



LIFE AND ACCIDENT AND HEALTH COMPANIES - ASSOCIATION EDITION

# ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2010  
OF THE CONDITION AND AFFAIRS OF THE

## AMICA LIFE INSURANCE COMPANY

NAIC Group Code 0028 0028 NAIC Company Code 72222 Employer's ID Number 05-0340166  
(Current) (Prior)

Organized under the Laws of Rhode Island, State of Domicile or Port of Entry Rhode Island

Country of Domicile United States of America

Incorporated/Organized 06/13/1968 Commenced Business 05/06/1970

Statutory Home Office 100 Amica Way, Lincoln, RI 02865-1156  
(Street and Number) (City or Town, State and Zip Code)

Main Administrative Office 100 Amica Way  
(Street and Number)  
Lincoln, RI 02865-1156, 800-652-6422  
(City or Town, State and Zip Code) (Area Code) (Telephone Number)

Mail Address P.O. Box 6008, Providence, RI 02940-6008  
(Street and Number or P.O. Box) (City or Town, State and Zip Code)

Primary Location of Books and Records 100 Amica Way  
(Street and Number)  
Lincoln, RI 02865-1156, 800-652-6422  
(City or Town, State and Zip Code) (Area Code) (Telephone Number)

Internet Website Address www.amica.com

Statutory Statement Contact Stephen Francis Dolan, 800-652-6422  
(Name) (Area Code) (Telephone Number)  
sdolan@amica.com, 401-334-1240  
(E-mail Address) (FAX Number)

### OFFICERS

President Robert Anthony DiMuccio Treasurer James Parker Loring #  
Secretary Robert Kenneth MacKenzie Actuary Ernst & Young LLP

### OTHER

James Edward McDermott Jr Senior Vice President Robert Karl Benson Senior Vice President Robert Paul Suglia Senior Vice President  
Stephen Francis Dolan Vice President

### DIRECTORS OR TRUSTEES

Jeffrey Paul Aiken Patricia Walsh Chadwick Robert Anthony DiMuccio  
Andrew Martin Erickson Edward Francis DeGraan Barry George Hittner  
Michael David Jeans Ronald Keith Machtley Richard Alan Plotkin  
Donald Julian Reaves Cheryl Watkins Snead Thomas Alfred Taylor

State of Rhode Island SS:  
County of Providence

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.

Robert Anthony DiMuccio  
President

Robert Kenneth MacKenzie  
Secretary

James Parker Loring  
Treasurer

Subscribed and sworn to before me this  
9th day of February, 2011

- 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.....

Ann Marie Oceau  
Notary Public  
June 8, 2014



**ANNUAL STATEMENT FOR THE YEAR 2010 OF THE AMICA LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Alabama

DURING THE YEAR 2010

NAIC Group Code 0028

**LIFE INSURANCE**

NAIC Company Code 72222

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	136,782		161		136,943
2. Annuity considerations	47,297				47,297
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	184,079		161		184,240
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
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)					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits	100,000				100,000
10. Matured endowments					
11. Annuity benefits	27,218				27,218
12. Surrender values and withdrawals for life contracts	14,266				14,266
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health					
15. Totals	141,484				141,484
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
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	1	100,000							1	100,000
Settled during current year:										
18.1 By payment in full	1	100,000							1	100,000
18.2 By payment on compromised claims										
18.3 Totals paid	1	100,000							1	100,000
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	1	100,000							1	100,000
19. Unpaid Dec. 31, current year (16+17-18.6)										
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	167	50,242,000	(a)			35,000			167	50,277,000
21. Issued during year	10	4,300,000							10	4,300,000
22. Other changes to in force (Net)		2,027,000				(5,000)				2,022,000
23. In force December 31 of current year	177	56,569,000	(a)			30,000			177	56,599,000

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

**ACCIDENT AND HEALTH INSURANCE**

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Program 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)					

**NONE**

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



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE AMICA LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Alaska

DURING THE YEAR 2010

NAIC Group Code 0028

LIFE INSURANCE

NAIC Company Code 72222

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.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: 24. Group Policies (b), 24.1 Federal Employees Health Benefits Program 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). Large 'NONE' watermark is present.

