,752
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)	2,322				2,322
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)	2,322				2,322
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	11,248,970		103,456		11,352,426
10. Matured endowments	10,000				10,000
11. Annuity benefits	793		2,006,306		2,007,100
12. Surrender values and withdrawals for life contracts	2,656,616				2,656,616
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	116		572		688
14. All other benefits, except accident and health	80,624		5,344		85,968
15. Totals	13,997,119		2,115,679		16,112,798
DETAILS OF WRITE-INS					
1301. Disability Benefits					
1302. Supplementary Contracts	116		572		688
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	116		572		688

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.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	17	607,558			1	9,392			18	616,950
17. Incurred during current year	230	3,404,380			19	103,456			249	3,507,837
Settled during current year:										
18.1 By payment in full	226	3,395,635			19	103,456			245	3,499,091
18.2 By payment on compromised claims										
18.3 Totals paid	226	3,395,635			19	103,456			245	3,499,091
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	226	3,395,635			19	103,456			245	3,499,091
19. Unpaid Dec. 31, current year (16+17-18.6)	21	616,304			1	9,392			22	625,696
POLICY EXHIBIT										
20. In force December 31, prior year	33,957	741,843,706	(a)	0	No. of Policies 11	4,418,895			33,968	746,262,601
21. Issued during year	4,450	83,160,584							4,450	83,160,584
22. Other changes to in force (Net)	(3,995)	(89,899,712)			(2)	(187,563)			(3,997)	(90,087,275)
23. In force December 31 of current year	34,412	735,104,578	(a)	0	9	4,231,332			34,421	739,335,910

(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	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	415,319	409,263		653,396	199,701
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)	585	637			
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	14,156,876	14,657,052		12,032,634	10,865,807
25.2 Guaranteed renewable (b)	6,229,279	6,379,671		2,356,643	2,346,655
25.3 Non-renewable for stated reasons only (b)	9,247	10,207		18,897	14,606
25.4 Other accident only	280	330		146,508	109,516
25.5 All other (b)	36	37			
25.6 Totals (sum of Lines 25.1 to 25.5)	20,395,718	21,047,298		14,554,682	13,336,583
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	20,811,623	21,457,197		15,208,078	13,536,285

(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 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Washington

DURING THE YEAR 2017

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68195

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	2,586,471		18,438		2,604,909
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	2,586,471		18,438		2,604,909
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	2,482				2,482
6.2 Applied to pay renewal premiums	9,946				9,946
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)	12,428				12,428
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)	12,428				12,428
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	31,417,329		200,897		31,618,225
10. Matured endowments					
11. Annuity benefits	300		403,452		403,752
12. Surrender values and withdrawals for life contracts	357,380				357,380
13. Aggregate write-ins for miscellaneous direct claims and benefits paid			3,825		3,825
14. All other benefits, except accident and health	10,524		161		10,685
15. Totals	31,785,532		608,335		32,393,868
DETAILS OF WRITE-INS					
1301. Disability Benefits					
1302. Supplementary Contracts			3,825		3,825
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)			3,825		3,825

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.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	.1	1,000				0			.1	1,000
17. Incurred during current year	38	988,472			13	200,897			51	1,189,369
Settled during current year:										
18.1 By payment in full	37	982,129			13	200,897			50	1,183,025
18.2 By payment on compromised claims										
18.3 Totals paid	37	982,129			13	200,897			50	1,183,025
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	37	982,129			13	200,897			50	1,183,025
19. Unpaid Dec. 31, current year (16+17-18.6)	2	7,343				0			2	7,344
POLICY EXHIBIT										
20. In force December 31, prior year	8,268	155,695,970	(a)		5	3,877,684			8,273	159,573,654
21. Issued during year	2,625	46,724,890							2,625	46,724,890
22. Other changes to in force (Net)	(1,977)	(40,012,862)			1	(301,768)			(1,976)	(40,314,630)
23. In force December 31 of current year	8,916	162,407,997	(a)		6	3,575,916			8,922	165,983,914

(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	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	28,019	28,021		480,127	259,101
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)	10,805,063	11,360,246		12,026,560	10,860,322
25.2 Guaranteed renewable (b)	6,869,485	6,990,954		2,424,987	2,641,203
25.3 Non-renewable for stated reasons only (b)	708	782		11,889	9,189
25.4 Other accident only	93,570	110,182		143,344	107,150
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	17,768,827	18,462,163		14,606,780	13,617,865
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	17,796,846	18,490,183		15,086,908	13,876,966

(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 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF West Virginia

DURING THE YEAR 2017

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68195

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	2,151,011		9,217		2,160,227
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	2,151,011		9,217		2,160,227
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	814,891		79,604		894,495
10. Matured endowments	3,000				3,000
11. Annuity benefits	206		1,099,410		1,099,616
12. Surrender values and withdrawals for life contracts	424,252				424,252
13. Aggregate write-ins for miscellaneous direct claims and benefits paid			21,875		21,875
14. All other benefits, except accident and health	4,856		2,046		6,902
15. Totals	1,247,205		1,202,935		2,450,140
DETAILS OF WRITE-INS					
1301. Disability Benefits					
1302. Supplementary Contracts			21,875		21,875
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)			21,875		21,875

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.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	7	537,160			3	(997,053)			10	(459,893)
17. Incurred during current year	54	320,025			17	152,869			71	472,894
Settled during current year:										
18.1 By payment in full	55	817,891			18	79,604			73	897,495
18.2 By payment on compromised claims										
18.3 Totals paid	55	817,891			18	79,604			73	897,495
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	55	817,891			18	79,604			73	897,495
19. Unpaid Dec. 31, current year (16+17-18.6)	6	39,294			2	(923,788)			8	(884,493)
POLICY EXHIBIT										
20. In force December 31, prior year	9,088	172,575,066	(a)		1	1,445,378			9,089	174,020,443
21. Issued during year	996	14,723,400							996	14,723,400
22. Other changes to in force (Net)	(1,529)	(27,258,090)			(1)	(311,521)			(1,530)	(27,569,611)
23. In force December 31 of current year	8,555	160,040,375	(a)		0	1,133,857			8,555	161,174,232

(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	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	15,678	15,672		184,370	54,524
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)	728,042	777,396		1,447,528	1,307,159
25.2 Guaranteed renewable (b)	1,645,369	1,656,890		669,508	683,855
25.3 Non-renewable for stated reasons only (b)	5,758	6,356		16,040	12,397
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	2,379,169	2,440,642		2,133,076	2,003,411
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	2,394,847	2,456,313		2,317,446	2,057,935

(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 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Wisconsin

DURING THE YEAR 2017

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68195

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	4,160,982		11,432		4,172,414
2. Annuity considerations	1,105				1,105
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	4,162,087		11,432		4,173,519
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	1,732,161				1,732,161
10. Matured endowments	734,824				734,824
11. Annuity benefits	961		1,697,316		1,698,277
12. Surrender values and withdrawals for life contracts	1,141,952		(307)		1,141,644
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	18,656		5,100		23,756
14. All other benefits, except accident and health	11,023				11,023
15. Totals	3,639,577		1,702,108		5,341,685
DETAILS OF WRITE-INS					
1301. Disability Benefits	10,123				10,123
1302. Supplementary Contracts	8,532		5,100		13,632
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	18,656		5,100		23,756

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.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	7	42,056			2	1,102,255			9	1,144,311
17. Incurred during current year	150	2,659,085							150	2,659,085
Settled during current year:										
18.1 By payment in full	148	2,466,985							148	2,466,985
18.2 By payment on compromised claims										
18.3 Totals paid	148	2,466,985							148	2,466,985
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	148	2,466,985							148	2,466,985
19. Unpaid Dec. 31, current year (16+17-18.6)	9	234,156			2	1,102,255			11	1,336,411
POLICY EXHIBIT										
20. In force December 31, prior year	15,979	358,302,177	(a)		3	1,366,457			15,982	359,668,634
21. Issued during year	2,675	46,203,287							2,675	46,203,287
22. Other changes to in force (Net)	(2,917)	(65,276,875)				(120,000)			(2,917)	(65,396,875)
23. In force December 31 of current year	15,737	339,228,589	(a)		3	1,246,457			15,740	340,475,046

(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	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	33,910	33,893		462,921	365,643
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)	6,138,842	6,344,959		5,350,914	4,832,026
25.2 Guaranteed renewable (b)	3,335,392	3,389,990		1,491,479	1,481,397
25.3 Non-renewable for stated reasons only (b)	27,800	30,686		41,033	31,715
25.4 Other accident only	4,669	5,498			
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	9,506,703	9,771,133		6,883,427	6,345,138
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	9,540,613	9,805,026		7,346,348	6,710,782

(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 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Wyoming
NAIC Group Code 0565

DURING THE YEAR 2017
NAIC Company Code 68195

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	347,767		383		348,150
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	347,767		383		348,150
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	54,814				54,814
10. Matured endowments					
11. Annuity benefits			68,231		68,231
12. Surrender values and withdrawals for life contracts	54,208				54,208
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health					
15. Totals	109,022		68,231		177,253
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.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year										
17. Incurred during current year	2	54,814							2	54,814
Settled during current year:										
18.1 By payment in full	2	54,814							2	54,814
18.2 By payment on compromised claims										
18.3 Totals paid	2	54,814							2	54,814
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	2	54,814							2	54,814
19. Unpaid Dec. 31, current year (16+17-18.6)										
POLICY EXHIBIT										
20. In force December 31, prior year	1,141	25,919,762	(a)		1	315,835			1,142	26,235,597
21. Issued during year	200	3,889,718							200	3,889,718
22. Other changes to in force (Net)	(206)	(5,566,955)				(135,153)			(206)	(5,702,108)
23. In force December 31 of current year	1,135	24,242,525	(a)		1	180,681			1,136	24,423,206

(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	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	4,898	4,906		57,947	17,461
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)	324,895	351,573		782,459	706,582
25.2 Guaranteed renewable (b)	512,602	519,309		82,204	77,339
25.3 Non-renewable for stated reasons only (b)	1,038	1,146			
25.4 Other accident only				37,492	28,026
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	838,535	872,027		902,155	811,947
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	843,434	876,933		960,102	829,409

(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 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF American Samoa

DURING THE YEAR 2017

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68195

Table with 5 columns: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Life insurance, Annuity considerations, Direct Dividends to Policyholders, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, Ordinary (1 No., 2 Amount), Credit Life (3 No. of Ind.Pols. & Gr. Certifs., 4 Amount), Group (5 No. of Certifs., 6 Amount), Industrial (7 No., 8 Amount), Total (9 No., 10 Amount). Rows include Unpaid December 31, Incurred during current year, 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 Dividends Paid 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 individual 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 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Guam

DURING THE YEAR 2017

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68195

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	1,142		1,800		2,942
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	1,142		1,800		2,942
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits					
10. Matured endowments					
11. Annuity benefits			489		489
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			489		489
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.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year						0				0
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)						0				0
POLICY EXHIBIT										
20. In force December 31, prior year			(a)		No. of Policies	249,999				249,999
21. Issued during year										
22. Other changes to in force (Net)	1	29,545							1	29,545
23. In force December 31 of current year	1	29,545	(a)			249,999			1	279,544

(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	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)				1,607	410
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)	1,753	1,772			
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)	1,753	1,772			
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	1,753	1,772		1,607	410

(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 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Puerto Rico

DURING THE YEAR 2017

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68195

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	17,779				17,779
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	17,779				17,779
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits					
10. Matured endowments					
11. Annuity benefits			47,086		47,086
12. Surrender values and withdrawals for life contracts	9,079				9,079
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health	505				505
15. Totals	9,584		47,086		56,670
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.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year						0				0
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)						0				0
POLICY EXHIBIT										
20. In force December 31, prior year	4	280,948	(a)		No. of Policies	104,451			4	385,399
21. Issued during year	11	163,734							11	163,734
22. Other changes to in force (Net)	37	713,838							37	713,838
23. In force December 31 of current year	52	1,158,520	(a)			104,451			52	1,262,971

(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	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)				43,093	10,992
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)	199,438	202,581		20,413	18,433
25.2 Guaranteed renewable (b)	29,544	30,206		1,204	1,175
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)	228,982	232,787		21,616	19,609
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	228,982	232,787		64,709	30,600

(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 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

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

DURING THE YEAR 2017

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68195

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	2,499				2,499
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	2,499				2,499
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits					
10. Matured endowments					
11. Annuity benefits			1,569		1,569
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			1,569		1,569
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.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year										
17. Incurred during current year Settled during current year:										
18.1 By payment in full										
18.2 By payment on compromised claims										
18.3 Totals paid										
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements										
19. Unpaid Dec. 31, current year (16+17-18.6)										
POLICY EXHIBIT										
20. In force December 31, prior year			(a)		No. of Policies	1				1
21. Issued during year										
22. Other changes to in force (Net)	7	220,753							7	220,753
23. In force December 31 of current year	7	220,753	(a)			1			7	220,754

(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	Dividends Paid 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 (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)	20,349	20,570			
25.2 Guaranteed renewable (b)	4,950	4,984			
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)	25,299	25,554			
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	25,299	25,554			

(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 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Northern Mariana Islands

DURING THE YEAR 2017

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68195

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	437				437
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	437				437
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 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.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year										
17. Incurred during current year Settled during current year:										
18.1 By payment in full										
18.2 By payment on compromised claims										
18.3 Totals paid										
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements										
19. Unpaid Dec. 31, current year (16+17-18.6)										
POLICY EXHIBIT										
20. In force December 31, prior year			(a)		No. of Policies					
21. Issued during year										
22. Other changes to in force (Net)										
23. In force December 31 of current year			(a)							

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 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 (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 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Canada

DURING THE YEAR 2017

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68195

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	12,386				12,386
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	12,386				12,386
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	8,000				8,000
10. Matured endowments					
11. Annuity benefits					
12. Surrender values and withdrawals for life contracts	4,127				4,127
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health					
15. Totals	12,127				12,127
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.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year		0								0
17. Incurred during current year	1	8,000			2				3	8,000
Settled during current year:										
18.1 By payment in full	1	8,000			2				3	8,000
18.2 By payment on compromised claims										
18.3 Totals paid	1	8,000			2				3	8,000
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	1	8,000			2				3	8,000
19. Unpaid Dec. 31, current year (16+17-18.6)		0								0
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	6	173,298	(a)						6	173,298
21. Issued during year	1	42,975							1	42,975
22. Other changes to in force (Net)	34	578,921							34	578,921
23. In force December 31 of current year	41	795,194	(a)						41	795,194

(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	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	701	770		695	234
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)	98,958	104,172		273,837	
25.2 Guaranteed renewable (b)	17,796	18,249		5,155	4,350
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only	1,037	1,037		102	76
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	117,791	123,458		279,094	4,426
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	118,493	124,228		279,789	4,660

(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 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Other Aliens

DURING THE YEAR 2017

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68195

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	26,042		3,223		29,265
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	26,042		3,223		29,265
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits					
10. Matured endowments					
11. Annuity benefits			(296,250)		(296,250)
12. Surrender values and withdrawals for life contracts	2,263				2,263
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health	37,474		47		37,520
15. Totals	39,737		(296,203)		(256,467)
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.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year		0								0
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)		0								0
POLICY EXHIBIT										
20. In force December 31, prior year	166	3,717,021	(a)		4	901,130			170	4,618,151
21. Issued during year										
22. Other changes to in force (Net)	(112)	(2,479,766)			(3)	(497,419)			(115)	(2,977,185)
23. In force December 31 of current year	54	1,237,255	(a)		1	403,711			55	1,640,966

(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	Dividends Paid 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 (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)	255,248	372,225		3,341,264	3,017,255
25.2 Guaranteed renewable (b)	23,339	32,884		207,622	175,193
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)	278,587	405,109		3,548,886	3,192,449
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	278,587	405,109		3,548,886	3,192,449

(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 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Grand Total

DURING THE YEAR 2017

NAIC Group Code 0565

LIFE INSURANCE

NAIC Company Code 68195

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	302,682,171		1,337,228		304,019,399
2. Annuity considerations	71,201				71,201
3. Deposit-type contract funds	57,512	XXX		XXX	57,512
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	302,810,884		1,337,228		304,148,113
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	13,022				13,022
6.2 Applied to pay renewal premiums	18,387				18,387
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	18,707				18,707
6.4 Other	428				428
6.5 Totals (Sum of Lines 6.1 to 6.4)	50,544				50,544
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)	50,544				50,544
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	276,867,076		11,166,649		288,033,724
10. Matured endowments	975,485				975,485
11. Annuity benefits	27,601		75,636,676		75,664,277
12. Surrender values and withdrawals for life contracts	75,581,533		58,742		75,640,275
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	94,844		548,247		643,090
14. All other benefits, except accident and health	1,438,479		54,364		1,492,843
15. Totals	354,985,017		87,464,678		442,449,695
DETAILS OF WRITE-INS					
1301. Disability Benefits	61,339				61,339
1302. Supplementary Contracts	33,505		548,247		581,752
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	94,844		548,247		643,090

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.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	535	15,940,893			50	771,208			585	16,712,101
17. Incurred during current year	6,411	109,271,140			740	11,139,289			7,151	120,410,428
Settled during current year:										
18.1 By payment in full	6,493	108,667,451			752	11,166,649			7,245	119,834,100
18.2 By payment on compromised claims										
18.3 Totals paid	6,493	108,667,451			752	11,166,649			7,245	119,834,100
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	6,493	108,667,451			752	11,166,649			7,245	119,834,100
19. Unpaid Dec. 31, current year (16+17-18.6)	453	16,544,581			38	743,848			491	17,288,429
POLICY EXHIBIT										
20. In force December 31, prior year	1,117,540	27,218,884,744	0 (a)	0	461	205,290,000			1,118,001	27,424,174,744
21. Issued during year	169,497	3,052,899,086							169,497	3,052,899,086
22. Other changes to in force (Net)	(165,303)	(3,609,651,261)			(36)	(15,436,463)			(165,339)	(3,625,087,723)
23. In force December 31 of current year	1,121,734	26,662,132,569	0 (a)	0	425	189,853,538			1,122,159	26,851,986,107

(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	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	3,560,093	3,498,284		31,345,949	14,243,260
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)	10,744	11,913		14,332	10,262
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	463,131,996	484,397,374		629,265,314	567,997,001
25.2 Guaranteed renewable (b)	225,590,446	229,924,431		96,823,501	99,393,955
25.3 Non-renewable for stated reasons only (b)	728,425	804,093		747,217	577,497
25.4 Other accident only	4,803,030	5,685,647		3,999,158	2,989,529
25.5 All other (b)	767	796		25,582	24,959
25.6 Totals (sum of Lines 25.1 to 25.5)	694,254,664	720,812,341		730,860,772	670,982,941
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	697,825,501	724,322,538		762,221,054	685,236,464

(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 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY
FORM FOR CALCULATING THE INTEREST MAINTENANCE RESERVE**

INTEREST MAINTENANCE RESERVE

	1 Amount
1. Reserve as of December 31, Prior Year	44,753,434
2. Current year's realized pre-tax capital gains/(losses) of \$2,469,284 transferred into the reserve net of taxes of \$864,249	1,605,035
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)	46,358,469
5. Current year's amortization released to Summary of Operations (Amortization, Line 1, Column 4)	7,148,127
6. Reserve as of December 31, current year (Line 4 minus Line 5)	39,210,342

Line 1 increased \$563,204 for foreign currency translation.