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



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE AMICA LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Arizona

DURING THE YEAR 2010

NAIC Group Code 0028

LIFE INSURANCE

NAIC Company Code 72222

Table with 5 columns: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, Ordinary, Credit Life (Group and Individual), Group, Industrial, Total. Rows include Life insurance, Annuity considerations, Deposit-type contract funds, Other considerations, and Grand Totals.

Table with 10 columns: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, Ordinary (No., Amount), Credit Life (No. of Ind.Pols. & Gr. Certifs., Amount), Group (No. of Certifs., Amount), Industrial (No., Amount), Total (No., Amount). Rows include Unpaid December 31, prior year, Incurred during current year, Settled 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: Direct Premiums, Direct Premiums Earned, Dividends Paid Or Credited On Direct Business, Direct Losses Paid, Direct Losses Incurred. Rows include Group Policies (b), Federal Employees Health Benefits Program premium (b), Medicare Title XVIII exempt from state taxes or fees, and other accident only. A large 'NONE' watermark is overlaid on the table.

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



**ANNUAL STATEMENT FOR THE YEAR 2010 OF THE AMICA LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Arkansas

DURING THE YEAR 2010

NAIC Group Code 0028

**LIFE INSURANCE**

NAIC Company Code 72222

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	87,616				87,616
2. Annuity considerations	2,000				2,000
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	89,616				89,616
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
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)					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits					
10. Matured endowments					
11. Annuity benefits	3,775				3,775
12. Surrender values and withdrawals for life contracts	45,987				45,987
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health	2,707				2,707
15. Totals	52,469				52,469
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
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)										
<b>POLICY EXHIBIT</b>						No. of Policies				
20. In force December 31, prior year	91	25,434,668	(a)						91	25,434,668
21. Issued during year	3	1,200,000							3	1,200,000
22. Other changes to in force (Net)	(4)	(447,654)							(4)	(447,654)
23. In force December 31 of current year	90	26,187,014	(a)						90	26,187,014

(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 Program 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)					

**NONE**

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



**ANNUAL STATEMENT FOR THE YEAR 2010 OF THE AMICA LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF California

DURING THE YEAR 2010

NAIC Group Code 0028

**LIFE INSURANCE**

NAIC Company Code 72222

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	3,875,913		70,945		3,946,858
2. Annuity considerations	869,667				869,667
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	4,745,580		70,945		4,816,525
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
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)					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits	1,060,855				1,060,855
10. Matured endowments					
11. Annuity benefits	546,028				546,028
12. Surrender values and withdrawals for life contracts	330,325				330,325
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health	29,987				29,987
15. Totals	1,967,195				1,967,195
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
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	3	218,893							3	218,893
17. Incurred during current year	12	1,053,038							12	1,053,038
Settled during current year:										
18.1 By payment in full	11	1,060,855							11	1,060,855
18.2 By payment on compromised claims										
18.3 Totals paid	11	1,060,855							11	1,060,855
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	11	1,060,855							11	1,060,855
19. Unpaid Dec. 31, current year (16+17-18.6)	4	211,076							4	211,076
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	3,943	1,718,543,675	(a)			15,451,400			3,943	1,733,995,075
21. Issued during year	198	110,635,000							198	110,635,000
22. Other changes to in force (Net)	(190)	(54,721,083)				371,800			(190)	(54,349,283)
23. In force December 31 of current year	3,951	1,774,457,592	(a)			15,823,200			3,951	1,790,280,792

(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 Program 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)					

**NONE**

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



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE AMICA LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Colorado

DURING THE YEAR 2010

NAIC Group Code 0028

**LIFE INSURANCE**

NAIC Company Code 72222

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	1,048,255		24,505		1,072,760
2. Annuity considerations	448,799				448,799
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	1,497,054		24,505		1,521,559
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
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)					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits	201,433				201,433
10. Matured endowments					
11. Annuity benefits	117,957				117,957
12. Surrender values and withdrawals for life contracts	96,961				96,961
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health	474				474
15. Totals	416,825				416,825
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
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	146,433							2	146,433
17. Incurred during current year	2	55,000							2	55,000
Settled during current year:										
18.1 By payment in full	4	201,433							4	201,433
18.2 By payment on compromised claims										
18.3 Totals paid	4	201,433							4	201,433
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	4	201,433							4	201,433
19. Unpaid Dec. 31, current year (16+17-18.6)										
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	1,226	435,833,466	(a)		No. of Policies	5,370,600			1,226	441,204,066
21. Issued during year	95	39,653,000							95	39,653,000
22. Other changes to in force (Net)	(50)	(7,470,989)				292,900			(50)	(7,178,089)
23. In force December 31 of current year	1,271	468,015,477	(a)			5,663,500			1,271	473,678,977

(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 Program 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)					

NONE

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



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE AMICA LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Connecticut

DURING THE YEAR 2010

NAIC Group Code 0028

LIFE INSURANCE

NAIC Company Code 72222

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, Deposit-type contract funds, Other 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, prior year, Incurred during current year, Settled during current year, 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 Program premium (b), Medicare Title XVIII exempt from state taxes or fees, Other Individual Policies, Non-cancelable (b), Guaranteed renewable (b), Non-renewable for stated reasons only (b), Other accident only, All other (b), Totals (sum of Lines 25.1 to 25.5), Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).

NONE

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



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE AMICA LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Delaware

DURING THE YEAR 2010

NAIC Group Code 0028

**LIFE INSURANCE**

NAIC Company Code 72222

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	182,003		781		182,784
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	182,003		781		182,784
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
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)					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits					
10. Matured endowments					
11. Annuity benefits	25,349				25,349
12. Surrender values and withdrawals for life contracts	29,312				29,312
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health					
15. Totals	54,661				54,661
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
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										
18. 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)										
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	208	61,355,330	(a)			170,000			208	61,525,330
21. Issued during year	14	6,200,000							14	6,200,000
22. Other changes to in force (Net)	(1)	81,614				(5,000)			(1)	76,614
23. In force December 31 of current year	221	67,636,944	(a)			165,000			221	67,801,944

(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 Program 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)					

**NONE**

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



**ANNUAL STATEMENT FOR THE YEAR 2010 OF THE AMICA LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF District of Columbia

DURING THE YEAR 2010

NAIC Group Code 0028

**LIFE INSURANCE**

NAIC Company Code 72222

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	214,111				214,111
2. Annuity considerations	12,000				12,000
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	226,111				226,111
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
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)					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits	536,000				536,000
10. Matured endowments					
11. Annuity benefits	1,324				1,324
12. Surrender values and withdrawals for life contracts	4,759				4,759
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health					
15. Totals	542,083				542,083
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
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	1	536,000							1	536,000
Settled during current year:										
18.1 By payment in full	1	536,000							1	536,000
18.2 By payment on compromised claims										
18.3 Totals paid	1	536,000							1	536,000
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	1	536,000							1	536,000
19. Unpaid Dec. 31, current year (16+17-18.6)										
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	169	78,829,956	(a)		No. of Policies				169	78,829,956
21. Issued during year	24	23,880,000							24	23,880,000
22. Other changes to in force (Net)	(7)	(5,757,176)							(7)	(5,757,176)
23. In force December 31 of current year	186	96,952,780	(a)						186	96,952,780

(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 Program 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)					

**NONE**

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



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE AMICA LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Florida