AMORTIZATION

	1	2	3	4
Year of Amortization	Reserve as of December 31, Prior Year	Current Year's Realized Capital Gains/(Losses) Transferred into the Reserve Net of Taxes	Adjustment for Current Year's Liability Gains/(Losses) Released From the Reserve	Balance Before Reduction for Current Year's Amortization (Cols. 1 + 2 + 3)
1. 2017	6,770,020	378,106		7,148,127
2. 2018	5,348,528	143,029		5,491,557
3. 2019	4,425,822	97,787		4,523,610
4. 2020	3,818,961	93,454		3,912,415
5. 2021	3,515,162	89,246		3,604,408
6. 2022	3,289,375	85,057		3,374,432
7. 2023	2,963,354	78,162		3,041,516
8. 2024	2,579,656	72,484		2,652,140
9. 2025	2,113,145	64,553		2,177,698
10. 2026	1,706,821	57,871		1,764,692
11. 2027	1,381,564	48,932		1,430,497
12. 2028	1,185,699	47,397		1,233,096
13. 2029	1,085,261	48,188		1,133,448
14. 2030	935,638	50,557		986,195
15. 2031	784,822	52,137		836,959
16. 2032	655,144	55,299		710,443
17. 2033	508,392	50,549		558,940
18. 2034	364,888	40,264		405,152
19. 2035	280,396	29,185		309,582
20. 2036	246,212	17,316		263,528
21. 2037	217,944	6,240		224,184
22. 2038	187,562	(92)		187,470
23. 2039	136,885	(96)		136,789
24. 2040	97,933	(98)		97,835
25. 2041	81,194	(104)		81,090
26. 2042	51,058	(106)		50,952
27. 2043	16,943	(100)		16,843
28. 2044	2,775	(80)		2,695
29. 2045	1,685	(57)		1,628
30. 2046	595	(35)		560
31. 2047 and Later		(12)		(12)
32. Total (Lines 1 to 31)	44,753,434	1,605,035		46,358,469

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE PROVIDENT LIFE AND ACCIDENT 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	65,924,831	3,623,840	69,548,671	107,704	13,167,432	13,275,136	82,823,807
2. Realized capital gains/(losses) net of taxes - General Account	(193,901)		(193,901)	(3,265)	133,673	130,408	(63,493)
3. Realized capital gains/(losses) net of taxes - Separate Accounts							
4. Unrealized capital gains/(losses) net of deferred taxes - General Account	170,238		170,238		412,295	412,295	582,533
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	14,355,893	680,084	15,035,978		398,172	398,172	15,434,150
8. Accumulated balances (Lines 1 through 5 - 6 + 7)	80,257,062	4,303,924	84,560,986	104,439	14,111,572	14,216,011	98,776,997
9. Maximum reserve	63,670,387	3,489,609	67,159,996	116,437	13,563,513	13,679,950	80,839,946
10. Reserve objective	43,040,838	2,684,315	45,725,153	72,773	13,114,397	13,187,170	58,912,323
11. 20% of (Line 10 - Line 8)	(7,443,245)	(323,922)	(7,767,167)	(6,333)	(199,435)	(205,768)	(7,972,935)
12. Balance before transfers (Lines 8 + 11)	72,813,817	3,980,002	76,793,819	98,106	13,912,137	14,010,243	90,804,062
13. Transfers				18,331	(18,331)		
14. Voluntary contribution							
15. Adjustment down to maximum/up to zero	(9,143,430)	(490,393)	(9,633,823)		(330,293)	(330,293)	(9,964,116)
16. Reserve as of December 31, current year (Lines 12 + 13 + 14 + 15)	63,670,387	3,489,609	67,159,996	116,437	13,563,513	13,679,950	80,839,946

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	304,027,390	XXX	XXX	304,027,390	0.0000		0.0000		0.0000	
2.	1	Highest Quality	2,538,502,834	XXX	XXX	2,538,502,834	0.0004	1,015,401	0.0023	5,838,557	0.0030	7,615,509
3.	2	High Quality	3,235,135,787	XXX	XXX	3,235,135,787	0.0019	6,146,758	0.0058	18,763,788	0.0090	29,116,222
4.	3	Medium Quality	352,375,469	XXX	XXX	352,375,469	0.0093	3,277,092	0.0230	8,104,636	0.0340	11,980,766
5.	4	Low Quality	118,193,176	XXX	XXX	118,193,176	0.0213	2,517,515	0.0530	6,264,238	0.0750	8,864,488
6.	5	Lower Quality	26,662,965	XXX	XXX	26,662,965	0.0432	1,151,840	0.1100	2,932,926	0.1700	4,532,704
7.	6	In or Near Default	367,500	XXX	XXX	367,500	0.0000		0.2000	73,500	0.2000	73,500
8.		Total Unrated Multi-class Securities Acquired by Conversion ..		XXX	XXX		XXX		XXX		XXX	
9.		Total Long-Term Bonds (Sum of Lines 1 through 8)	6,575,265,121	XXX	XXX	6,575,265,121	XXX	14,108,606	XXX	41,977,644	XXX	62,183,189
PREFERRED STOCK												
10.	1	Highest Quality	89,666,408	XXX	XXX	89,666,408	0.0004	35,867	0.0023	206,233	0.0030	268,999
11.	2	High Quality	183,600	XXX	XXX	183,600	0.0019	349	0.0058	1,065	0.0090	1,652
12.	3	Medium Quality		XXX	XXX		0.0093		0.0230		0.0340	
13.	4	Low Quality		XXX	XXX		0.0213		0.0530		0.0750	
14.	5	Lower Quality		XXX	XXX		0.0432		0.1100		0.1700	
15.	6	In or Near Default		XXX	XXX		0.0000		0.2000		0.2000	
16.		Affiliated Life with AVR		XXX	XXX		0.0000		0.0000		0.0000	
17.		Total Preferred Stocks (Sum of Lines 10 through 16)	89,850,008	XXX	XXX	89,850,008	XXX	36,215	XXX	207,298	XXX	270,652
SHORT - TERM BONDS												
18.		Exempt Obligations		XXX	XXX		0.0000		0.0000		0.0000	
19.	1	Highest Quality		XXX	XXX		0.0004		0.0023		0.0030	
20.	2	High Quality		XXX	XXX		0.0019		0.0058		0.0090	
21.	3	Medium Quality		XXX	XXX		0.0093		0.0230		0.0340	
22.	4	Low Quality		XXX	XXX		0.0213		0.0530		0.0750	
23.	5	Lower Quality		XXX	XXX		0.0432		0.1100		0.1700	
24.	6	In or Near Default		XXX	XXX		0.0000		0.2000		0.2000	
25.		Total Short - Term Bonds (Sum of Lines 18 through 24)		XXX	XXX		XXX		XXX		XXX	
DERIVATIVE INSTRUMENTS												
26.		Exchange Traded		XXX	XXX		0.0004		0.0023		0.0030	
27.	1	Highest Quality		XXX	XXX		0.0004		0.0023		0.0030	
28.	2	High Quality		XXX	XXX		0.0019		0.0058		0.0090	
29.	3	Medium Quality		XXX	XXX		0.0093		0.0230		0.0340	
30.	4	Low Quality		XXX	XXX		0.0213		0.0530		0.0750	
31.	5	Lower Quality		XXX	XXX		0.0432		0.1100		0.1700	
32.	6	In or Near Default		XXX	XXX		0.0000		0.2000		0.2000	
33.		Total Derivative Instruments		XXX	XXX		XXX		XXX		XXX	
34.		Total (Lines 9 + 17 + 25 + 33)	6,665,115,129	XXX	XXX	6,665,115,129	XXX	14,144,821	XXX	42,184,942	XXX	62,453,840

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		0.0010		0.0050		0.0065	
36.		Farm Mortgages - CM2 - High Quality			XXX		0.0035		0.0100		0.0130	
37.		Farm Mortgages - CM3 - Medium Quality			XXX		0.0060		0.0175		0.0225	
38.		Farm Mortgages - CM4 - Low Medium Quality			XXX		0.0105		0.0300		0.0375	
39.		Farm Mortgages - CM5 - Low Quality			XXX		0.0160		0.0425		0.0550	
40.		Residential Mortgages - Insured or Guaranteed			XXX		0.0003		0.0006		0.0010	
41.		Residential Mortgages - All Other			XXX		0.0013		0.0030		0.0040	
42.		Commercial Mortgages - Insured or Guaranteed			XXX		0.0003		0.0006		0.0010	
43.		Commercial Mortgages - All Other - CM1 - Highest Quality	345,901,293		XXX	345,901,293	0.0010	345,901	0.0050	1,729,506	0.0065	2,248,358
44.		Commercial Mortgages - All Other - CM2 - High Quality	95,480,835		XXX	95,480,835	0.0035	334,183	0.0100	954,808	0.0130	1,241,251
45.		Commercial Mortgages - All Other - CM3 - Medium Quality			XXX		0.0060		0.0175		0.0225	
46.		Commercial Mortgages - All Other - CM4 - Low Medium Quality			XXX		0.0105		0.0300		0.0375	
47.		Commercial Mortgages - All Other - CM5 - Low Quality			XXX		0.0160		0.0425		0.0550	
Overdue, Not in Process:												
48.		Farm Mortgages			XXX		0.0420		0.0760		0.1200	
49.		Residential Mortgages - Insured or Guaranteed			XXX		0.0005		0.0012		0.0020	
50.		Residential Mortgages - All Other			XXX		0.0025		0.0058		0.0090	
51.		Commercial Mortgages - Insured or Guaranteed			XXX		0.0005		0.0012		0.0020	
52.		Commercial Mortgages - All Other			XXX		0.0420		0.0760		0.1200	
In Process of Foreclosure:												
53.		Farm Mortgages			XXX		0.0000		0.1700		0.1700	
54.		Residential Mortgages - Insured or Guaranteed			XXX		0.0000		0.0040		0.0040	
55.		Residential Mortgages - All Other			XXX		0.0000		0.0130		0.0130	
56.		Commercial Mortgages - Insured or Guaranteed			XXX		0.0000		0.0040		0.0040	
57.		Commercial Mortgages - All Other			XXX		0.0000		0.1700		0.1700	
58.		Total Schedule B Mortgages (Sum of Lines 35 through 57)	441,382,128		XXX	441,382,128	XXX	680,084	XXX	2,684,315	XXX	3,489,609
59.		Schedule DA Mortgages			XXX		0.0030		0.0100		0.0130	
60.		Total Mortgage Loans on Real Estate (Lines 58 + 59)	441,382,128		XXX	441,382,128	XXX	680,084	XXX	2,684,315	XXX	3,489,609

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		0.1300 (a)		0.1300 (a)	
2.		Unaffiliated - Private		XXX	XXX		0.0000		0.1600		0.1600	
3.		Federal Home Loan Bank	14,554,600	XXX	XXX	14,554,600	0.0000		0.0050	72,773	0.0080	116,437
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		0.1300 (a)		0.1300 (a)	
13.		Unaffiliated Common Stock - Private					0.0000		0.1600		0.1600	
14.		Real Estate					(b)		(b)		(b)	
15.		Affiliated - Certain Other (See SVO Purposes and Procedures Manual)		XXX	XXX		0.0000		0.1300		0.1300	
16.		Affiliated - All Other		XXX	XXX		0.0000		0.1600		0.1600	
17.		Total Common Stock (Sum of Lines 1 through 16)	14,554,600			14,554,600	XXX		XXX	72,773	XXX	116,437
REAL ESTATE												
18.		Home Office Property (General Account only)	61,767,493			61,767,493	0.0000		0.0750	4,632,562	0.0750	4,632,562
19.		Investment Properties	10,069,793			10,069,793	0.0000		0.0750	755,234	0.0750	755,234
20.		Properties Acquired in Satisfaction of Debt					0.0000		0.1100		0.1100	
21.		Total Real Estate (Sum of Lines 18 through 20)	71,837,286			71,837,286	XXX		XXX	5,387,796	XXX	5,387,796
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		0.0004		0.0023		0.0030	
24.	2	High Quality		XXX	XXX		0.0019		0.0058		0.0090	
25.	3	Medium Quality		XXX	XXX		0.0093		0.0230		0.0340	
26.	4	Low Quality		XXX	XXX		0.0213		0.0530		0.0750	
27.	5	Lower Quality		XXX	XXX		0.0432		0.1100		0.1700	
28.	6	In or Near Default		XXX	XXX		0.0000		0.2000		0.2000	
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	24,982,594	XXX	XXX	24,982,594	0.0004	9,993	0.0023	57,460	0.0030	74,948
31.	2	High Quality		XXX	XXX		0.0019		0.0058		0.0090	
32.	3	Medium Quality		XXX	XXX		0.0093		0.0230		0.0340	
33.	4	Low Quality		XXX	XXX		0.0213		0.0530		0.0750	
34.	5	Lower Quality		XXX	XXX		0.0432		0.1100		0.1700	
35.	6	In or Near Default		XXX	XXX		0.0000		0.2000		0.2000	
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)	24,982,594	XXX	XXX	24,982,594	XXX	9,993	XXX	57,460	XXX	74,948
INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF MORTGAGE LOANS												
In Good Standing Affiliated:												
38.		Mortgages - CM1 - Highest Quality			XXX		0.0010		0.0050		0.0065	
39.		Mortgages - CM2 - High Quality			XXX		0.0035		0.0100		0.0130	
40.		Mortgages - CM3 - Medium Quality			XXX		0.0060		0.0175		0.0225	
41.		Mortgages - CM4 - Low Medium Quality			XXX		0.0105		0.0300		0.0375	
42.		Mortgages - CM5 - Low Quality			XXX		0.0160		0.0425		0.0550	
43.		Residential Mortgages - Insured or Guaranteed			XXX		0.0003		0.0006		0.0010	
44.		Residential Mortgages - All Other		XXX	XXX		0.0013		0.0030		0.0040	
45.		Commercial Mortgages - Insured or Guaranteed			XXX		0.0003		0.0006		0.0010	
Overdue, Not in Process Affiliated:												
46.		Farm Mortgages			XXX		0.0420		0.0760		0.1200	
47.		Residential Mortgages - Insured or Guaranteed			XXX		0.0005		0.0012		0.0020	
48.		Residential Mortgages - All Other			XXX		0.0025		0.0058		0.0090	
49.		Commercial Mortgages - Insured or Guaranteed			XXX		0.0005		0.0012		0.0020	
50.		Commercial Mortgages - All Other			XXX		0.0420		0.0760		0.1200	
In Process of Foreclosure Affiliated:												
51.		Farm Mortgages			XXX		0.0000		0.1700		0.1700	
52.		Residential Mortgages - Insured or Guaranteed			XXX		0.0000		0.0040		0.0040	
53.		Residential Mortgages - All Other			XXX		0.0000		0.0130		0.0130	
54.		Commercial Mortgages - Insured or Guaranteed			XXX		0.0000		0.0040		0.0040	
55.		Commercial Mortgages - All Other			XXX		0.0000		0.1700		0.1700	
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		0.0010		0.0050		0.0065	
59.		Unaffiliated - In Good Standing Primarily Senior			XXX		0.0035		0.0010		0.0130	
60.		Unaffiliated - In Good Standing All Other			XXX		0.0060		0.0175		0.0225	
61.		Unaffiliated - Overdue, Not in Process			XXX		0.0420		0.0760		0.1200	
62.		Unaffiliated - In Process of Foreclosure			XXX		0.0000		0.1700		0.1700	
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		0.1300 (a)		0.1300 (a)	
66.		Unaffiliated Private	43,310,097	XXX	XXX	43,310,097	0.0000		0.1600	6,929,616	0.1600	6,929,616
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		0.1300		0.1300	
69.		Affiliated Other - All Other		XXX	XXX		0.0000		0.1600		0.1600	
70.		Total with Common Stock Characteristics (Sum of Lines 65 through 69)	43,310,097	XXX	XXX	43,310,097	XXX		XXX	6,929,616	XXX	6,929,616
INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF REAL ESTATE												
71.		Home Office Property (General Account only)					0.0000		0.0750		0.0750	
72.		Investment Properties					0.0000		0.0750		0.0750	
73.		Properties Acquired in Satisfaction of Debt					0.0000		0.1100		0.1100	
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	4,762,698			4,762,698	0.0003	1,429	0.0006	2,858	0.0010	4,763
76.		Non-guaranteed Federal Low Income Housing Tax Credit	59,731,835			59,731,835	0.0063	376,311	0.0120	716,782	0.0190	1,134,905
77.		Guaranteed State Low Income Housing Tax Credit					0.0003		0.0006		0.0010	
78.		Non-guaranteed State Low Income Housing Tax Credit	1,657,116			1,657,116	0.0063	10,440	0.0120	19,885	0.0190	31,485
79.		All Other Low Income Housing Tax Credit					0.0273		0.0600		0.0975	
80.		Total LIHTC (Sum of Lines 75 through 79)	66,151,649			66,151,649	XXX	388,179	XXX	739,525	XXX	1,171,153
ALL OTHER INVESTMENTS												
81.		NAIC 1 Working Capital Finance Investments		XXX			0.0000		0.0037		0.0037	
82.		NAIC 2 Working Capital Finance Investments		XXX			0.0000		0.0120		0.0120	
83.		Other Invested Assets - Schedule BA		XXX			0.0000		0.1300		0.1300	
84.		Other Short-Term Invested Assets - Schedule DA		XXX			0.0000		0.1300		0.1300	
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)	134,444,340			134,444,340	XXX	398,172	XXX	7,726,601	XXX	8,175,716

(a) Times the company's weighted average portfolio beta (Minimum .10, Maximum .20).
 (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.

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

ASSET VALUATION RESERVE (Continued)

BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS REPLICATIONS (SYNTHETIC) ASSETS

1	2	3	4	5	6	7	8	9
RSAT Number	Type	CUSIP	Description of Asset(s)	NAIC Designation or Other Description of Asset	Value of Asset	AVR Basic Contribution	AVR Reserve Objective	AVR Maximum Reserve
R			WELLS FARGO BANK NA	1				
CN		026874-CY-1	AMERICAN INT'L GROUP	1	4,997,853	1,999	11,495	14,994
CN		127387-AL-2	CADENCE DESIGN SYSTEMS INC	1	9,972,120	3,989	22,936	29,916
CN		29379V-BH-5	ENTERPRISE PRODUCTS OPER	1	4,985,423	1,994	11,466	14,956
R			GENERAL ELECTRIC CO	1				
CN		61166W-AN-1	MONSANTO	1	5,007,645	2,003	11,518	15,023
CN		61166W-AN-1	MONSANTO	1	2,003,303	801	4,608	6,010
CN		91324P-CQ-3	UNITED HEALTH GROUP	1	11,998,560	4,799	27,597	35,996
R			GOLDMAN SACHS GROUP INC	1				
CN		31677A-AB-0	FIFTH THIRD BANK	1	9,991,614	3,997	22,981	29,975
CN		46625H-NJ-5	JP MORGAN CHASE & CO	1	3,990,198	1,596	9,177	11,971
R			JPMORGAN CHASE & CO	1				
CN		260543-CK-7	DOW CHEMICAL COMPANY	1	4,894,949	1,958	11,258	14,685
CN		29379V-AW-3	ENTERPRISE PRODUCTS OPER	1	9,958,679	3,983	22,905	29,876
CN		375558-BG-7	GILEAD SCIENCES INC	1	998,319	399	2,296	2,995
CN		375558-BG-7	GILEAD SCIENCES INC	1	999,041	400	2,298	2,997
CN		68389X-AV-7	ORACLE CORPORATION	1	9,996,476	3,999	22,992	29,989
CN		92976G-AG-6	WACHOVIA BANK NA	1	9,845,413	3,938	22,644	29,536
R			MCDONALD'S CORP	2				
CN		00205G-AA-5	APT PIPELINES LTD	2	4,975,671	9,454	28,859	44,781
CN		46131N-AD-6	INVERSIONES CMPC SA	2	4,973,320	9,449	28,845	44,760
R			TEXTRON INC	2				
CN		096630-AF-5	BOARDWALK PIPELINES LP	2	5,078,198	9,649	29,454	45,704
CN		124857-AQ-6	CBS CORP	2	9,854,665	18,724	57,157	88,692
R			CITIGROUP INC	2				
CN		010392-EK-0	ALABAMA POWER CO	2	4,997,580	9,495	28,986	44,978
CN		097023-AW-5	BOEING COMPANY	2	4,988,148	9,477	28,931	44,893
CN		505588-BD-4	LACLEDE GAS	2	4,997,405	9,495	28,985	44,977
CN		581557-AX-3	MCKESSON HBCO, INC	2	4,997,414	9,495	28,985	44,977
R			BANK OF AMERICA CORP	1				
CN		125896-BE-9	CMS ENERGY CORP	1	1,997,075	799	4,593	5,991
CN		402740-AB-0	GULFSTREAM NATURAL GAS	1	4,924,663	1,970	11,327	14,774
CN		754907-AA-1	RAYONIER INC	1	5,042,814	2,017	11,598	15,128
R			METLIFE INC	1				
CN		127055-AK-7	CABOT CORP	1	1,994,917	798	4,588	5,985
R			METLIFE INC	1				
CN		46625H-JH-4	JP MORGAN CHASE & CO	1	4,779,958	1,912	10,994	14,340
R			AMERICAN INTL GROUP	2				
CN		151020-AJ-3	CELGENE CORP	2	4,983,321	9,468	28,903	44,850
CN		46128M-AF-8	INVERSIONES CMPC SA	2	4,977,783	9,458	28,871	44,800
R			GE CAPITAL	1				
CN		695156-AQ-2	PACKAGING CORP OF AMERICA	1	9,983,245	3,993	22,961	29,950
CN		00206R-EW-8	AT&T INC	1	7,575,603	3,030	17,424	22,727
CN		98978V-AK-9	ZOETIS	1	2,003,810	802	4,609	6,011
R			JOHNSON & JOHNSON	1				
CN		092113-AL-3	BLACK HILLS POWER INC	1	4,987,386	1,995	11,471	14,962
CN		225433-AC-5	CREDIT SUISSE GP FUN LTD	1	2,987,397	1,195	6,871	8,962
CN		340711-AW-0	FLORIDA GAS TRANSMISSION	1	5,031,255	2,013	11,572	15,094
CN		50540R-AQ-5	LABORATORY CORP OF AMER	1	2,010,921	804	4,625	6,033
CN		50540R-AQ-5	LABORATORY CORP OF AMER	1	3,013,648	1,205	6,931	9,041
CN		60856B-AC-8	MOLEX ELECTRONICS TECH	1	2,003,001	801	4,607	6,009
CN		60856B-AC-8	MOLEX ELECTRONICS TECH	1	4,015,316	1,606	9,235	12,046
R			MET LIFE GLOB FUNDING I	1				
CN		960386-AL-4	WESTINGHOUSE AIRBRAKE CO	1	9,996,940	3,999	22,993	29,991
CN		960386-AL-4	WESTINGHOUSE AIRBRAKE CO	1	4,032,210	1,613	9,274	12,097
CN		960386-AL-4	WESTINGHOUSE AIRBRAKE CO	1	2,010,777	804	4,625	6,032
CN		960386-AL-4	WESTINGHOUSE AIRBRAKE CO	1	1,006,914	403	2,316	3,021
CN		960386-AL-4	WESTINGHOUSE AIRBRAKE CO	1	1,006,914	403	2,316	3,021

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

ASSET VALUATION RESERVE (Continued)

BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS REPLICATIONS (SYNTHETIC) ASSETS

1 RSAT Number	2 Type	3 CUSIP	4 Description of Asset(s)	5 NAIC Designation or Other Description of Asset	6 Value of Asset	7 AVR Basic Contribution	8 AVR Reserve Objective	9 AVR Maximum Reserve
	CN	960386-AL-4	WESTINGHOUSE AIRBRAKE CO	1	1,007,981	403	2,318	3,024
	R		ANHEUSER-BUSCH INBEV NV	1				
	CN	834423-AB-1	SOLVAY FINANCE (AMERICA)	1	3,997,076	1,599	9,193	11,991
	R		GOLDMAN SACHS GROUP INC	1				
	CN	67103H-AE-7	O'REILLY AUTOMOTIVE INC	1	7,992,693	3,197	18,383	23,978
	CN	78409V-AK-0	S&P GLOBAL INC	1	3,004,278	1,202	6,910	9,013
	CN	78409V-AK-0	S&P GLOBAL INC	1	3,004,668	1,202	6,911	9,014
	CN	89400P-AE-3	TRANSURBAN FINANCE CO	1	6,030,607	2,412	13,870	18,092
	CN	960386-AL-4	WESTINGHOUSE AIRBRAKE CO	1	1,007,981	403	2,318	3,024
	R		WALGREENS BOOTS ALLIANCE	2				
	CN	834423-AB-1	SOLVAY FINANCE (AMERICA)	2	14,985,120	28,472	86,914	134,866
0199999. Subtotal Default Component - Other Than Mortgage					265,898,267	211,072	855,896	1,216,547
0599999 - Total					265,898,267	211,072	855,896	1,216,547

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

SCHEDULE F

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

1	2	3	4	5	6	7	8
Contract Numbers	Claim Numbers	State of Residence of Claimant	Year of Claim for Death or Disability	Amount Claimed	Amount Paid During the Year	Amount Resisted Dec. 31 of Current Year	Why Compromised or Resisted
201347060	002101430	TX	2016	36,879	41,961		Settled
247394270	001987230	NC	2016	15,171	13,506		Settled
330271600	1958094	OH	2015	32,237	32,344		Settled
0199999. Death Claims - Ordinary				84,287	87,812		XXX
52150995501	5177568	TN	2009	71,384	0		Closed
0307580230	001080032	LA	2010	10,000	0		Dismissed without Prejudice
0399999. Death Claims - Group				81,384	0		XXX
0599999. Death Claims - Disposed Of				165,671	87,812		XXX
1099999. Additional Accidental Death Benefits Claims - Disposed Of							XXX
1599999. Disability Benefits Claims - Disposed Of							XXX
2099999. Matured Endowments Claims - Disposed Of							XXX
2599999. Annuities with Life Contingency Claims - Disposed Of							XXX
2699999. Claims Disposed of During Current Year				165,671	87,812		XXX
08734137101	65191	NC	2017			39,000	Competing beneficiaries
63516931		TN	2016			50,000	Competing beneficiaries
A3106924		TN	2016			100,000	Competing beneficiaries
2999999. Death Claims - Group						189,000	XXX
3199999. Death Claims - Resisted						189,000	XXX
3699999. Additional Accidental Death Benefits Claims - Resisted							XXX
4199999. Disability Benefits Claims - Resisted							XXX
4699999. Matured Endowments Claims - Resisted							XXX
5199999. Annuities with Life Contingencies Claims - Resisted							XXX
5299999. Claims Resisted During Current Year						189,000	XXX
5399999 - Totals				165,671	87,812	189,000	XXX

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE PROVIDENT LIFE AND ACCIDENT 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	505,229,775	XXX	4,717,454	XXX		XXX	.85	XXX	276,822,485	XXX	219,180,984	XXX	803,170	XXX	3,705,523	XXX	.73	XXX
2. Premiums earned	507,090,978	XXX	4,699,365	XXX		XXX	1.196	XXX	277,487,940	XXX	219,579,275	XXX	804,093	XXX	4,519,017	XXX	.91	XXX
3. Incurred claims	99,895,123	19.7	7,991,034	170.0			(4,070)	(340.3)	(4,690,151)	(1.7)	96,328,955	43.9	577,497	71.8	(307,518)	(6.8)	(623)	(686.1)
4. Cost containment expenses	13,840,091	2.7	89,806	1.9					12,704,479	4.6	934,685	0.4	4,326	0.5	106,780	2.4	.15	16.5
5. Incurred claims and cost containment expenses (Lines 3 and 4)	113,735,214	22.4	8,080,840	172.0			(4,070)	(340.3)	8,014,328	2.9	97,263,640	44.3	581,823	72.4	(200,738)	(4.4)	(608)	(669.7)
6. Increase in contract reserves	6,303,336	1.2	(959,728)	(20.4)					(34,881,278)	(12.6)	42,455,779	19.3	(311,370)	(38.7)	(67)	0.0		
7. Commissions (a)	11,958,613	2.4	234,810	5.0			(3,155)	(263.8)	(10,957,156)	(3.9)	22,287,406	10.2	279,979	34.8	118,078	2.6	(1,349)	(1,485.1)
8. Other general insurance expenses	120,982,546	23.9	979,432	20.8			1,819	152.1	75,140,333	27.1	43,813,701	20.0	179,058	22.3	868,082	19.2	121	133.8
9. Taxes, licenses and fees	22,495,145	4.4	147,403	3.1			247	20.6	13,982,268	5.0	8,150,229	3.7	29,126	3.6	185,854	4.1	.17	18.4
10. Total other expenses incurred	155,436,303	30.7	1,361,645	29.0			(1,089)	(91.1)	78,165,445	28.2	74,251,336	33.8	488,163	60.7	1,172,014	25.9	(1,210)	(1,333.0)
11. Aggregate write-ins for deductions	194,960,200	38.4	1,261,435	26.8			5,181	433.2	194,705,929	70.2	(1,418,927)	(0.6)	(34)	0.0	405,974	9.0	.641	.705.9
12. Gain from underwriting before dividends or refunds	36,655,924	7.2	(5,044,827)	(107.4)			1,174	98.2	31,483,516	11.3	7,027,447	3.2	45,512	5.7	3,141,834	69.5	1,268	1,396.7
13. Dividends or refunds																		
14. Gain from underwriting after dividends or refunds	36,655,924	7.2	(5,044,827)	(107.4)			1,174	98.2	31,483,516	11.3	7,027,447	3.2	45,512	5.7	3,141,834	69.5	1,268	1,396.7
DETAILS OF WRITE-INS																		
1101. Reserve adjustments on modco reinsurance	195,764,084	38.6	327,816	7.0			5,181	433.2	195,157,030	70.3	(132,558)	(0.1)			405,974	9.0	.641	.705.9
1102. Other income	(1,499,144)	(0.3)	(9,934)	(0.2)					(995,043)	(0.4)	(494,133)	(0.2)	(34)	0.0				
1103. Transfer on account of group package policies	695,227	0.1	943,553	20.1					543,921	0.2	(792,247)	(0.4)						
1198. Summary of remaining write-ins for Line 11 from overflow page	31	0.0							20	0.0	11	0.0						
1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)	194,960,200	38.4	1,261,435	26.8			5,181	433.2	194,705,929	70.2	(1,418,927)	(0.6)	(34)	0.0	405,974	9.0	.641	.705.9

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

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT (Continued)

	1	2	3	4	Other Individual Contracts				
					5	6	7	8	9
	Total	Group Accident and Health	Credit Accident and Health (Group and Individual)	Collectively Renewable	Non-Cancelable	Guaranteed Renewable	Non-Renewable for Stated Reasons Only	Other Accident Only	All Other
PART 2. - RESERVES AND LIABILITIES									
A. Premium Reserves:									
1. Unearned premiums	34,651,939	44,009		2,577	26,797,637	7,797,622	8,483	1,440	171
2. Advance premiums	9,940,551	20,617		140	8,403,630	1,499,151	16,985	28	
3. Reserve for rate credits	884,343	884,343							
4. Total premium reserves, current year	45,476,833	948,969		2,717	35,201,267	9,296,773	25,468	1,468	171
5. Total premium reserves, prior year	51,651,349	932,163		3,688	39,594,023	10,208,577	26,357	886,339	202
6. Increase in total premium reserves	(6,174,516)	16,806		(971)	(4,392,756)	(911,804)	(889)	(884,871)	(31)
B. Contract Reserves:									
1. Additional reserves (a)	1,139,850,114	53,553,131			451,662,855	631,899,840	2,728,613	5,675	
2. Reserve for future contingent benefits									
3. Total contract reserves, current year	1,139,850,114	53,553,131			451,662,855	631,899,840	2,728,613	5,675	
4. Total contract reserves, prior year	1,133,546,778	54,512,859			486,544,133	589,444,061	3,039,983	5,742	
5. Increase in contract reserves	6,303,336	(959,728)			(34,881,278)	42,455,779	(311,370)	(67)	
C. Claim Reserves and Liabilities:									
1. Total current year	3,592,018,111	22,409,314		63,031	3,365,421,697	169,550,105	1,183,968	33,389,625	371
2. Total prior year	3,714,887,402	20,199,493		67,101	3,489,702,321	167,014,081	1,353,688	36,549,724	994
3. Increase	(122,869,291)	2,209,821		(4,070)	(124,280,624)	2,536,024	(169,720)	(3,160,099)	(623)

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	651,318,898	4,635,758		14,332	596,721,907	46,496,073	538,909	2,911,919	
1.2 On claims incurred during current year	60,420,701	826,983			11,895,947	47,463,881	208,308		25,582
2. Claim reserves and liabilities, December 31, current year:									
2.1 On claims incurred prior to current year	3,288,130,768	15,131,038		59,856	3,115,253,483	123,320,784	976,031	33,389,483	93
2.2 On claims incurred during current year	303,887,343	7,278,276		3,175	250,168,214	46,229,321	207,937	142	278
3. Test:									
3.1 Lines 1.1 and 2.1	3,939,449,666	19,766,796		74,188	3,711,975,390	169,816,857	1,514,940	36,301,402	93
3.2 Claim reserves and liabilities, December 31, prior year	3,714,887,402	20,199,493		67,101	3,489,702,321	167,014,081	1,353,688	36,549,724	994
3.3 Line 3.1 minus Line 3.2	224,562,264	(432,697)		7,087	222,273,069	2,802,776	161,252	(248,322)	(901)

Part 3, line 1.1, columns 1 and 2 decreased for claims paid assumed under a modified coinsurance treaty of \$550,635. Part 3, Line 1.1, columns 1, 2, 4, 5, 6, and 8 increased \$481,314,298, \$232,163, \$14,332, \$480,851,084, \$157,381, and \$59,338, respectively for modified coinsurance ceded claims paid. Part 3, Line 1.2, columns 1, 5, 6, and 9 increased \$8,211,521, \$8,176,297, \$9,643 and \$25,582 respectively for modified coinsurance ceded claims paid.

PART 4. - REINSURANCE									
A. Reinsurance Assumed:									
1. Premiums written	8,927,208	1,217,663			7,695,671	13,873			
2. Premiums earned	9,002,806	1,232,954			7,755,969	13,882			
3. Incurred claims	14,601,978	699,212			13,889,761	13,006			
4. Commissions	451,906	174,990			276,423	492			
B. Reinsurance Ceded:									
1. Premiums written	225,975,417	31,873		10,717	214,620,179	10,145,113		1,166,829	705
2. Premiums earned	226,234,565	31,873		10,717	214,665,402	10,359,038		1,166,829	705
3. Incurred claims	599,943,319	6,951,438		14,332	586,576,913	3,078,006		3,297,048	25,582
4. Commissions	95,378,142	30,181		4,626	88,730,482	5,315,975		1,295,509	1,369

Part 4, Line A2 and A3 do not include the change in modified coinsurance reserves on business for which the ceding company holds the reserves. Part 4, Lines B2 and B3 do not include the change in modified coinsurance reserves held by the Company.

(a) Includes \$ 8,400,000 premium deficiency reserve.

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY
SCHEDULE H - PART 5 - HEALTH CLAIMS

	1 Medical	2 Dental	3 Other	4 Total
A. Direct:				
1. Incurred Claims			685,236,464	685,236,464
2. Beginning Claim Reserves and Liabilities			4,692,071,410	4,692,071,410
3. Ending Claim Reserves and Liabilities			4,615,086,820	4,615,086,820
4. Claims Paid			762,221,054	762,221,054
B. Assumed Reinsurance:				
5. Incurred Claims.....	154,618		14,447,361	14,601,978
6. Beginning Claim Reserves and Liabilities	496,322		99,596,528	100,092,850
7. Ending Claim Reserves and Liabilities	490,997		95,155,544	95,646,540
8. Claims Paid	159,943		18,888,345	19,048,288
C. Ceded Reinsurance:				
9. Incurred Claims.....			599,943,319	599,943,319
10. Beginning Claim Reserves and Liabilities			1,133,694,475	1,133,694,475
11. Ending Claim Reserves and Liabilities			1,164,010,183	1,164,010,183
12. Claims Paid			569,627,611	569,627,611
D. Net:				
13. Incurred Claims.....	154,618		99,740,506	99,895,123
14. Beginning Claim Reserves and Liabilities	496,322		3,657,973,464	3,658,469,785
15. Ending Claim Reserves and Liabilities	490,997		3,546,232,181	3,546,723,178
16. Claims Paid	159,943		211,481,788	211,641,731
E. Net Incurred Claims and Cost Containment Expenses:				
17. Incurred Claims and Cost Containment Expenses	154,618		113,580,597	113,735,215
18. Beginning Reserves and Liabilities	496,322		3,657,973,464	3,658,469,785
19. Ending Reserves and Liabilities	490,997		3,546,232,181	3,546,723,178
20. Paid Claims and Cost Containment Expenses	159,943		225,321,880	225,481,822

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

SCHEDULE S - PART 1 - SECTION 1

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

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Reinsured	5 Domiciliary Jurisdiction	6 Type of Reinsurance Assumed	7 Amount of In Force at End of Year	8 Reserve	9 Premiums	10 Reinsurance Payable on Paid and Unpaid Losses	11 Modified Coinsurance Reserve	12 Funds Withheld Under Coinsurance
0399999. Total General Account - U.S. Affiliates											
0699999. Total General Account - Non-U.S. Affiliates											
0799999. Total General Account - Affiliates											
60895	35-0145825	01/01/1981	American United Life Insurance Company	IN	YRT/I	277,976	8,513	15,554	100		
68276	48-1024691	01/01/1981	Employers Reassurance Corporation	KS	DIS/I		1,489				
68276	48-1024691	01/01/1981	Employers Reassurance Corporation	KS	YRT/I	399,658	17,786	14,044	100		
63665	43-0285930	01/01/1984	General American Life Insurance Company	MO	YRT/I	1,664,297	34,128	52,885	100		
65676	35-0472300	03/01/1977	Lincoln National Life Insurance Company	IN	YRT/I			(138)	200		
86231	39-0989781	05/01/1987	Transamerica Life Insurance Company	IA	CO/G	1,358,510	988,318	19,322			
62596	31-0252460	01/01/1987	Union Fidelity Life Insurance Company	KS	CO/I	14,103,816	3,019,702	182,161	4,300		
62596	31-0252460	01/01/1987	Union Fidelity Life Insurance Company	KS	DIS/I		47,374				
0899999. General Account - U.S. Non-Affiliates											
00000	AA-1560071	05/01/2004	RBC Life Insurance Company	CAN	MCO/G	17,804,257	4,117,310	283,829	4,800		
0999999. General Account - Non-U.S. Non-Affiliates											
1099999. Total General Account - Non-Affiliates											
1199999. Total General Account											
1499999. Total Separate Accounts - U.S. Affiliates											
1799999. Total Separate Accounts - Non-U.S. Affiliates											
1899999. Total Separate Accounts - Affiliates											
2199999. Total Separate Accounts - Non-Affiliates											
2299999. Total Separate Accounts											
2399999. Total U.S. (Sum of 0399999, 0899999, 1499999 and 1999999)											
2499999. Total Non-U.S. (Sum of 0699999, 0999999, 1799999 and 2099999)											
9999999 - Totals											