DURING THE YEAR 2010

NAIC Group Code 0028

**LIFE INSURANCE**

NAIC Company Code 72222

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	3,588,644		119,829		3,708,473
2. Annuity considerations	1,901,311				1,901,311
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	5,489,955		119,829		5,609,784
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
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)					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits	2,160,900		50,700		2,211,600
10. Matured endowments					
11. Annuity benefits	2,002,142				2,002,142
12. Surrender values and withdrawals for life contracts	1,382,538				1,382,538
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health	32,335				32,335
15. Totals	5,577,915		50,700		5,628,615
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
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	176,012							2	176,012
17. Incurred during current year	17	2,135,000			2	100,700			19	2,235,700
Settled during current year:										
18.1 By payment in full	17	2,160,900			1	50,700			18	2,211,600
18.2 By payment on compromised claims										
18.3 Totals paid	17	2,160,900			1	50,700			18	2,211,600
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	17	2,160,900			1	50,700			18	2,211,600
19. Unpaid Dec. 31, current year (16+17-18.6)	2	150,112			1	50,000			3	200,112
<b>POLICY EXHIBIT</b>						No. of Policies				
20. In force December 31, prior year	4,191	1,113,769,359	(a)			26,315,200			4,191	1,140,084,559
21. Issued during year	256	79,481,193							256	79,481,193
22. Other changes to in force (Net)	(220)	(40,807,845)				873,000			(220)	(39,934,845)
23. In force December 31 of current year	4,227	1,152,442,707	(a)			27,188,200			4,227	1,179,630,907

(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 Program 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)					

**NONE**

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



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE AMICA LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Georgia

DURING THE YEAR 2010

NAIC Group Code 0028

LIFE INSURANCE

NAIC Company Code 72222

Table with 5 columns: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, Ordinary, Credit Life (Group and Individual), Group, Industrial, Total. Rows include Life insurance, Annuity considerations, Death benefits, etc.

Table with 10 columns: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, Ordinary (No., Amount), Credit Life (No. of Ind.Pols. & Gr. Certifs., Amount), Group (No. of Certifs., Amount), Industrial (No., Amount), Total (No., Amount). Rows include Unpaid December 31, Incurred during current year, etc.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: Direct Premiums, Direct Premiums Earned, Dividends Paid Or Credited On Direct Business, Direct Losses Paid, Direct Losses Incurred. Row 24.1-24.4 shows Federal Employees Health Benefits Program, Medicare Title XVIII, etc. A large 'NONE' watermark is present across the table.

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



**ANNUAL STATEMENT FOR THE YEAR 2010 OF THE AMICA LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Hawaii

DURING THE YEAR 2010

NAIC Group Code 0028

**LIFE INSURANCE**

NAIC Company Code 72222

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	21,323		574		21,897
2. Annuity considerations	22,718				22,718
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	44,041		574		44,615
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
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)					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits					
10. Matured endowments					
11. Annuity benefits	2,728				2,728
12. Surrender values and withdrawals for life contracts	11,085				11,085
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health					
15. Totals	13,813				13,813
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
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)										
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	32	5,751,207	(a)		No. of Policies	125,000			32	5,876,207
21. Issued during year										
22. Other changes to in force (Net)	(5)	(1,021,100)				(125,000)			(5)	(1,146,100)
23. In force December 31 of current year	27	4,730,107	(a)						27	4,730,107

(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)					
24.1 Federal Employees Health Benefits Program 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)					

**NONE**

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



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE AMICA LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Idaho

DURING THE YEAR 2010

NAIC Group Code 0028

LIFE INSURANCE

NAIC Company Code 72222

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.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 various sub-categories. A large 'NONE' watermark is present across the table.

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



**ANNUAL STATEMENT FOR THE YEAR 2010 OF THE AMICA LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Illinois

DURING THE YEAR 2010

NAIC Group Code 0028

**LIFE INSURANCE**

NAIC Company Code 72222

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	1,143,368		24,570		1,167,938
2. Annuity considerations	160,539				160,539
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	1,303,907		24,570		1,328,477
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
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)					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits	1,154,757				1,154,757
10. Matured endowments					
11. Annuity benefits	138,996				138,996
12. Surrender values and withdrawals for life contracts	111,804				111,804
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health					
15. Totals	1,405,557				1,405,557
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
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	5,000							1	5,000
17. Incurred during current year	4	1,255,000							4	1,255,000
Settled during current year:										
18.1 By payment in full	3	1,154,757							3	1,154,757
18.2 By payment on compromised claims										
18.3 Totals paid	3	1,154,757							3	1,154,757
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	3	1,154,757							3	1,154,757
19. Unpaid Dec. 31, current year (16+17-18.6)	2	105,243							2	105,243
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	1,208	496,193,909	(a)			5,351,200			1,208	501,545,109
21. Issued during year	75	36,793,000							75	36,793,000
22. Other changes to in force (Net)	(38)	(9,650,643)				(101,600)			(38)	(9,752,243)
23. In force December 31 of current year	1,245	523,336,266	(a)			5,249,600			1,245	528,585,866