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE PROVIDENT LIFE AND ACCIDENT 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	2	3	4	5	6	7	8	9	10	11	12
NAIC Company Code	ID Number	Effective Date	Name of Reinsured	Domiciliary Jurisdiction	Type of Reinsurance Assumed	Premiums	Unearned Premiums	Reserve Liability Other Than for Unearned Premiums	Reinsurance Payable on Paid and Unpaid Losses	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
0399999. Total - U.S. Affiliates											
0699999. Total - Non-U.S. Affiliates											
0799999. Total - Affiliates											
70939	13-2611847	08/01/2000	Gerber Life Insurance Company	NY	CO/G	61,926	8,644		490,997		
65838	01-0233346	08/01/1992	John Hancock Life Insurance Company USA	MI	CO/I	7,709,544	299,047	100,095,558	3,255,914		
0899999. U.S. Non-Affiliates											
00000	AA-1560071	05/01/2004	RBC Life Insurance Company	CAN	MCO/G	1,155,738	307,691	100,095,558	3,746,911		
0999999. Non-U.S. Non-Affiliates											
1099999. Total - Non-Affiliates											
1199999. Total U.S. (Sum of 0399999 and 0899999)											
1299999. Total Non-U.S. (Sum of 0699999 and 0999999)											
						1,155,738			60,288	5,927,800	
						1,155,738			60,288	5,927,800	
						8,927,208	307,691	100,095,558	3,807,199	5,927,800	
						7,771,470	307,691	100,095,558	3,746,911		
						1,155,738			60,288	5,927,800	
9999999 - Totals											
						8,927,208	307,691	100,095,558	3,807,199	5,927,800	

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE PROVIDENT LIFE AND ACCIDENT 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														
60488	25-0598210	04/30/1998	American General Life Insurance Company	TX	ACO/G	FL		208,890	992,610					
60488	25-0598210	04/30/1998	American General Life Insurance Company	TX	ACO/I	FL		43,071,528	44,217,030					
60895	35-0145825	07/01/1983	American United Life Insurance Company	IN	CO/I	QL	125,400	12,710	12,723		24,403			
60895	35-0145825	07/01/1983	American United Life Insurance Company	IN	YRT/I	QL	2,808,983	284,703	285,004		55,665			
37273	39-1338397	01/01/2016	Axis Insurance Company	IL	CAT/G	QL					426			
37273	39-1338397	01/01/2016	Axis Insurance Company	IL	CAT/G	QL					801			
37273	39-1338397	01/01/2016	Axis Insurance Company	IL	CAT/G	QL					464			
37273	39-1338397	01/01/2016	Axis Insurance Company	IL	CAT/G	QL					1,173			
80659	38-0397420	07/01/1983	Canada Life Assurance Company	MI	CO/I	QL	486,034	26,669	10,482		14,723			
80659	38-0397420	07/01/1983	Canada Life Assurance Company	MI	YRT/I	QL	34,767,162	712,457	749,795		1,057,917			
80659	38-0397420	11/01/1983	Canada Life Assurance Company	MI	YRT/I	QL	9,109	312	361		347			
80659	38-0397420	03/15/1987	Canada Life Assurance Company	MI	YRT/I	QL	425,000	9,089	8,143		6,123			
62308	06-0303370	07/10/1938	Connecticut General Life Insurance Company	CT	CO/I	QL			4,456		5			
86258	13-2572994	11/01/1973	General Re Life Corporation	CT	CO/I	QL	4,975	4,971	5,657		3,520			
86258	13-2572994	11/01/1973	General Re Life Corporation	CT	YRT/I	QL	116,291	444	242		6,479			
86258	13-2572994	07/01/1993	General Re Life Corporation	CT	YRT/I	QL	1,036,026	18,122	17,016		56,781			
65056	38-1659835	07/01/2000	Jackson National Life Insurance Company	MI	CO/I	QL	6,804,667,847	4,195,179,829	4,105,435,106		39,042,545			
65056	38-1659835	07/01/2000	Jackson National Life Insurance Company	MI	DIS/I	QL		9,272,987	9,129,064					
65056	38-1659835	10/01/2006	Jackson National Life Insurance Company	MI	CO/I	QL	58,197,196	9,921,892	9,932,380		583,816			
65056	38-1659835	10/01/2006	Jackson National Life Insurance Company	MI	DIS/I	QL		1,033,772	1,023,180					
65676	35-0472300	01/01/1955	Lincoln National Life Insurance Company	IN	CO/I	QL	416,495	37,006	35,614		1,444			
65676	35-0472300	01/01/1971	Lincoln National Life Insurance Company	IN	YRT/I	QL	1,197,505	25,040	27,614		32,764			
65676	35-0472300	07/01/1981	Lincoln National Life Insurance Company	IN	YRT/I	QL	46,769	2,668	2,384		10,056			
65676	35-0472300	10/01/1982	Lincoln National Life Insurance Company	IN	YRT/I	QL	711,272	20,441	19,216		33,506			
65676	35-0472300	06/25/1989	Lincoln National Life Insurance Company	IN	YRT/I	QL	7,266,240	144,512	161,803		400,585			
66346	58-0828824	01/01/1964	Munich American Reassurance Company	GA	YRT/I	QL	30,000	9,588	6,997		13,232			
66346	58-0828824	04/01/1985	Munich American Reassurance Company	GA	YRT/I	QL	24,102	1,671	31,665		23,118			
66346	58-0828824	09/01/1985	Munich American Reassurance Company	GA	YRT/I	QL	398,614	7,869	8,094		6,555			
66346	58-0828824	07/01/1993	Munich American Reassurance Company	GA	YRT/I	QL	1,017,051	20,397	19,619		36,567			
66346	58-0828824	02/15/1995	Munich American Reassurance Company	GA	YRT/I	QL	18,659,929	182,595	213,005		98,927			
66346	58-0828824	04/01/2003	Munich American Reassurance Company	GA	YRT/I	QL	267,651,304	1,125,193	1,126,653		1,227,293			
66346	58-0828824	04/01/2003	Munich American Reassurance Company	GA	CO/I	QL	4,032,000	61,024	61,355		41,716			
10227	13-4924125	01/01/2016	Munich Reinsurance America, Inc	DE	CAT/G	QL					1,705			
10227	13-4924125	01/01/2016	Munich Reinsurance America, Inc	DE	CAT/G	QL					1,271			
10227	13-4924125	01/01/2016	Munich Reinsurance America, Inc	DE	CAT/G	QL					1,545			
10227	13-4924125	01/01/2016	Munich Reinsurance America, Inc	DE	CAT/G	QL					521			
88099	75-1608507	04/01/1996	Optimum Re Insurance Company	TX	YRT/I	QL	5,152,473	91,955	94,041		97,569			
67105	41-0451140	06/01/1998	Reliastar Life Insurance Company	MN	CO/I	QL	2,520,000				10,490			
93572	43-1235868	01/01/1983	RGA Reinsurance Company	MO	CO/I	QL	219,355	7,083	4,863		9,658			
93572	43-1235868	01/01/1983	RGA Reinsurance Company	MO	YRT/I	QL	32,086,463	847,878	864,604		1,529,792			
93572	43-1235868	09/01/1985	RGA Reinsurance Company	MO	YRT/I	QL	1,018,566	31,743	30,683		1,692			
93572	43-1235868	09/01/1986	RGA Reinsurance Company	MO	CO/I	QL	5,804,044	323,830	321,346		167,365			
93572	43-1235868	09/01/1986	RGA Reinsurance Company	MO	YRT/I	QL	16,692,048	931,315	924,169		444,979			
93572	43-1235868	03/15/1987	RGA Reinsurance Company	MO	YRT/I	QL	1,412,500	34,586	31,000		33,803			
93572	43-1235868	07/01/1989	RGA Reinsurance Company	MO	YRT/I	QL	4,112,526	70,116	85,388		87,273			
93572	43-1235868	07/01/1989	RGA Reinsurance Company	MO	YRT/I	QL	6,281,088	110,639	115,167		132,716			
93572	43-1235868	02/15/1995	RGA Reinsurance Company	MO	YRT/I	QL	186,686,477	1,845,084	1,786,159		449,535			
87017	62-1003368	08/16/1979	SCOR Global Life Reinsurance Company of Delaware	DE	CO/I	QL	39,999,088	12,357,293	12,380,071		401,124			
87572	23-2038295	07/01/1981	Scottish Re US Inc.	DE	YRT/I	QL	46,769	2,668	2,384		2,824			
87572	23-2038295	07/01/1981	Scottish Re US Inc.	DE	YRT/I	QL	36,925	714	690		1,900			
87572	23-2038295	07/01/1983	Scottish Re US Inc.	DE	CO/I	QL	555,845	11,421	11,648		19,757			
87572	23-2038295	07/01/1983	Scottish Re US Inc.	DE	YRT/I	QL	42,777,611	878,947	896,437		1,306,388			
87572	23-2038295	11/01/1983	Scottish Re US Inc.	DE	YRT/I	QL	522,708	17,197	16,320		27,333			

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE PROVIDENT LIFE AND ACCIDENT 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		
87572	23-2038295	03/15/1987	Scottish Re US Inc.	DE	YRT/I	QL	712,500	10,211	9,167	9,573				
87572	23-2038295	07/01/1989	Scottish Re US Inc.	DE	YRT/I	QL	5,892,040	104,729	105,270	151,183				
87572	23-2038295	11/15/1994	Scottish Re US Inc.	DE	YRT/I	QL	24,934,440	879,567	806,305	366,581				
87572	23-2038295	02/15/1995	Scottish Re US Inc.	DE	YRT/I	QL	677,500	1,763	1,923	3,827				
87572	23-2038295	02/01/1996	Scottish Re US Inc.	DE	YRT/I	QL	188,170,772	1,940,847	2,746,702	504,987				
87572	23-2038295	04/01/1996	Scottish Re US Inc.	DE	YRT/I	QL	1,362,173	10,646	9,729	15,609				
68713	84-0499703	09/01/1985	Security Life of Denver Insurance Company	CO	YRT/I	QL	398,613	7,869	8,094	6,112				
68713	84-0499703	02/01/1995	Security Life of Denver Insurance Company	CO	YRT/I	QL	227,500	752	988	(63)				
68713	84-0499703	02/01/1996	Security Life of Denver Insurance Company	CO	YRT/I	QL	4,279,299	22,459	48,199	14,899				
38776	13-2997499	01/01/2016	Sirius America Insurance Company	NY	CAT/G	QL				95				
38776	13-2997499	01/01/2016	Sirius America Insurance Company	NY	CAT/G	QL				64				
38776	13-2997499	01/01/2016	Sirius America Insurance Company	NY	CAT/G	QL				77				
38776	13-2997499	01/01/2016	Sirius America Insurance Company	NY	CAT/G	QL				130				
82627	06-0839705	01/01/1971	Swiss Re Life & Health America Inc	MO	YRT/I	QL	824,904	37,755	34,182	27,544				
82627	06-0839705	12/01/1973	Swiss Re Life & Health America Inc	MO	YRT/I	QL	4,720	56	53	83				
82627	06-0839705	07/01/1983	Swiss Re Life & Health America Inc	MO	YRT/I	QL	18,389,414	458,240	479,328	580,153				
82627	06-0839705	11/01/1983	Swiss Re Life & Health America Inc	MO	YRT/I	QL	60,996	902	849	986				
82627	06-0839705	02/01/1988	Swiss Re Life & Health America Inc	MO	YRT/I	QL	2,130,468	40,721	38,332	88,448				
82627	06-0839705	07/01/1989	Swiss Re Life & Health America Inc	MO	YRT/I	QL	3,012,971	134,600	119,630	129,317				
82627	06-0839705	07/01/1993	Swiss Re Life & Health America Inc	MO	YRT/I	QL	610,435	10,024	9,888	21,717				
82627	06-0839705	02/15/1995	Swiss Re Life & Health America Inc	MO	YRT/I	QL	2,413,720	22,593	25,749	25,114				
82627	06-0839705	04/01/1996	Swiss Re Life & Health America Inc	MO	YRT/I	QL	4,669,523	53,163	67,186	67,362				
82627	06-0839705	04/01/1996	Swiss Re Life & Health America Inc	MO	YRT/I	QL	1,661,201	15,530	15,633	22,540				
86231	39-0989781	03/01/1981	Transamerica Life Insurance Company	IA	YRT/I	QL	1,723,407	38,582	36,092	69,071				
86231	39-0989781	02/15/1995	Transamerica Life Insurance Company	IA	YRT/I	QL	142,611,221	1,563,875	1,518,012	355,413				
19453	13-5616275	01/01/2016	Transatlantic Reinsurance Company	NY	CAT/G	QL				1,089				
19453	13-5616275	01/01/2016	Transatlantic Reinsurance Company	NY	CAT/G	QL				89				
19453	13-5616275	01/01/2016	Transatlantic Reinsurance Company	NY	CAT/G	QL				155				
19453	13-5616275	01/01/2016	Transatlantic Reinsurance Company	NY	CAT/G	QL				1,433				
62596	31-0252460	01/01/1987	Union Fidelity Life Insurance Company	KS	MCO/I	QL	7,051,908			91,081			1,531,060	
16535	36-4233459	01/01/2016	Zurich American Insurance Company	NY	CAT/G	QL				853				
16535	36-4233459	01/01/2016	Zurich American Insurance Company	NY	CAT/G	QL				953				
16535	36-4233459	01/01/2016	Zurich American Insurance Company	NY	CAT/G	QL				773				
16535	36-4233459	01/01/2016	Zurich American Insurance Company	NY	CAT/G	QL				1,772				
0899999. General Account - Authorized U.S. Non-Affiliates							7,961,839,515	4,284,313,731	4,197,183,548	50,069,208			1,531,060	
00000	AA-1120337	01/01/2016	Aspen Insurance UK Limited	GBR	CAT/G	QL				1,303				
00000	AA-1126033	01/01/2016	Lloyd's Syndicate Number 0033	GBR	CAT/G	QL				618				
00000	AA-1126033	01/01/2016	Lloyd's Syndicate Number 0033	GBR	CAT/G	QL				1,042				
00000	AA-1126382	01/01/2016	Lloyd's Syndicate Number 0382 (Acappella Consortium 9938)	GBR	CAT/G	QL				113				
00000	AA-1126382	01/01/2016	Lloyd's Syndicate Number 0382 (Acappella Consortium 9938)	GBR	CAT/G	QL				101				
00000	AA-1126382	01/01/2016	Lloyd's Syndicate Number 0382 (Acappella Consortium 9938)	GBR	CAT/G	QL				138				
00000	AA-1126382	01/01/2016	Lloyd's Syndicate Number 0382 (Acappella Consortium)	GBR	CAT/G	QL				113				
00000	AA-1126510	01/01/2016	Lloyd's Syndicate Number 0510	GBR	CAT/G	QL				568				
00000	AA-1126510	01/01/2016	Lloyd's Syndicate Number 0510	GBR	CAT/G	QL				191				
00000	AA-1126510	01/01/2016	Lloyd's Syndicate Number 0510	GBR	CAT/G	QL				232				
00000	AA-1126510	01/01/2016	Lloyd's Syndicate Number 0510	GBR	CAT/G	QL				391				
00000	AA-1127084	01/01/2016	Lloyd's Syndicate Number 1084 (Acappella Consortium 9938)	GBR	CAT/G	QL				15				
00000	AA-1127084	01/01/2016	Lloyd's Syndicate Number 1084 (Acappella Consortium 9938)	GBR	CAT/G	QL				10				
00000	AA-1127084	01/01/2016	Lloyd's Syndicate Number 1084 (Acappella Consortium 9938)	GBR	CAT/G	QL				25				
00000	AA-1127084	01/01/2016	Lloyd's Syndicate Number 1084 (Acappella Consortium)	GBR	CAT/G	QL				94				
00000	AA-1127200	01/01/2016	Lloyd's Syndicate Number 1200	GBR	CAT/G	QL				379				
00000	AA-1127200	01/01/2016	Lloyd's Syndicate Number 1200	GBR	CAT/G	QL				254				
00000	AA-1127200	01/01/2016	Lloyd's Syndicate Number 1200	GBR	CAT/G	QL				155				
00000	AA-1127200	01/01/2016	Lloyd's Syndicate Number 1200	GBR	CAT/G	QL				261				
00000	AA-1127206	01/01/2016	Lloyd's Syndicate Number 1206	GBR	CAT/G	QL				284				
00000	AA-1127206	01/01/2016	Lloyd's Syndicate Number 1206	GBR	CAT/G	QL				254				

43.1

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE PROVIDENT LIFE AND ACCIDENT 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			
00000	AA-1127206	01/01/2016	Lloyd's Syndicate Number 1206	GBR	CAT/G	OL				309					
00000	AA-1127206	01/01/2016	Lloyd's Syndicate Number 1206	GBR	CAT/G	OL				521					
00000	AA-1120085	01/01/2016	Lloyd's Syndicate Number 1274 (Acappella Consortium 9938)	GBR	CAT/G	OL				27					
00000	AA-1120085	01/01/2016	Lloyd's Syndicate Number 1274 (Acappella Consortium 9938)	GBR	CAT/G	OL				18					
00000	AA-1120085	01/01/2016	Lloyd's Syndicate Number 1274 (Acappella Consortium 9938)	GBR	CAT/G	OL				45					
00000	AA-1120085	01/01/2016	Lloyd's Syndicate Number 1274 (Acappella Consortium)	GBR	CAT/G	OL				169					
00000	AA-1127861	01/01/2016	Lloyd's Syndicate Number 1861 (ANV Consortium)	GBR	CAT/G	OL				142					
00000	AA-1127861	01/01/2016	Lloyd's Syndicate Number 1861 (ANV Consortium)	GBR	CAT/G	OL				95					
00000	AA-1127861	01/01/2016	Lloyd's Syndicate Number 1861 (ANV Consortium)	GBR	CAT/G	OL				116					
00000	AA-1127861	01/01/2016	Lloyd's Syndicate Number 1861 (ANV Consortium)	GBR	CAT/G	OL				199					
00000	AA-1120064	01/01/2016	Lloyd's Syndicate Number 1919 CVS	GBR	CAT/G	OL				189					
00000	AA-1120064	01/01/2016	Lloyd's Syndicate Number 1919 CVS	GBR	CAT/G	OL				127					
00000	AA-1120064	01/01/2016	Lloyd's Syndicate Number 1919 CVS	GBR	CAT/G	OL				193					
00000	AA-1120064	01/01/2016	Lloyd's Syndicate Number 1919 CVS	GBR	CAT/G	OL				586					
00000	AA-1120103	01/01/2016	Lloyd's Syndicate Number 1967	GBR	CAT/G	OL				237					
00000	AA-1120103	01/01/2016	Lloyd's Syndicate Number 1967	GBR	CAT/G	OL				159					
00000	AA-1120103	01/01/2016	Lloyd's Syndicate Number 1967	GBR	CAT/G	OL				232					
00000	AA-1120103	01/01/2016	Lloyd's Syndicate Number 1967	GBR	CAT/G	OL				391					
00000	AA-1120106	01/01/2016	Lloyd's Syndicate Number 1969 (ANV Consortium)	GBR	CAT/G	OL				35					
00000	AA-1120106	01/01/2016	Lloyd's Syndicate Number 1969 (ANV Consortium)	GBR	CAT/G	OL				24					
00000	AA-1120106	01/01/2016	Lloyd's Syndicate Number 1969 (ANV Consortium)	GBR	CAT/G	OL				29					
00000	AA-1120106	01/01/2016	Lloyd's Syndicate Number 1969 (ANV Consortium)	GBR	CAT/G	OL				50					
00000	AA-1128003	01/01/2016	Lloyd's Syndicate Number 2003	GBR	CAT/G	OL				284					
00000	AA-1128003	01/01/2016	Lloyd's Syndicate Number 2003	GBR	CAT/G	OL				618					
00000	AA-1128003	01/01/2016	Lloyd's Syndicate Number 2003	GBR	CAT/G	OL				175					
00000	AA-1120158	01/01/2016	Lloyd's Syndicate Number 2014 (Acappella Consortium 9938)	GBR	CAT/G	OL				34					
00000	AA-1120158	01/01/2016	Lloyd's Syndicate Number 2014 (Acappella Consortium 9938)	GBR	CAT/G	OL				23					
00000	AA-1120158	01/01/2016	Lloyd's Syndicate Number 2014 (Acappella Consortium 9938)	GBR	CAT/G	OL				56					
00000	AA-1120158	01/01/2016	Lloyd's Syndicate Number 2014 (Acappella Consortium)	GBR	CAT/G	OL				211					
00000	AA-1128987	01/01/2016	Lloyd's Syndicate Number 2987	GBR	CAT/G	OL				237					
00000	AA-1128987	01/01/2016	Lloyd's Syndicate Number 2987	GBR	CAT/G	OL				159					
00000	AA-1128987	01/01/2016	Lloyd's Syndicate Number 2987	GBR	CAT/G	OL				232					
00000	AA-1128987	01/01/2016	Lloyd's Syndicate Number 2987	GBR	CAT/G	OL				391					
00000	AA-1120055	01/01/2016	Lloyd's Syndicate Number 3623	GBR	CAT/G	OL				805					
00000	AA-1120055	01/01/2016	Lloyd's Syndicate Number 3623	GBR	CAT/G	OL				540					
00000	AA-1120055	01/01/2016	Lloyd's Syndicate Number 3623	GBR	CAT/G	OL				657					
00000	AA-1120055	01/01/2016	Lloyd's Syndicate Number 3623	GBR	CAT/G	OL				847					
00000	AA-1126005	01/01/2016	Lloyd's Syndicate Number 4000	GBR	CAT/G	OL				332					
00000	AA-1126005	01/01/2016	Lloyd's Syndicate Number 4000	GBR	CAT/G	OL				286					
00000	AA-1126005	01/01/2016	Lloyd's Syndicate Number 4000	GBR	CAT/G	OL				309					
00000	AA-1126005	01/01/2016	Lloyd's Syndicate Number 4000	GBR	CAT/G	OL				261					
00000	AA-1120075	01/01/2016	Lloyd's Syndicate Number 4020	GBR	CAT/G	OL				189					
00000	AA-1120075	01/01/2016	Lloyd's Syndicate Number 4020	GBR	CAT/G	OL				191					
00000	AA-1120075	01/01/2016	Lloyd's Syndicate Number 4020	GBR	CAT/G	OL				155					
00000	AA-1120075	01/01/2016	Lloyd's Syndicate Number 4020	GBR	CAT/G	OL				261					
00000	AA-1126006	01/01/2016	Lloyd's Syndicate Number 4472 LIB	GBR	CAT/G	OL				284					
00000	AA-1126006	01/01/2016	Lloyd's Syndicate Number 4472 LIB	GBR	CAT/G	OL				356					
00000	AA-1126006	01/01/2016	Lloyd's Syndicate Number 4472 LIB	GBR	CAT/G	OL				386					
00000	AA-1126006	01/01/2016	Lloyd's Syndicate Number 4472 LIB	GBR	CAT/G	OL				847					
00000	AA-1120048	01/01/2016	Lloyd's Syndicate Number 5820 (ANV Consortium)	GBR	CAT/G	OL				107					
00000	AA-1120048	01/01/2016	Lloyd's Syndicate Number 5820 (ANV Consortium)	GBR	CAT/G	OL				72					
00000	AA-1120048	01/01/2016	Lloyd's Syndicate Number 5820 (ANV Consortium)	GBR	CAT/G	OL				87					
00000	AA-1120048	01/01/2016	Lloyd's Syndicate Number 5820 (ANV Consortium)	GBR	CAT/G	OL				150					
0999999	General Account - Authorized Non-U.S. Non-Affiliates										19,972				
1099999	Total General Account - Authorized Non-Affiliates										50,089,181			1,531,060	
1199999	Total General Account Authorized										50,089,181			1,531,060	

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE PROVIDENT LIFE AND ACCIDENT 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		
1499999. Total General Account - Unauthorized U.S. Affiliates														
1799999. Total General Account - Unauthorized Non-U.S. Affiliates														
1899999. Total General Account - Unauthorized Affiliates														
.00000	AA-3194128	01/01/2016	Allied World Assurance Company Ltd	BMU	CAT/G	QL				616				
.00000	AA-3194128	01/01/2016	Allied World Assurance Company Ltd	BMU	CAT/G	QL				763				
.00000	AA-3194128	01/01/2016	Allied World Assurance Company Ltd	BMU	CAT/G	QL				618				
.00000	AA-3194128	01/01/2016	Allied World Assurance Company Ltd	BMU	CAT/G	QL				1,042				
.00000	AA-1780091	01/01/2016	Arch Reinsurance Europe Underwriters Ltd	IRL	CAT/G	QL				515				
.00000	AA-1780091	01/01/2016	Arch Reinsurance Europe Underwriters Ltd	IRL	CAT/G	QL				1,303				
.00000	AA-3190060	01/01/2016	Hannover Re (Bermuda) Ltd.	BMU	CAT/G	QL				426				
.00000	AA-3190060	01/01/2016	Hannover Re (Bermuda) Ltd.	BMU	CAT/G	QL				191				
.00000	AA-3190060	01/01/2016	Hannover Re (Bermuda) Ltd.	BMU	CAT/G	QL				348				
.00000	AA-1580095	01/01/2016	The TOA Reinsurance Company, Ltd	JPN	CAT/G	QL				188				
2099999. General Account - Unauthorized Non-U.S. Non-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														
3499999. Total General Account Authorized, Unauthorized and Certified														
							7,961,839,515	4,284,313,731	4,197,183,548	50,095,190			1,531,060	
3799999. Total Separate Accounts - Authorized U.S. Affiliates														
4099999. Total Separate Accounts - Authorized Non-U.S. Affiliates														
4199999. Total Separate Accounts - Authorized Affiliates														
4499999. Total Separate Accounts - Authorized Non-Affiliates														
4599999. Total Separate Accounts Authorized														
4899999. Total Separate Accounts - Unauthorized U.S. Affiliates														
5199999. Total Separate Accounts - Unauthorized Non-U.S. Affiliates														
5299999. Total Separate Accounts - Unauthorized Affiliates														
5599999. Total Separate Accounts - Unauthorized Non-Affiliates														
5699999. Total Separate Accounts Unauthorized														
5999999. Total Separate Accounts - Certified U.S. Affiliates														
6299999. Total Separate Accounts - Certified Non-U.S. Affiliates														
6399999. Total Separate Accounts - Certified Affiliates														
6699999. Total Separate Accounts - Certified Non-Affiliates														
6799999. Total Separate Accounts Certified														
6899999. Total Separate Accounts Authorized, Unauthorized and Certified														
6999999. Total U.S. (Sum of 0399999, 0899999, 1499999, 1999999, 2599999, 3099999, 3799999, 4299999, 4899999, 5399999, 5999999 and 6499999)							7,961,839,515	4,284,313,731	4,197,183,548	50,069,208			1,531,060	
7099999. Total Non-U.S. (Sum of 0699999, 0999999, 1799999, 2099999, 2899999, 3199999, 4099999, 4399999, 5199999, 5499999, 6299999 and 6599999)										25,982				
9999999 - Totals							7,961,839,515	4,284,313,731	4,197,183,548	50,095,190			1,531,060	

433

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE PROVIDENT LIFE AND ACCIDENT 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 Reinsurance 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		
62235	01-0278678	10/01/2002	Unum Life Insurance Company of America	ME	CO/G	LTDI	(12)	0	123,858,130				
0299999. General Account - Authorized U.S. Affiliates - Other							(12)	0	123,858,130				
0399999. Total General Account - Authorized U.S. Affiliates							(12)	0	123,858,130				
0699999. Total General Account - Authorized Non-U.S. Affiliates													
0799999. Total General Account - Authorized Affiliates							(12)	0	123,858,130				
37273	39-1338397	04/01/2013	Axis Insurance Company	IL	CO/I	LTDI	918,924	499,986	11,947,250				
37273	39-1338397	01/01/2016	Axis Insurance Company	IL	CAT/G	OH	143						
37273	39-1338397	01/01/2016	Axis Insurance Company	IL	CAT/G	OH	268						
37273	39-1338397	01/01/2016	Axis Insurance Company	IL	CAT/G	OH	157						
37273	39-1338397	01/01/2016	Axis Insurance Company	IL	CAT/G	OH	391						
80659	38-0397420	10/01/2016	Canada Life Assurance Company	MI	MCO/I	A	95,342,292					96,389,905	
86258	13-2572994	03/01/2005	General Re Life Corporation	CT	CO/I	SD	4,433,972	1,308,993	15,068,276				
86258	13-2572994	01/01/2009	General Re Life Corporation	CT	YRT/G	A	62						
65676	35-0472300	01/01/1987	Lincoln National Life Insurance Company	IN	YRT/I	LTDI			17,309,386				
65676	35-0472300	07/01/1991	Lincoln National Life Insurance Company	IN	CO/I	LTDI			935,571				
10227	13-4924125	01/01/2016	Munich Reinsurance America, Inc	DE	CAT/G	OH	574						
10227	13-4924125	01/01/2016	Munich Reinsurance America, Inc	DE	CAT/G	OH	425						
10227	13-4924125	01/01/2016	Munich Reinsurance America, Inc	DE	CAT/G	OH	522						
10227	13-4924125	01/01/2016	Munich Reinsurance America, Inc	DE	CAT/G	OH	174						
20087	47-0355979	04/01/2004	National Indemnity Company	NE	OTH/I	LTDI			731,460,611				
67105	41-0451140	04/01/1993	ReliaStar Life Insurance Company	MN	YRT/G	LTDI			6,769				
38776	13-2997499	01/01/2016	Sirius America Insurance Company	NY	CAT/G	OH	32						
38776	13-2997499	01/01/2016	Sirius America Insurance Company	NY	CAT/G	OH	21						
38776	13-2997499	01/01/2016	Sirius America Insurance Company	NY	CAT/G	OH	26						
38776	13-2997499	01/01/2016	Sirius America Insurance Company	NY	CAT/G	OH	43						
82627	06-0839705	09/01/1969	Swiss Re Life & Health America Inc	MO	YRT/I	LTDI			636,306				
82627	06-0839705	06/01/1979	Swiss Re Life & Health America Inc	MO	YRT/I	LTDI	1,155	27,206	6,551,366				
82627	06-0839705	01/01/1984	Swiss Re Life & Health America Inc	MO	CO/I	LTDI	590,816	44,781	109,698,286				
82627	06-0839705	08/01/1992	Swiss Re Life & Health America Inc	MO	CO/I	LTDI			705,826				
82627	06-0839705	01/01/1994	Swiss Re Life & Health America Inc	MO	CO/I	LTDI	4,728,585	392,818	63,113,052				
19453	13-5616275	01/01/2016	Transatlantic Reinsurance Company	NY	CAT/G	OH	367						
19453	13-5616275	01/01/2016	Transatlantic Reinsurance Company	NY	CAT/G	OH	30						
19453	13-5616275	01/01/2016	Transatlantic Reinsurance Company	NY	CAT/G	OH	52						
19453	13-5616275	01/01/2016	Transatlantic Reinsurance Company	NY	CAT/G	OH	478						
39845	48-0921045	01/01/1992	Westport Insurance Corporation	MO	CO/I	LTDI			99,342,515				
16535	36-4233459	01/01/2016	Zurich American Insurance Company	NY	CAT/G	OH	287						
16535	36-4233459	01/01/2016	Zurich American Insurance Company	NY	CAT/G	OH	319						
16535	36-4233459	01/01/2016	Zurich American Insurance Company	NY	CAT/G	OH	261						
16535	36-4233459	01/01/2016	Zurich American Insurance Company	NY	CAT/G	OH	591						
0899999. General Account - Authorized U.S. Non-Affiliates							106,020,967	2,273,784	1,056,775,214			96,389,905	
00000	AA-1120337	01/01/2016	Aspen Insurance UK Limited	GBR	CAT/G	OH	435						
00000	AA-1126033	01/01/2016	Lloyd's Syndicate Number 0033	GBR	CAT/G	OH	209						
00000	AA-1126033	01/01/2016	Lloyd's Syndicate Number 0033	GBR	CAT/G	OH	348						
00000	AA-1126382	01/01/2016	Lloyd's Syndicate Number 0382 (Acappella Consortium 9938)	GBR	CAT/G	OH	38						
00000	AA-1126382	01/01/2016	Lloyd's Syndicate Number 0382 (Acappella Consortium 9938)	GBR	CAT/G	OH	34						
00000	AA-1126382	01/01/2016	Lloyd's Syndicate Number 0382 (Acappella Consortium 9938)	GBR	CAT/G	OH	47						
00000	AA-1126382	01/01/2016	Lloyd's Syndicate Number 0382 (Acappella Consortium)	GBR	CAT/G	OH	38						
00000	AA-1126510	01/01/2016	Lloyd's Syndicate Number 0510	GBR	CAT/G	OH	191						
00000	AA-1126510	01/01/2016	Lloyd's Syndicate Number 0510	GBR	CAT/G	OH	64						
00000	AA-1126510	01/01/2016	Lloyd's Syndicate Number 0510	GBR	CAT/G	OH	78						
00000	AA-1126510	01/01/2016	Lloyd's Syndicate Number 0510	GBR	CAT/G	OH	130						
00000	AA-1127084	01/01/2016	Lloyd's Syndicate Number 1084 (Acappella Consortium 9938)	GBR	CAT/G	OH	5						
00000	AA-1127084	01/01/2016	Lloyd's Syndicate Number 1084 (Acappella Consortium 9938)	GBR	CAT/G	OH	3						
00000	AA-1127084	01/01/2016	Lloyd's Syndicate Number 1084 (Acappella Consortium 9938)	GBR	CAT/G	OH	8						
00000	AA-1127084	01/01/2016	Lloyd's Syndicate Number 1084 (Acappella Consortium)	GBR	CAT/G	OH	31						
00000	AA-1127200	01/01/2016	Lloyd's Syndicate Number 1200	GBR	CAT/G	OH	128						