(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 Program 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)					

**NONE**

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



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE AMICA LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Indiana

DURING THE YEAR 2010

NAIC Group Code 0028

**LIFE INSURANCE**

NAIC Company Code 72222

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	372,293		5,753		378,046
2. Annuity considerations	16,200				16,200
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	388,493		5,753		394,246
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
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)					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits					
10. Matured endowments					
11. Annuity benefits	36,372				36,372
12. Surrender values and withdrawals for life contracts	595				595
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health	1,199				1,199
15. Totals	38,166				38,166
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
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)										
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	491	167,210,391	(a)			1,253,000			491	168,463,391
21. Issued during year	32	11,125,000							32	11,125,000
22. Other changes to in force (Net)	(16)	(3,385,832)				282,200			(16)	(3,103,632)
23. In force December 31 of current year	507	174,949,559	(a)			1,535,200			507	176,484,759

(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 Program 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)					

**NONE**

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



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE AMICA LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Iowa

DURING THE YEAR 2010

NAIC Group Code 0028

**LIFE INSURANCE**

NAIC Company Code 72222

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	73,902		734		74,636
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	73,902		734		74,636
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
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)					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits			79,900		79,900
10. Matured endowments					
11. Annuity benefits	3,610				3,610
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	3,610		79,900		83,510
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
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					1	79,900			1	79,900
Settled during current year:										
18.1 By payment in full					1	79,900			1	79,900
18.2 By payment on compromised claims										
18.3 Totals paid					1	79,900			1	79,900
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements					1	79,900			1	79,900
19. Unpaid Dec. 31, current year (16+17-18.6)										
<b>POLICY EXHIBIT</b>						No. of Policies				
20. In force December 31, prior year	107	37,018,178	(a)			159,900			107	37,178,078
21. Issued during year	8	4,500,000							8	4,500,000
22. Other changes to in force (Net)	(3)	309,330				(79,900)			(3)	229,430
23. In force December 31 of current year	112	41,827,508	(a)			80,000			112	41,907,508

(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 Program 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)					

**NONE**

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



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE AMICA LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Kansas

DURING THE YEAR 2010

NAIC Group Code 0028

LIFE INSURANCE

NAIC Company Code 72222

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. 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 various sub-categories. A large 'NONE' watermark is overlaid on the table.

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



**ANNUAL STATEMENT FOR THE YEAR 2010 OF THE AMICA LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Kentucky

DURING THE YEAR 2010

NAIC Group Code 0028

**LIFE INSURANCE**

NAIC Company Code 72222

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	237,973		383		238,356
2. Annuity considerations	1,750				1,750
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	239,723		383		240,106
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
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)					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits	15,000				15,000
10. Matured endowments					
11. Annuity benefits	187				187
12. Surrender values and withdrawals for life contracts	10,509				10,509
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health	747				747
15. Totals	26,443				26,443
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
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	1	15,000							1	15,000
Settled during current year:										
18.1 By payment in full	1	15,000							1	15,000
18.2 By payment on compromised claims										
18.3 Totals paid	1	15,000							1	15,000
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	1	15,000							1	15,000
19. Unpaid Dec. 31, current year (16+17-18.6)										
<b>POLICY EXHIBIT</b>						No. of Policies				
20. In force December 31, prior year	342	100,479,940	(a)			83,500			342	100,563,440
21. Issued during year	23	9,745,000							23	9,745,000
22. Other changes to in force (Net)	(15)	(3,216,111)				45,100			(15)	(3,171,011)
23. In force December 31 of current year	350	107,008,829	(a)			128,600			350	107,137,429

(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 Program 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)					

**NONE**

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



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE AMICA LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Louisiana

DURING THE YEAR 2010

NAIC Group Code 0028

LIFE INSURANCE

NAIC Company Code 72222

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, and Grand Totals.