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE PROVIDENT LIFE AND ACCIDENT 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 Reinsurance 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		
00000	AA-1127200	01/01/2016	Lloyd's Syndicate Number 1200	GBR	CAT/G	OH	85						
00000	AA-1127200	01/01/2016	Lloyd's Syndicate Number 1200	GBR	CAT/G	OH	52						
00000	AA-1127200	01/01/2016	Lloyd's Syndicate Number 1200	GBR	CAT/G	OH	87						
00000	AA-1127206	01/01/2016	Lloyd's Syndicate Number 1206	GBR	CAT/G	OH	96						
00000	AA-1127206	01/01/2016	Lloyd's Syndicate Number 1206	GBR	CAT/G	OH	85						
00000	AA-1127206	01/01/2016	Lloyd's Syndicate Number 1206	GBR	CAT/G	OH	104						
00000	AA-1127206	01/01/2016	Lloyd's Syndicate Number 1206	GBR	CAT/G	OH	174						
00000	AA-1120085	01/01/2016	Lloyd's Syndicate Number 1274 (Acappella Consortium 9938)	GBR	CAT/G	OH	.9						
00000	AA-1120085	01/01/2016	Lloyd's Syndicate Number 1274 (Acappella Consortium 9938)	GBR	CAT/G	OH	.6						
00000	AA-1120085	01/01/2016	Lloyd's Syndicate Number 1274 (Acappella Consortium 9938)	GBR	CAT/G	OH	15						
00000	AA-1120085	01/01/2016	Lloyd's Syndicate Number 1274 (Acappella Consortium)	GBR	CAT/G	OH	56						
00000	AA-1127861	01/01/2016	Lloyd's Syndicate Number 1861 (ANV Consortium)	GBR	CAT/G	OH	48						
00000	AA-1127861	01/01/2016	Lloyd's Syndicate Number 1861 (ANV Consortium)	GBR	CAT/G	OH	32						
00000	AA-1127861	01/01/2016	Lloyd's Syndicate Number 1861 (ANV Consortium)	GBR	CAT/G	OH	39						
00000	AA-1127861	01/01/2016	Lloyd's Syndicate Number 1861 (ANV Consortium)	GBR	CAT/G	OH	66						
00000	AA-1120064	01/01/2016	Lloyd's Syndicate Number 1919 CVS	GBR	CAT/G	OH	64						
00000	AA-1120064	01/01/2016	Lloyd's Syndicate Number 1919 CVS	GBR	CAT/G	OH	42						
00000	AA-1120064	01/01/2016	Lloyd's Syndicate Number 1919 CVS	GBR	CAT/G	OH	65						
00000	AA-1120064	01/01/2016	Lloyd's Syndicate Number 1919 CVS	GBR	CAT/G	OH	196						
00000	AA-1120103	01/01/2016	Lloyd's Syndicate Number 1967	GBR	CAT/G	OH	80						
00000	AA-1120103	01/01/2016	Lloyd's Syndicate Number 1967	GBR	CAT/G	OH	53						
00000	AA-1120103	01/01/2016	Lloyd's Syndicate Number 1967	GBR	CAT/G	OH	78						
00000	AA-1120103	01/01/2016	Lloyd's Syndicate Number 1967	GBR	CAT/G	OH	130						
00000	AA-1120106	01/01/2016	Lloyd's Syndicate Number 1969 (ANV Consortium)	GBR	CAT/G	OH	12						
00000	AA-1120106	01/01/2016	Lloyd's Syndicate Number 1969 (ANV Consortium)	GBR	CAT/G	OH	.8						
00000	AA-1120106	01/01/2016	Lloyd's Syndicate Number 1969 (ANV Consortium)	GBR	CAT/G	OH	10						
00000	AA-1120106	01/01/2016	Lloyd's Syndicate Number 1969 (ANV Consortium)	GBR	CAT/G	OH	17						
00000	AA-1128003	01/01/2016	Lloyd's Syndicate Number 2003	GBR	CAT/G	OH	96						
00000	AA-1128003	01/01/2016	Lloyd's Syndicate Number 2003	GBR	CAT/G	OH	209						
00000	AA-1128003	01/01/2016	Lloyd's Syndicate Number 2003	GBR	CAT/G	OH	58						
00000	AA-1120158	01/01/2016	Lloyd's Syndicate Number 2014 (Acappella Consortium 9938)	GBR	CAT/G	OH	11						
00000	AA-1120158	01/01/2016	Lloyd's Syndicate Number 2014 (Acappella Consortium 9938)	GBR	CAT/G	OH	.8						
00000	AA-1120158	01/01/2016	Lloyd's Syndicate Number 2014 (Acappella Consortium 9938)	GBR	CAT/G	OH	19						
00000	AA-1120158	01/01/2016	Lloyd's Syndicate Number 2014 (Acappella Consortium)	GBR	CAT/G	OH	70						
00000	AA-1128987	01/01/2016	Lloyd's Syndicate Number 2987	GBR	CAT/G	OH	80						
00000	AA-1128987	01/01/2016	Lloyd's Syndicate Number 2987	GBR	CAT/G	OH	53						
00000	AA-1128987	01/01/2016	Lloyd's Syndicate Number 2987	GBR	CAT/G	OH	78						
00000	AA-1128987	01/01/2016	Lloyd's Syndicate Number 2987	GBR	CAT/G	OH	130						
00000	AA-1120055	01/01/2016	Lloyd's Syndicate Number 3623	GBR	CAT/G	OH	271						
00000	AA-1120055	01/01/2016	Lloyd's Syndicate Number 3623	GBR	CAT/G	OH	181						
00000	AA-1120055	01/01/2016	Lloyd's Syndicate Number 3623	GBR	CAT/G	OH	222						
00000	AA-1120055	01/01/2016	Lloyd's Syndicate Number 3623	GBR	CAT/G	OH	283						
00000	AA-1126005	01/01/2016	Lloyd's Syndicate Number 4000	GBR	CAT/G	OH	112						
00000	AA-1126005	01/01/2016	Lloyd's Syndicate Number 4000	GBR	CAT/G	OH	96						
00000	AA-1126005	01/01/2016	Lloyd's Syndicate Number 4000	GBR	CAT/G	OH	104						
00000	AA-1126005	01/01/2016	Lloyd's Syndicate Number 4000	GBR	CAT/G	OH	87						
00000	AA-1120075	01/01/2016	Lloyd's Syndicate Number 4020	GBR	CAT/G	OH	64						
00000	AA-1120075	01/01/2016	Lloyd's Syndicate Number 4020	GBR	CAT/G	OH	64						
00000	AA-1120075	01/01/2016	Lloyd's Syndicate Number 4020	GBR	CAT/G	OH	52						
00000	AA-1120075	01/01/2016	Lloyd's Syndicate Number 4020	GBR	CAT/G	OH	87						
00000	AA-1126006	01/01/2016	Lloyd's Syndicate Number 4472 LIB	GBR	CAT/G	OH	96						
00000	AA-1126006	01/01/2016	Lloyd's Syndicate Number 4472 LIB	GBR	CAT/G	OH	119						
00000	AA-1126006	01/01/2016	Lloyd's Syndicate Number 4472 LIB	GBR	CAT/G	OH	130						
00000	AA-1126006	01/01/2016	Lloyd's Syndicate Number 4472 LIB	GBR	CAT/G	OH	283						
00000	AA-1120048	01/01/2016	Lloyd's Syndicate Number 5820 (ANV Consortium)	GBR	CAT/G	OH	36						
00000	AA-1120048	01/01/2016	Lloyd's Syndicate Number 5820 (ANV Consortium)	GBR	CAT/G	OH	24						

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE PROVIDENT LIFE AND ACCIDENT 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 Reinsurance 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		
00000	AA-1120048	01/01/2016	Lloyd's Syndicate Number 5820 (ANV Consortium)	GBR	CAT/G	OH	29						
00000	AA-1120048	01/01/2016	Lloyd's Syndicate Number 5820 (ANV Consortium)	GBR	CAT/G	OH	50						
0999999. General Account - Authorized Non-U.S. Non-Affiliates							6,697						
1099999. Total General Account - Authorized Non-Affiliates							106,027,663	2,273,784	1,056,775,214			96,389,905	
1199999. Total General Account Authorized							106,027,651	2,273,784	1,180,633,344			96,389,905	
13031	26-0702523	01/01/2007	Northwind Reinsurance Company	VT	MCO/I	LTDI	115,898,706					2,683,537,572	
1299999. General Account - Unauthorized U.S. Affiliates - Captive							115,898,706					2,683,537,572	
1499999. Total General Account - Unauthorized U.S. Affiliates							115,898,706					2,683,537,572	
1799999. Total General Account - Unauthorized Non-U.S. Affiliates													
1899999. Total General Account - Unauthorized Affiliates							115,898,706					2,683,537,572	
00000	AA-9995055	05/01/1987	American Disability Reinsurance Underwriters Syndicate	ME	CO/G	LTDI			1,075				
93580	84-0849721	01/01/2002	M Life Insurance Company	CO	MCO/I	LTDI	4,047,044					8,366,816	
1999999. General Account - Unauthorized U.S. Non-Affiliates							4,047,044		1,075			8,366,816	
00000	AA-3194128	01/01/2016	Allied World Assurance Company Ltd	BMJ	CAT/G	OH	207						
00000	AA-3194128	01/01/2016	Allied World Assurance Company Ltd	BMJ	CAT/G	OH	255						
00000	AA-3194128	01/01/2016	Allied World Assurance Company Ltd	BMJ	CAT/G	OH	209						
00000	AA-3194128	01/01/2016	Allied World Assurance Company Ltd	BMJ	CAT/G	OH	348						
00000	AA-1780091	01/01/2016	Arch Reinsurance Europe Underwriters Ltd	IRL	CAT/G	OH	174						
00000	AA-1780091	01/01/2016	Arch Reinsurance Europe Underwriters Ltd	IRL	CAT/G	OH	435						
00000	AA-3190060	01/01/2016	Hannover Re (Bermuda) Ltd.	BMJ	CAT/G	OH	143						
00000	AA-3190060	01/01/2016	Hannover Re (Bermuda) Ltd.	BMJ	CAT/G	OH	64						
00000	AA-3190060	01/01/2016	Hannover Re (Bermuda) Ltd.	BMJ	CAT/G	OH	117						
00000	AA-1580095	01/01/2016	The TOA Reinsurance Company, Ltd	JPN	CAT/G	OH	64						
2099999. General Account - Unauthorized Non-U.S. Non-Affiliates							2,016						
2199999. Total General Account - Unauthorized Non-Affiliates							4,049,060		1,075			8,366,816	
2299999. Total General Account Unauthorized							119,947,766		1,075			2,691,904,388	
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													
3499999. Total General Account Authorized, Unauthorized and Certified							225,975,417	2,273,784	1,180,634,419			2,788,294,293	
3799999. Total Separate Accounts - Authorized U.S. Affiliates													
4099999. Total Separate Accounts - Authorized Non-U.S. Affiliates													
4199999. Total Separate Accounts - Authorized Affiliates													
4499999. Total Separate Accounts - Authorized Non-Affiliates													
4599999. Total Separate Accounts Authorized													
4899999. Total Separate Accounts - Unauthorized U.S. Affiliates													
5199999. Total Separate Accounts - Unauthorized Non-U.S. Affiliates													
5299999. Total Separate Accounts - Unauthorized Affiliates													
5599999. Total Separate Accounts - Unauthorized Non-Affiliates													
5699999. Total Separate Accounts Unauthorized													
5999999. Total Separate Accounts - Certified U.S. Affiliates													
6299999. Total Separate Accounts - Certified Non-U.S. Affiliates													
6399999. Total Separate Accounts - Certified Affiliates													
6699999. Total Separate Accounts - Certified Non-Affiliates													
6799999. Total Separate Accounts Certified													
6899999. Total Separate Accounts Authorized, Unauthorized and Certified													
6999999. Total U.S. (Sum of 0399999, 0899999, 1499999, 1999999, 2599999, 3099999, 3799999, 4299999, 4899999, 5399999, 5999999 and 6499999)							225,966,705	2,273,784	1,180,634,419			2,788,294,293	
7099999. Total Non-U.S. (Sum of 0699999, 0999999, 1799999, 2099999, 2899999, 3199999, 4099999, 4399999, 5199999, 5499999, 6299999 and 6599999)							8,712						
9999999 - Totals							225,975,417	2,273,784	1,180,634,419			2,788,294,293	

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

SCHEDULE S - PART 4

Reinsurance Ceded to Unauthorized Companies

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Reinsurer	5 Reserve Credit Taken	6 Paid and Unpaid Losses Recoverable (Debit)	7 Other Debits	8 Total (Cols.5+6+7)	9 Letters of Credit	10 Issuing or Confirming Bank Reference Number (a)	11 Trust Agreements	12 Funds Deposited by and Withheld from Reinsurers	13 Other	14 Miscellaneous Balances (Credit)	15 Sum of Cols. 9+11+12+13 +14 but not in Excess of Col. 8
0399999. Total General Account - Life and Annuity U.S. Affiliates														
0699999. Total General Account - Life and Annuity Non-U.S. Affiliates														
0799999. Total General Account - Life and Annuity Affiliates														
1099999. Total General Account - Life and Annuity Non-Affiliates														
1199999. Total General Account Life and Annuity														
13031	26-0702523	01/01/2007	Northwind Reinsurance Company		35,818,128		35,818,128		XXX				39,251,603	35,818,128
1299999. General Account - Accident and Health U.S. Affiliates - Captive														
1499999. Total General Account - Accident and Health U.S. Affiliates														
1799999. Total General Account - Accident and Health Non-U.S. Affiliates														
1899999. Total General Account - Accident and Health Affiliates														
00000	AA-9995055	05/01/1987	American Disability Reinsurance Underwriters Syndicate	1,075	76,916		77,991		XXX				2,340	2,340
93580	84-0849721	01/01/2002	M Life Insurance Company		76,871		76,871		XXX				2,340	2,340
1999999. General Account - Accident and Health U.S. Non-Affiliates														
2199999. Total General Account - Accident and Health Non-Affiliates														
2299999. Total General Account Accident and Health														
2399999. Total General Account														
2699999. Total Separate Accounts - U.S. Affiliates														
2999999. Total Separate Accounts - Non-U.S. Affiliates														
3099999. Total Separate Accounts - Affiliates														
3399999. Total Separate Accounts - Non-Affiliates														
3499999. Total Separate Accounts														
3599999. Total U.S. (Sum of 0399999, 0899999, 1499999, 1999999, 2699999 and 3199999)														
3699999. Total Non-U.S. (Sum of 0699999, 0999999, 1799999, 2099999, 2999999 and 3299999)														
9999999 - Totals				1,075	35,895,044		35,896,119		XXX				39,253,944	35,820,468

(a)

Issuing or Confirming Bank Reference Number	Letters of Credit Code	American Bankers Association (ABA) Routing Number	Issuing or Confirming Bank Name	Letters of Credit Amount
NONE				

45

Schedule S - Part 5

NONE

Schedule S - Part 5 - Bank Footnote

NONE

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

SCHEDULE S - PART 6

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

	1 2017	2 2016	3 2015	4 2014	5 2013
A. OPERATIONS ITEMS					
1. Premiums and annuity considerations for life and accident and health contracts	276,071	223,634	221,134	247,361	271,120
2. Commissions and reinsurance expense allowances	103,029	62,053	56,533	63,773	70,660
3. Contract claims	773,842	770,873	776,144	807,682	747,936
4. Surrender benefits and withdrawals for life contracts	19,401	43,320	75,617	29,856	23,682
5. Dividends to policyholders	51	49	56	57	56
6. Reserve adjustments on reinsurance ceded	(195,909)	(136,372)	(140,001)	(134,828)	(70,665)
7. Increase in aggregate reserve for life and accident and health contracts	125,482	55,877	41,605	62,655	118,789
B. BALANCE SHEET ITEMS					
8. Premiums and annuity considerations for life and accident and health contracts deferred and uncollected	4,396	4,578	5,697	5,845	7,196
9. Aggregate reserves for life and accident and health contracts	5,423,492	5,298,010	5,242,133	5,200,528	5,137,872
10. Liability for deposit-type contracts	43,730	45,410	48,432	49,865	51,828
11. Contract claims unpaid	30,967	31,002	30,027	29,086	34,438
12. Amounts recoverable on reinsurance	45,461	56,583	57,102	52,897	51,246
13. Experience rating refunds due or unpaid	1,278	2,904	889	915	1,613
14. Policyholders' dividends (not included in Line 10)	59	59	59	59	59
15. Commissions and reinsurance expense allowances due	3,296	3,671	3,798	4,401	4,653
16. Unauthorized reinsurance offset	76	2	2	3	223
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 2017 OF THE PROVIDENT LIFE AND ACCIDENT 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)	7,498,526,400	3,269,610,200	10,768,136,600
2. Reinsurance (Line 16)	51,360,922	(49,898,894)	1,462,028
3. Premiums and considerations (Line 15)	72,961,100	8,771,688	81,732,788
4. Net credit for ceded reinsurance	XXX	2,113,501,483	2,113,501,483
5. All other admitted assets (balance)	411,106,290	121,341,447	532,447,737
6. Total assets excluding Separate Accounts (Line 26)	8,033,954,711	5,463,325,923	13,497,280,635
7. Separate Account assets (Line 27)			
8. Total assets (Line 28)	8,033,954,711	5,463,325,923	13,497,280,635
LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
9. Contract reserves (Lines 1 and 2)	6,869,021,180	5,423,491,738	12,292,512,919
10. Liability for deposit-type contracts (Line 3)	111,506,384	43,730,197	155,236,581
11. Claim reserves (Line 4)	76,998,116	30,967,106	107,965,221
12. Policyholder dividends/reserves (Lines 5 through 7)		59,131	59,131
13. Premium & annuity considerations received in advance (Line 8)	11,285,500	95,510	11,381,010
14. Other contract liabilities (Line 9)	86,588,005	(43,824,862)	42,763,143
15. Reinsurance in unauthorized companies (Line 24.02 minus inset amount)	75,651	(75,651)	
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)	273,446,303	8,882,756	282,329,059
20. Total liabilities excluding Separate Accounts (Line 26)	7,428,921,139	5,463,325,923	12,892,247,063
21. Separate Account liabilities (Line 27)			
22. Total liabilities (Line 28)	7,428,921,139	5,463,325,923	12,892,247,063
23. Capital & surplus (Line 38)	605,033,572	XXX	605,033,572
24. Total liabilities, capital & surplus (Line 39)	8,033,954,711	5,463,325,923	13,497,280,635
NET CREDIT FOR CEDED REINSURANCE			
25. Contract reserves	5,423,491,738		
26. Claim reserves	30,967,106		
27. Policyholder dividends/reserves	59,131		
28. Premium & annuity considerations received in advance	95,510		
29. Liability for deposit-type contracts	43,730,197		
30. Other contract liabilities	(43,824,862)		
31. Reinsurance ceded assets	49,898,894		
32. Other ceded reinsurance recoverables	(3,390,951,647)		
33. Total ceded reinsurance recoverables	2,113,466,066		
34. Premiums and considerations	8,771,688		
35. Reinsurance in unauthorized companies	75,651		
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	(8,882,756)		
40. Total ceded reinsurance payable/offsets	(35,417)		
41. Total net credit for ceded reinsurance	2,113,501,483		

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

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

Allocated by States and Territories

		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	
States, Etc.							
1. Alabama	AL	11,211,080	293	11,187,015	327,219		22,725,608
2. Alaska	AK	85,315		724,100	4,241		813,656
3. Arizona	AZ	3,703,239		9,970,615	522,690		14,196,544
4. Arkansas	AR	6,839,985		6,861,689	235,606	1,000	13,938,280
5. California	CA	18,599,990		79,110,599	770,958		98,481,547
6. Colorado	CO	2,186,909		8,565,569	414,060		11,166,537
7. Connecticut	CT	2,658,385		9,541,137	513,214		12,712,736
8. Delaware	DE	639,061		1,840,201	106,877		2,586,139
9. District of Columbia	DC	663,299		4,368,239	294,440		5,325,978
10. Florida	FL	17,181,932	15,555	36,798,075	4,650,874	20,142	58,666,577
11. Georgia	GA	27,025,927	4,820	24,607,818	1,261,665	34,000	52,934,231
12. Hawaii	HI	1,459,829		1,823,883	2,622,330		5,906,043
13. Idaho	ID	646,604	528	1,283,631	96,284		2,027,047
14. Illinois	IL	9,259,020		27,770,936	1,349,965		38,379,922
15. Indiana	IN	6,574,828		7,869,173	119,513	450	14,563,964
16. Iowa	IA	2,269,769		2,989,337	251,690		5,510,796
17. Kansas	KS	2,289,746		4,146,191	217,617		6,653,554
18. Kentucky	KY	4,400,791	382	5,402,655	214,176		10,018,004
19. Louisiana	LA	7,649,095	1,181	8,889,642	271,611		16,811,529
20. Maine	ME	989,711		2,458,766	567,005		4,015,482
21. Maryland	MD	7,145,349	63	22,879,745	882,350		30,907,506
22. Massachusetts	MA	3,733,125		22,965,314	1,392,255		28,090,695
23. Michigan	MI	9,223,651		26,762,007	1,164,145		37,149,802
24. Minnesota	MN	2,736,699		12,344,838	438,725		15,520,262
25. Mississippi	MS	4,933,662		6,214,487	182,710		11,330,858
26. Missouri	MO	7,848,773		11,320,533	547,692		19,716,997
27. Montana	MT	387,532		975,874	21,983		1,385,390
28. Nebraska	NE	1,430,234	93	2,097,522	642,106		4,169,956
29. Nevada	NV	1,509,465		3,232,647	215,177		4,957,289
30. New Hampshire	NH	610,505		2,591,528	255,580		3,457,612
31. New Jersey	NJ	5,517,892		31,593,852	853,686		37,965,430
32. New Mexico	NM	1,587,170	2,172	1,993,254	146,082		3,728,678
33. New York	NY	586,149		5,432,803	72,657		6,091,610
34. North Carolina	NC	24,136,319	1,897	21,628,463	1,160,970		46,927,649
35. North Dakota	ND	511,456		618,991	23,282		1,153,729
36. Ohio	OH	17,741,620		20,384,664	1,403,177		39,529,461
37. Oklahoma	OK	2,330,803	101	2,981,947	299,059		5,611,910
38. Oregon	OR	1,570,648		7,160,663	864,067		9,595,378
39. Pennsylvania	PA	9,593,303		35,538,747	976,338		46,108,388
40. Rhode Island	RI	398,882		1,760,992	146,803		2,306,677
41. South Carolina	SC	10,267,357	2,087	9,690,626	505,912		20,465,982
42. South Dakota	SD	1,174,506		1,515,412	107,818		2,797,736
43. Tennessee	TN	18,265,079	40,924	15,629,407	914,063		34,849,472
44. Texas	TX	24,163,141		38,888,484	2,566,646	1,920	65,620,192
45. Utah	UT	1,001,176		1,855,475	78,063		2,934,714
46. Vermont	VT	648,456		1,031,102	98,694		1,778,252
47. Virginia	VA	9,280,923		18,615,132	1,092,278		28,988,332
48. Washington	WA	2,604,909		14,932,333	1,167,878		18,705,120
49. West Virginia	WV	2,160,227		1,637,079	74,604		3,871,910
50. Wisconsin	WI	4,172,414	1,105	8,248,378	371,775		12,793,672
51. Wyoming	WY	348,150		597,806	84,804		1,030,759
52. American Samoa	AS						
53. Guam	GU	2,942		1,753			4,694
54. Puerto Rico	PR	17,779		217,951	6,940		242,670
55. U.S. Virgin Islands	VI	2,499		23,911			26,410
56. Northern Mariana Islands	MP	437					437
57. Canada	CAN	12,386		115,249	2,065		129,700
58. Aggregate Other Alien	OT	29,265		274,420	3,653		307,338
59. Total		304,019,399	71,201	609,962,656	33,576,073	57,512	947,686,842

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE PROVIDENT LIFE AND ACCIDENT 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	Domi-ciliary Location	Relation-ship 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 Re-quired? (Y/N)	*
		.0000	62-1598430		000005513	NYSE	Unum Group	DE	UDP			0.000		N	
.0565	Unum Group	64297	13-1898173				First Unum Life Insurance Company	NY	IA	Unum Group	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	13-2588770				Duncanson & Holt, Inc.	NY	NIA	Unum Group	Ownership	100.000	Unum Group	N	
	Unum Group	.0000	01-0358803				Duncanson & Holt Services, Inc.	ME	NIA	Duncanson & Holt, Inc.	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 Underwriters Ltd.	GBR	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					Unum European Holding Company Limited	GBR	NIA	Unum Group	Ownership	80.000	Unum Group	N	.0000009
	Unum Group	.0000					Unum European Holding Company Limited	GBR	NIA	UnumProvident Finance Company Limited	Ownership	20.000	Unum Group	N	.0000010
	Unum Group	.0000					Unum Limited	GBR	IA	Unum European Holding Company Limited	Ownership	72.000	Unum Group	N	.0000011
	Unum Group	.0000					Unum Limited	GBR	IA	UnumProvident Finance Company Limited	Ownership	28.000	Unum Group	N	.0000012
	Unum Group	.0000					Claims Services International Limited	GBR	NIA	Unum European Holding Company Limited	Ownership	50.000	Unum Group	N	.0000013
	Unum Group	.0000					Claims Services International Limited	GBR	NIA	Unum Limited	Ownership	50.000	Unum Group	N	.0000014
	Unum Group	.0000					Unum Select Limited	GBR	NIA	Unum European Holding Company Limited	Ownership	100.000	Unum Group	N	
	Unum Group	.0000					UnumProvident Finance Company Limited	GBR	NIA	Unum Group	Ownership	100.000	Unum Group	N	
	Unum Group	.0000					Unum Ireland Limited	IRL	NIA	UnumProvident Finance Company Limited	Ownership	100.000	Unum Group	N	
.0565	Unum Group	62049	57-0144607				Colonial Life & Accident Insurance Company	SC	IA	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	
.0565	Unum Group	67598	04-1768571				The Paul Revere Life Insurance Company	MA	IA	Unum Group	Ownership	100.000	Unum Group	N	
.0565	Unum Group	67601	04-2381280				Unum Insurance Company	ME	IA	Unum Group	Ownership	100.000	Unum Group	N	
	Unum Group	68195	62-0331200				Provident Life and Accident Insurance Company	TN	RE	Unum Group	Ownership	85.900	Unum Group	N	.0000022
.0565	Unum Group	68195	62-0331200				Provident Life and Accident Insurance Company	TN	RE	The Paul Revere Life Insurance Company	Ownership	10.100	Unum Group	N	.0000023
	Unum Group	68209	62-0506281				Provident Life and Casualty Insurance Company	TN	IA	Unum Group	Ownership	100.000	Unum Group	N	
	Unum Group	.0000	62-1705665				Provident Investment Management, LLC	TN	NIA	Unum Group	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	.0000028
	Unum Group	.0000					National Dental Plan Limited	GBR	NIA	Unum European Holding Company Limited	Ownership	100.000	Unum Group	N	
	Unum Group	.0000					Claims Assistance (UK) Limited	GBR	NIA	Unum European Holding Company Limited	Ownership	100.000	Unum Group	N	
	Unum Group	.0000					NDPH Limited	GBR	NIA	Unum European Holding Company Limited	Ownership	100.000	Unum Group	N	
	Unum Group	.0000	72-0977314				NDP (UK) Limited	GBR	NIA	NDPH Limited	Ownership	100.000	Unum Group	N	
	Unum Group	.0000	72-0809131				H&J Capital, L.L.C.	LA	NIA	Unum Group	Ownership	100.000	Unum Group	N	
.0565	Unum Group	68985	72-0977315				Starmount Insurance Agency, Inc.	LA	IA	H&J Capital, L.L.C.	Ownership	100.000	Unum Group	N	
	Unum Group	.0000	72-1146709				Starmount Life Insurance Company	LA	IA	H&J Capital, L.L.C.	Ownership	100.000	Unum Group	N	
	Unum Group	.0000	20-1373510				AlwaysCare Benefits, Inc.	LA	NIA	H&J Capital, L.L.C.	Ownership	100.000	Unum Group	N	
	Unum Group	.0000					First Look Vision Network, L.L.C.	MO	NIA	H&J Capital, L.L.C.	Ownership	100.000	Unum Group	N	
	Unum Group	.0000					ULMS, Inc.	DE	NIA	Unum Group	Ownership	100.000	Unum Group	N	

Asterisk	Explanation
0000009	80% owned by Unum Group and 20% owned by UnumProvident Finance Company Limited.
0000010	80% owned by Unum Group and 20% owned by UnumProvident Finance Company Limited.
0000011	72% owned by Unum European Holding Company Limited and 28% owned by UnumProvident Finance Company Limited.
0000012	72% owned by Unum European Holding Company Limited and 28% owned by UnumProvident Finance Company Limited.
0000013	50% owned by Unum European Holding Company Limited and 50% owned by Unum Limited.
0000014	50% owned by Unum European Holding Company Limited and 50% owned by Unum Limited.
0000022	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 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

Asterisk	Explanation
0000023	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.
0000028	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.

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE PROVIDENT LIFE AND ACCIDENT 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	756,210,000	(179,517,242)			1,764,164,965			(3,700,000)	2,337,157,723	
62235	01-0278678	Unum Life Insurance Company of America, ME	(352,400,000)				(1,085,339,203)				(1,437,739,203)	8,408,064,388
64297	13-1898173	First Unum Life Insurance Company, NY		89,737,521			(87,283,945)				2,453,576	183,213,232
62049	57-0144607	Colonial Life & Accident Insurance Company, SC	(150,000,000)				(313,860,282)				(463,860,282)	6,959
15463	98-0179389	Fairwind Insurance Company, VT		89,779,721			13,754,858				103,534,579	(8,742,018,508)
67598	04-1768571	The Paul Revere Life Insurance Company, MA	(49,810,000)				(40,217,603)		(18,026,940)		(108,054,544)	108,859,414
68195	62-0331200	Provident Life and Accident Insurance Company, TN	(190,000,000)				(242,789,122)				(432,789,122)	163,860,873
68209	62-0506281	Provident Life and Casualty Insurance Company, TN	(14,000,000)				(30,571,408)			3,700,000	(40,871,408)	
	62-1705665	Provident Investment Management, LLC, TN					66,267,202				66,267,202	
67601	04-2381280	Unum Insurance Company, ME					(543,237)				(543,237)	
		Unum Limited										(181,350)
13031	26-0702523	Northwind Reinsurance Company, VT	(77,207,280)				(16,364,335)		18,026,940		(75,544,675)	(99,956,711)
	26-0702757	Northwind Holdings, LLC	77,207,280								77,207,280	
68985	72-0977315	Starmount Life Insurance Company		9,000,000			(27,006,508)				(18,006,508)	
	72-0977314	H&J Capital, LLC		(9,000,000)							(9,000,000)	
	72-1146709	AlwaysCare Benefits, Inc.					(211,382)				(211,382)	
9999999 Control Totals												21,848,296

53

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.

	<u>Responses</u>
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?	YES
7. Will the Adjustment Form (if required) be filed with the state of domicile and the NAIC by April 1?	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. 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?	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?	YES
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?	YES
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 2017 OF THE PROVIDENT LIFE AND ACCIDENT 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? NO
- 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? NO
- 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? NO
- 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? NO
- 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? 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? YES

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? YES
- 43. Will the Interest-Sensitive Life Insurance Products Report Forms be filed with the state of domicile and the NAIC by April 1? YES
- 44. Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1? NO
- 45. Will the Accident and Health Policy Experience Exhibit be filed by April 1? YES
- 46. Will the Analysis of Annuity Operations by Lines of Business be filed with the state of domicile and the NAIC by April 1? YES
- 47. Will the Analysis of Increase in Annuity Reserves During the Year be filed with the state of domicile and the NAIC by April 1? YES
- 48. 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
- 49. 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
- 50. Will the confidential Actuarial Memorandum required by Actuarial Guideline XXXVIII 8D be filed with the state of domicile by April 30? NO
- 51. Will the Supplemental Term and Universal Life Insurance Reinsurance Exhibit be filed with the state of domicile and the NAIC by April 1? NO
- 52. Will the Variable Annuities Supplement be filed with the state of domicile and the NAIC 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? YES

Explanations:

- 12.
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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]



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



- 18. Actuarial Opinion on Separate Accounts Funding Guaranteed Minimum Benefit [Document Identifier 443]

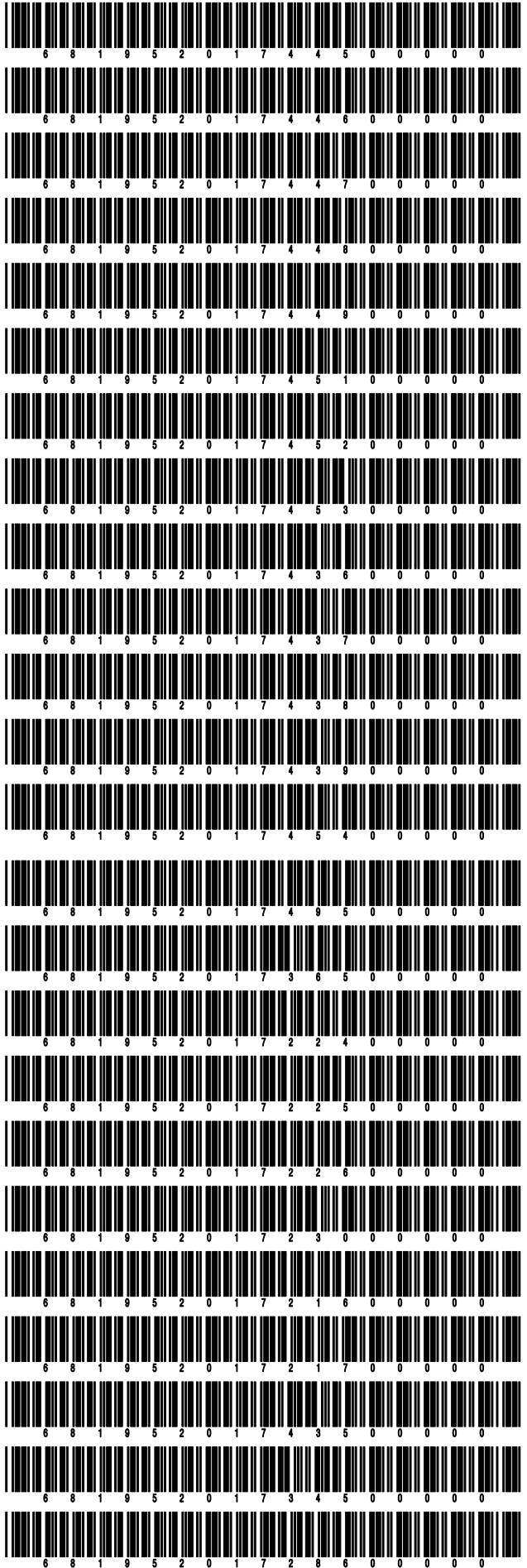


- 19. Actuarial Opinion on Synthetic Guaranteed Investment Contracts [Document Identifier 444]



SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

- 20. Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV [Document Identifier 445]
- 21. Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXV [Document Identifier 446]
- 22. Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI [Document Identifier 447]
- 23. Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI [Document Identifier 448]
- 24. Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value) [Document Identifier 449]
- 26. C-3 RBC Certifications Required Under C-3 Phase II [Document Identifier 451]
- 27. Actuarial Certifications Related to Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities [Document Identifier 452]
- 28. Modified Guaranteed Annuity Model Regulation [Document Identifier 453]
- 29. Actuarial Certifications Related to Hedging required by Actuarial Guideline XLIII [Document Identifier 436]
- 30. Financial Officer Certification Related to Clearly Defined Hedging Strategy required by Actuarial Guideline XLIII [Document Identifier 437]
- 31. Management Certification That the Valuation Reflects Management's Intent required by Actuarial Guideline XLIII [Document Identifier 438]
- 32. Actuarial Certification Related to the Reserves required by Actuarial Guideline XLIII [Document Identifier 439]
- 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]
- 34. Workers' Compensation Carve-Out Supplement [Document Identifier 495]
- 36. Medicare Part D Coverage Supplement [Document Identifier 365]
- 37. Relief from the five-year rotation requirement for lead audit partner [Document Identifier 224]
- 38. Relief from the one-year cooling off period for independent CPA [Document Identifier 225]
- 39. Relief from the Requirements for Audit Committees [Document Identifier 226]
- 44. Credit Insurance Experience Exhibit [Document Identifier 230]
- 48. Supplemental Health Care Exhibit (Parts 1, 2 and 3) [Document Identifier 216]
- 49. Supplemental Health Care Exhibit's Expense Allocation Report [Document Identifier 217]
- 50. Actuarial Memorandum Required by Actuarial Guideline XXXVIII 8D [Document Identifier 435]
- 51. Supplemental XXX/AXXX Reinsurance Exhibit [Document Identifier 345]
- 52. Variable Annuities Supplement [Document Identifier 286]



**ANNUAL STATEMENT FOR THE YEAR 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY
OVERFLOW PAGE FOR WRITE-INS**

Additional Write-ins for Assets Line 25

	Current Year			Prior Year
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
2504. Receivables for investment income	2,473,268		2,473,268	1,862,003
2505. Other tax receivables	1,311,093		1,311,093	27,370
2597. Summary of remaining write-ins for Line 25 from overflow page	3,784,360		3,784,360	1,889,374

Additional Write-ins for Liabilities Line 25

	1 Current Year	2 Prior Year
2504. Cash collateral on derivatives	9,400,000	14,661,446
2505. Other miscellaneous liabilities	508,673	226,238
2597. Summary of remaining write-ins for Line 25 from overflow page	9,908,673	14,887,684

Additional Write-ins for Summary of Operations Line 8.3

	1 Current Year	2 Prior Year
08.304. Income from assumed modco reinsurance	101,453	70,852
08.397. Summary of remaining write-ins for Line 8.3 from overflow page	101,453	70,852

Additional Write-ins for Summary of Operations Line 27

	1 Current Year	2 Prior Year
2704. Transfers on account of group package policies	991,810	(82,582)
2705. Fines and penalties paid to regulatory authorities	45	4,033
2797. Summary of remaining write-ins for Line 27 from overflow page	991,855	(78,549)

Additional Write-ins for Exhibit of Capital Gains and Losses Line 9

	1 Realized Gain (Loss) On Sales or Maturity	2 Other Realized Adjustments	3 Total Realized Capital Gain (Loss) (Columns 1 + 2)	4 Change in Unrealized Capital Gain (Loss)	5 Change in Unrealized Foreign Exchange Capital Gain (Loss)
0904. Reinsurance - Non Affiliates		747,727	747,727		(383,204)
0997. Summary of remaining write-ins for Line 9 from overflow page		747,727	747,727		(383,204)

Additional Write-ins for Schedule T Line 58

States, Etc.	1 Active Status	Direct Business Only					7 Deposit-Type Contracts
		Life Contracts		4 Accident and Health Insurance Premiums, Including Policy, Membership and Other Fees	5 Other Considerations	6 Total Columns 2 through 5	
		2 Life Insurance Premiums	3 Annuity Considerations				
58004. BEL BELGIUM	XXX	572		3,275		3,847	
58005. BMU BERMUDA	XXX			599		599	
58006. CYM CAYMAN ISLANDS	XXX	208				208	
58007. CHN CHINA	XXX			46,398		46,398	
58008. CRI COSTA RICA	XXX			1,121		1,121	
58009. FRA FRANCE	XXX	7,174		14,298		21,473	
58010. DEU GERMANY	XXX	1,443		6,587		8,031	
58011. GRC GREECE	XXX			3,880		3,880	
58012. HKG HONG KONG	XXX	3,449		21,004		24,453	
58013. IND INDIA	XXX			1,409		1,409	
58014. IRL IRELAND	XXX			4,918		4,918	
58015. ISR ISRAEL	XXX	3,490		3,828		7,318	
58016. JPN JAPAN	XXX			39,953		39,953	
58017. KOR KOREA, REPUBLIC OF	XXX			698		698	
58018. LBN LEBANON	XXX			2,379		2,379	
58019. LUX LUXEMBOURG	XXX			1,725		1,725	
58020. MEX MEXICO	XXX			554		554	
58021. NLD NETHERLANDS	XXX	552		4,634		5,186	
58022. NZL NEW ZEALAND	XXX			6,516		6,516	
58023. NOR NORWAY	XXX			1,465		1,465	
58024. PHL PHILIPPINES	XXX	646				646	
58025. POL POLAND	XXX			1,270		1,270	
58026. ROM ROMANIA	XXX	595				595	
58027. RUS RUSSIAN FEDERATION	XXX			1,129		1,129	
58028. SGP SINGAPORE	XXX	479		17,493		17,972	
58029. ESP SPAIN	XXX	3,445		393		3,839	
58030. SWE SWEDEN	XXX	919				919	
58031. CHE SWITZERLAND	XXX	237		16,675		16,912	
58032. THA THAILAND	XXX	114				114	
58033. ARE UNITED ARAB EMIRATES	XXX			2,697		2,697	
58034. GBR UNITED KINGDOM	XXX	1,854		57,946		59,800	
58997. Summary of remaining write-ins for Line 58 from overflow page	XXX	25,177		262,845		288,022	

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY
OVERFLOW PAGE FOR WRITE-INS

Additional Write-ins for Analysis of Operations Line 8.3

	1 Total	2 Industrial Life	Ordinary			6 Credit Life (Group and Individual)	Group		Accident and Health			12 Aggregate of All Other Lines of Business
			3 Life Insurance	4 Individual Annuities	5 Supplementary Contracts		7 Life Insurance (a)	8 Annuities	9 Group	10 Credit (Group and Individual)	11 Other	
08.304. Income from Assumed Modco Reinsurance	101,453						2,208		99,245			
08.397. Summary of remaining write-ins for Line 8.3 from overflow page	101,453						2,208		99,245			

Additional Write-ins for Analysis of Operations Line 27

	1 Total	2 Industrial Life	Ordinary			6 Credit Life (Group and Individual)	Group		Accident and Health			12 Aggregate of All Other Lines of Business
			3 Life Insurance	4 Individual Annuities	5 Supplementary Contracts		7 Life Insurance (a)	8 Annuities	9 Group	10 Credit (Group and Individual)	11 Other	
2704. Transfers on account of group package policies	991,810								991,810			
2705. Fines and penalties paid to regulatory authorities	45											31
2797. Summary of remaining write-ins for Line 27 from overflow page	991,855		14						991,810			31

Additional Write-ins for Schedule H Part 1 Line 11

	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 %	
1104. Fines and penalties paid to regulatory authorities	31	0.0							20	0.0	11	0.0							
1197. Summary of remaining write-ins for Line 11 from overflow page	31	0.0							20	0.0	11	0.0							



SUPPLEMENT FOR THE YEAR 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

VM-20 RESERVES SUPPLEMENT – PART 1

Life Insurance Reserves Valued According to VM-20 by Product Type
 For The Year Ended December 31, 2017
 (To Be Filed by March 1)
 (\$000 Omitted Except for Number of Policies)

NAIC Group Code

NAIC Company Code

	Prior Year	Current Year																	
	1 Reported Reserve	2 Reported Reserve	3 Deferred Premium Asset	SECTION A					SECTION B				SECTION C						
				4 Net Premium Reserve	5 Deterministic Reserve	6 Stochastic Reserve	7 Number of Policies	8 Face Amount	9 Net Premium Reserve	10 Deterministic Reserve	11 Number of Policies	12 Face Amount	13 Net Premium Reserve	14 Number of Policies	15 Face Amount				
1. Post-Reinsurance-Ceded Reserve																			
1.1. Term Life Insurance							XXX	XXX				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1.2. Universal Life With Secondary Guarantee							XXX	XXX				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1.3. Non-Participating Whole Life							XXX	XXX				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1.4. Participating Whole Life							XXX	XXX				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1.5. Universal Life Without Secondary Guarantee							XXX	XXX				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1.6. Variable Universal Life							XXX	XXX				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1.7. Variable Life							XXX	XXX				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1.8. Indexed Life							XXX	XXX				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1.9. Aggregate Write-Ins for Other Products							XXX	XXX				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2. Total Post-Reinsurance-Ceded Reserve (Sum of Lines 1.1 through 1.9)				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3. Pre-Reinsurance-Ceded Reserve																			
3.1. Term Life Insurance																			
3.2. Universal Life With Secondary Guarantee																			
3.3. Non-Participating Whole Life																			
3.4. Participating Whole Life																			
3.5. Universal Life Without Secondary Guarantee																			
3.6. Variable Universal Life																			
3.7. Variable Life																			
3.8. Indexed Life																			
3.9. Aggregate Write-Ins for Other Products																			
4. Total Pre-Reinsurance-Ceded Reserve (Sum of Lines 3.1 through 3.9)				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
5. Total Reserves Ceded (Line 4 minus Line 2)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
DETAILS OF WRITE-INS																			
1.901.							XXX	XXX				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1.902.							XXX	XXX				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1.903.							XXX	XXX				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1.998. Summary of remaining write-ins for Line 1.9 from overflow page							XXX	XXX				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1.999. Totals (Lines 1.901 thru 1.903 plus 1.998) (Line 1.9 above)							XXX	XXX				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3.901.																			
3.902.																			
3.903.																			
3.998. Summary of remaining write-ins for Line 3.9 from overflow page																			
3.999. Totals (Lines 3.901 thru 3.903 plus 3.998) (Line 3.9 above)																			

NONE

456-1

SUPPLEMENT FOR THE YEAR 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

VM-20 RESERVES SUPPLEMENT – PART 2

Reserves for Policies Not Based on VM-20 as a Result of the Three-Year Transition Period
 For The Year Ended December 31, 2017
 (To Be Filed by March 1)
 (\$000 Omitted Except for Number of Policies)

	Three-Year Transition Period					
	Prior Year		Current Year			
	1 Gross Reserve	2 Net Reserve	3 Gross Reserve	4 Net Reserve	5 Number of Policies	6 Face Amount
1. Life Insurance Reserves						
1.1. Term Life89	.89	1,645	79,081
1.2. Universal Life With Secondary Guarantee			2	2	152	5,313
1.3. Non-Participating Whole Life			1,927	1,927	138,610	2,401,919
1.4. Participating Whole Life						
1.5. Universal Life Without Secondary Guarantee						
1.6. Variable Universal Life						
1.7. Variable Life						
1.8. Indexed Life						
1.9. Aggregate Write-Ins for Other Products						
2. Total Post-Reinsurance-Ceded Reserve (Sum of Lines 1.1 through 1.9)			2,018	2,018	140,407	2,486,312
DETAILS OF WRITE-INS						
1.901.						
1.902.						
1.903.						
1.998. Summary of remaining write-ins for Line 1.9 from overflow page						
1.999. Totals (Lines 1.901 thru 1.903 plus 1.998) (Line 1.9 above)						

VM-20 RESERVES SUPPLEMENT – PART 3

Companywide Exemption
 For The Year Ended December 31, 2017
 (To Be Filed by March 1)
 (\$000 Omitted Except for Number of Policies)

Companywide Exemption as defined in the NAIC adopted Valuation Manual (VM)	
1. Has the company filed and been granted a companywide exemption from the reserve requirements of VM-20 of the Valuation Manual by their state of domicile?	Yes [] No [X]
2. If the response to Question 1 is "Yes", then check the source of the granted "companywide exemption" definition? (Check either 2.1, 2.2 or 2.3)	
2.1 NAIC Adopted VM []	
2.2 State Statute (SVL) [] Complete items "a" and "b" as appropriate.	
a. Is the criteria in the State Statute (SVL) different from the NAIC adopted VM?	Yes [] No []
b. If the answer to "a" above is "Yes", provide the criteria the state has used to grant the companywide exemption (e.g., Group/Legal Entity criteria) and the minimum reserve requirements that are required by the state of domicile (if the minimum reserve requirements are the same as the Adopted VM, write SAME AS NAIC VM):
2.3 State Regulation [] Complete items "a" and "b" as appropriate.	
a. Is the criteria in the State Regulation different from the NAIC adopted VM?	Yes [] No []
b. If the answer to "a" above is "Yes", provide the criteria the state has used to grant the companywide exemption (e.g., Group/Legal Entity criteria) and the minimum reserve requirements that are required by the state of domicile (if the minimum reserve requirements are the same as the Adopted VM, write SAME AS NAIC VM):



SUPPLEMENT FOR THE YEAR 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

SCHEDULE O SUPPLEMENT

For The Year Ended December 31, 2017 (To Be Filed by March 1)

Of The PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY ADDRESS (City, State and Zip Code) CHATTANOOGA, TN 37402-1330 NAIC Group Code 0565 NAIC Company Code 68195 Employer's Identification Number (FEIN) 62-0331200

SUPPLEMENTAL SCHEDULE O - PART 1

Development of Incurred Losses (\$000 Omitted)

Section A - Group Accident and Health

Table with 5 columns: Years in Which Losses Were Incurred, 1 2013, 2 2014, 3 2015, 4 2016, 5 2017(a). Rows 1-6 showing cumulative net amounts paid policyholders.

Section B - Other Accident and Health

Table with 5 columns: Years in Which Losses Were Incurred, 1 2013, 2 2014, 3 2015, 4 2016, 5 2017(a). Rows 1-6 showing 'NONE' for all years.

Section C - Credit Accident and Health

Table with 5 columns: Years in Which Losses Were Incurred, 1 2013, 2 2014, 3 2015, 4 2016, 5 2017(a). Rows 1-6 showing 'NONE' for all years.

Section D -

Table with 5 columns: Years in Which Losses Were Incurred, 1 2013, 2 2014, 3 2015, 4 2016, 5 2017(a). Rows 1-6 showing 'NONE' for all years.

Section E -

Table with 5 columns: Years in Which Losses Were Incurred, 1 2013, 2 2014, 3 2015, 4 2016, 5 2017(a). Rows 1-6 showing 'NONE' for all years.

Section F -

Table with 5 columns: Years in Which Losses Were Incurred, 1 2013, 2 2014, 3 2015, 4 2016, 5 2017(a). Rows 1-6 showing 'NONE' for all years.

Section G -

Table with 5 columns: Years in Which Losses Were Incurred, 1 2013, 2 2014, 3 2015, 4 2016, 5 2017(a). Rows 1-6 showing 'NONE' for all years.

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

SUPPLEMENT FOR THE YEAR 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY
SCHEDULE O SUPPLEMENT

SUPPLEMENTAL SCHEDULE O - PART 2

Development of Incurred Losses
 (\$000 Omitted)

Section A - Group Accident and Health

Years in Which Losses Were Incurred	Net Amounts Paid for Cost Containment Expenses				
	1 2013	2 2014	3 2015	4 2016	5 2017
1. Prior					
2. 2013	3				
3. 2014	XXX	2			
4. 2015	XXX	XXX	2		
5. 2016	XXX	XXX	XXX	2	
6. 2017	XXX	XXX	XXX	XXX	2

Section B - Other Accident and Health

1. Prior					
2. 2013					
3. 2014	NONE				
4. 2015	NONE				
5. 2016	NONE				
6. 2017	NONE				XXX

Section C - Credit Accident and Health

1. Prior					
2. 2013					
3. 2014	NONE				
4. 2015	NONE				
5. 2016	NONE				
6. 2017	NONE				XXX

Section D -

1. Prior					
2. 2013					
3. 2014	NONE				
4. 2015	NONE				
5. 2016	NONE				
6. 2017	NONE				XXX

Section E -

1. Prior					
2. 2013					
3. 2014	NONE				
4. 2015	NONE				
5. 2016	NONE				
6. 2017	NONE				XXX

Section F -

1. Prior					
2. 2013					
3. 2014	NONE				
4. 2015	NONE				
5. 2016	NONE				
6. 2017	NONE				XXX

Section G -

1. Prior					
2. 2013					
3. 2014	NONE				
4. 2015	NONE				
5. 2016	NONE				
6. 2017	NONE				XXX

SUPPLEMENT FOR THE YEAR 2017 OF THE PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY
SCHEDULE O SUPPLEMENT

SUPPLEMENTAL SCHEDULE O - PART 3

Development of Incurred Losses
 (\$000 Omitted)

Section A - Group Accident and Health

Years in Which Losses Were Incurred	Sum of Net Cumulative Amount Paid Policyholders and Claim Liability and Reserve Outstanding at End of Year				
	1 2013	2 2014	3 2015	4 2016	5 2017
1. 2013	4,219	2,969	2,949	XXX	XXX
2. 2014	XXX	2,184	2,123	2,120	XXX
3. 2015	XXX	XXX	15		
4. 2016	XXX	XXX	XXX	.27	.27
5. 2017	XXX	XXX	XXX	XXX	

Section B - Other Accident and Health

1. 2013				XXX	XXX
2. 2014	XXX				XXX
3. 2015	XXX	XXX			
4. 2016	XXX	XXX	XXX		
5. 2017	XXX	XXX	XXX	XXX	

NONE

Section C - Credit Accident and Health

1. 2013				XXX	XXX
2. 2014	XXX				XXX
3. 2015	XXX	XXX			
4. 2016	XXX	XXX	XXX		
5. 2017	XXX	XXX	XXX	XXX	

NONE

Section D -

1. 2013				XXX	XXX
2. 2014	XXX				XXX
3. 2015	XXX	XXX			
4. 2016	XXX	XXX	XXX		
5. 2017	XXX	XXX	XXX	XXX	

NONE

Section E -

1. 2013				XXX	XXX
2. 2014	XXX				XXX
3. 2015	XXX	XXX			
4. 2016	XXX	XXX	XXX		
5. 2017	XXX	XXX	XXX	XXX	

NONE

Section F -

1. 2013				XXX	XXX
2. 2014	XXX				XXX
3. 2015	XXX	XXX			
4. 2016	XXX	XXX	XXX		
5. 2017	XXX	XXX	XXX	XXX	

NONE

Section G -

1. 2013				XXX	XXX
2. 2014	XXX				XXX
3. 2015	XXX	XXX			
4. 2016	XXX	XXX	XXX		
5. 2017	XXX	XXX	XXX	XXX	

NONE

**SCHEDULE O SUPPLEMENT
SUPPLEMENTAL SCHEDULE O - PART 4**

**Development of Incurred Losses
(\$000 Omitted)**

Section A - Group Accident and Health

Years in Which Losses Were Incurred	Sum of Net Cumulative Amount Paid Policyholders, Cost Containment Expenses, and Claim and Cost Containment Liability and Reserve Outstanding at End of Year				
	1 2013	2 2014	3 2015	4 2016	5 2017
1. 2013	4,222				
2. 2014	XXX	2,186			
3. 2015	XXX	XXX	17		
4. 2016	XXX	XXX	XXX	28	
5. 2017	XXX	XXX	XXX	XXX	2

Section B - Other Accident and Health

1. 2013					
2. 2014	XXX				
3. 2015	XXX	XXX			
4. 2016	XXX	XXX	XXX		
5. 2017	XXX	XXX	XXX	XXX	

Section C - Credit Accident and Health

1. 2013					
2. 2014	XXX				
3. 2015	XXX	XXX			
4. 2016	XXX	XXX	XXX		
5. 2017	XXX	XXX	XXX	XXX	

Section D

1. 2013					
2. 2014	XXX				
3. 2015	XXX	XXX			
4. 2016	XXX	XXX	XXX		
5. 2017	XXX	XXX	XXX	XXX	

Section E

1. 2013					
2. 2014	XXX				
3. 2015	XXX	XXX			
4. 2016	XXX	XXX	XXX		
5. 2017	XXX	XXX	XXX	XXX	

Section F

1. 2013					
2. 2014	XXX				
3. 2015	XXX	XXX			
4. 2016	XXX	XXX	XXX		
5. 2017	XXX	XXX	XXX	XXX	

Section G

1. 2013					
2. 2014	XXX				
3. 2015	XXX	XXX			
4. 2016	XXX	XXX	XXX		
5. 2017	XXX	XXX	XXX	XXX	

SUPPLEMENTAL SCHEDULE O - PART 5

(\$000 OMITTED)

Reserve and Liability Methodology - Exhibits 6 and 8

Line of Business	1 Methodology	2 Amount
1. Industrial Life		
2. Ordinary Life	Standard	20,310
3. Individual Annuity		
4. Supplementary Contracts		
5. Credit Life		
6. Group Life	Standard	2,905
7. Group Annuities		
8. Group Accident and Health	Standard/Dev *	22,409
9. Credit Accident and Health		
10. Other Accident and Health		3,569,609
11. Total		3,615,234

Line 8 Split: Standard = 21,904 Development = 505

ALPHABETICAL INDEX

ANNUAL STATEMENT BLANK

Analysis of Increase in Reserves During The Year	7
Analysis of Operations By Lines of Business	6
Asset Valuation Reserve Default Component	30
Asset Valuation Reserve Equity	32
Asset Valuation Reserve Replications (Synthetic) Assets	35
Asset Valuation Reserve	29
Assets	2
Cash Flow	5
Exhibit 1 - Part 1 - Premiums and Annuity Considerations for Life and Accident and Health Contracts	9
Exhibit 1 - Part 2 - Dividends and Coupons Applied, Reinsurance Commissions and Expense	10
Exhibit 2 - General Expenses	11
Exhibit 3 - Taxes, Licenses and Fees (Excluding Federal Income Taxes)	11
Exhibit 4 - Dividends or Refunds	11
Exhibit 5 - Aggregate Reserve for Life Contracts	12
Exhibit 5 - Interrogatories	13
Exhibit 5A - Changes in Bases of Valuation During The Year	13
Exhibit 6 - Aggregate Reserves for Accident and Health Contracts	14
Exhibit 7 - Deposit-Type Contracts	15
Exhibit 8 - Claims for Life and Accident and Health Contracts - Part 1	16
Exhibit 8 - Claims for Life and Accident and Health Contracts - Part 2	17
Exhibit of Capital Gains (Losses)	8
Exhibit of Life Insurance	25
Exhibit of Net Investment Income	8
Exhibit of Nonadmitted Assets	18
Exhibit of Number of Policies, Contracts, Certificates, Income Payable and Account Values	27
Five-Year Historical Data	22
Form for Calculating the Interest Maintenance Reserve (IMR)	28
General Interrogatories	20
Jurat Page	1
Liabilities, Surplus and Other Funds	3
Life Insurance (State Page)	24
Notes To Financial Statements	19
Overflow Page For Write-ins	55
Schedule A - Part 1	E01
Schedule A - Part 2	E02
Schedule A - Part 3	E03
Schedule A - Verification Between Years	SI02
Schedule B - Part 1	E04
Schedule B - Part 2	E05
Schedule B - Part 3	E06
Schedule B - Verification Between Years	SI02
Schedule BA - Part 1	E07
Schedule BA - Part 2	E08
Schedule BA - Part 3	E09
Schedule BA - Verification Between Years	SI03
Schedule D - Part 1	E10
Schedule D - Part 1A - Section 1	SI05
Schedule D - Part 1A - Section 2	SI08
Schedule D - Part 2 - Section 1	E11
Schedule D - Part 2 - Section 2	E12
Schedule D - Part 3	E13
Schedule D - Part 4	E14
Schedule D - Part 5	E15
Schedule D - Part 6 - Section 1	E16
Schedule D - Part 6 - Section 2	E16
Schedule D - Summary By Country	SI04
Schedule D - Verification Between Years	SI03
Schedule DA - Part 1	E17
Schedule DA - Verification Between Years	SI10

ANNUAL STATEMENT BLANK (Continued)

Schedule DB - Part A - Section 1	E18
Schedule DB - Part A - Section 2	E19
Schedule DB - Part A - Verification Between Years	SI11
Schedule DB - Part B - Section 1	E20
Schedule DB - Part B - Section 2	E21
Schedule DB - Part B - Verification Between Years	SI11
Schedule DB - Part C - Section 1	SI12
Schedule DB - Part C - Section 2	SI13
Schedule DB - Part D - Section 1	E22
Schedule DB - Part D - Section 2	E23
Schedule DB - Verification	SI14
Schedule DL - Part 1	E24
Schedule DL - Part 2	E25
Schedule E - Part 1 - Cash	E26
Schedule E - Part 2 - Cash Equivalents	E27
Schedule E - Part 3 - Special Deposits	E28
Schedule E - Verification Between Years	SI15
Schedule F	36
Schedule H - Accident and Health Exhibit - Part 1	37
Schedule H - Part 2, Part 3 and Part 4	38
Schedule H - Part 5 - Health Claims	39
Schedule S - Part 1 - Section 1	40
Schedule S - Part 1 - Section 2	41
Schedule S - Part 2	42
Schedule S - Part 3 - Section 1	43
Schedule S - Part 3 - Section 2	44
Schedule S - Part 4	45
Schedule S - Part 5	46
Schedule S - Part 6	47
Schedule S - Part 7	48
Schedule T - Part 2 Interstate Compact	50
Schedule T - Premiums and Annuity Considerations	49
Schedule Y - Information Concerning Activities of Insurer Members of a Holding Company Group	51
Schedule Y - Part 1A - Detail of Insurance Holding Company System	52
Schedule Y - Part 2 - Summary of Insurer's Transactions With Any Affiliates	53
Summary Investment Schedule	SI01
Summary of Operations	4
Supplemental Exhibits and Schedules Interrogatories	54