Table with 10 columns: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, Ordinary (1, 2), Credit Life (3, 4), Group (5, 6), Industrial (7, 8), Total (9, 10). 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 various sub-categories. A large 'NONE' watermark is present across the table.

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



**ANNUAL STATEMENT FOR THE YEAR 2010 OF THE AMICA LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Maine

DURING THE YEAR 2010

NAIC Group Code 0028

**LIFE INSURANCE**

NAIC Company Code 72222

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	698,979		21,665		720,644
2. Annuity considerations	204,201				204,201
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	903,180		21,665		924,845
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
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)					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits	25,000				25,000
10. Matured endowments					
11. Annuity benefits	126,512				126,512
12. Surrender values and withdrawals for life contracts	114,201				114,201
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health	3,884				3,884
15. Totals	269,597				269,597
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
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	1	25,000							1	25,000
Settled during current year:										
18.1 By payment in full	1	25,000							1	25,000
18.2 By payment on compromised claims										
18.3 Totals paid	1	25,000							1	25,000
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	1	25,000							1	25,000
19. Unpaid Dec. 31, current year (16+17-18.6)										
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	919	259,575,253	(a)		No. of Policies	4,718,500			919	264,293,753
21. Issued during year	37	11,655,000							37	11,655,000
22. Other changes to in force (Net)	(39)	(6,013,391)				(56,600)			(39)	(6,069,991)
23. In force December 31 of current year	917	265,216,862	(a)			4,661,900			917	269,878,762

(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 Program 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)					

**NONE**

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



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE AMICA LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Maryland

DURING THE YEAR 2010

NAIC Group Code 0028

LIFE INSURANCE

NAIC Company Code 72222

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. 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 various sub-categories. A large 'NONE' watermark is overlaid on the table.

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



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE AMICA LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Massachusetts

DURING THE YEAR 2010

NAIC Group Code 0028

LIFE INSURANCE

NAIC Company Code 72222

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, Deposit-type contract funds, Other 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, prior year, Incurred during current year, Settled during current year, 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 Program premium (b), Medicare Title XVIII exempt from state taxes or fees, Other Individual Policies, Non-cancelable (b), Guaranteed renewable (b), Non-renewable for stated reasons only (b), Other accident only, All other (b), Totals (sum of Lines 25.1 to 25.5), Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6). Large 'NONE' watermark is present.

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



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE AMICA LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Michigan

DURING THE YEAR 2010

NAIC Group Code 0028

LIFE INSURANCE

NAIC Company Code 72222

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.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 various sub-categories. A large 'NONE' watermark is overlaid on the table.

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



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE AMICA LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Minnesota

DURING THE YEAR 2010

NAIC Group Code 0028

**LIFE INSURANCE**

NAIC Company Code 72222

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	521,144		9,727		530,871
2. Annuity considerations	18,210				18,210
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	539,354		9,727		549,081
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
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)					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits	211,000				211,000
10. Matured endowments					
11. Annuity benefits	9,319				9,319
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	220,319				220,319
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
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	211,000							2	211,000
Settled during current year:										
18.1 By payment in full	2	211,000							2	211,000
18.2 By payment on compromised claims										
18.3 Totals paid	2	211,000							2	211,000
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	2	211,000							2	211,000
19. Unpaid Dec. 31, current year (16+17-18.6)										
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	732	261,803,337	(a)		No. of Policies	2,118,400			732	263,921,737
21. Issued during year	64	30,420,000							64	30,420,000
22. Other changes to in force (Net)	(24)	(6,938,432)				(36,900)			(24)	(6,975,332)
23. In force December 31 of current year	772	285,284,905	(a)			2,081,500			772	287,366,405

(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 Program 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)					

**NONE**

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



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE AMICA LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Mississippi

DURING THE YEAR 2010

NAIC Group Code 0028

LIFE INSURANCE

NAIC Company Code 72222

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, DETAILS OF WRITE-INS.

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, 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 Program 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). Large 'NONE' watermark is present.

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



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE AMICA LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Missouri

DURING THE YEAR 2010

NAIC Group Code 0028

**LIFE INSURANCE**

NAIC Company Code 72222

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	177,158				177,158
2. Annuity considerations	6,000				6,000
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	183,158				183,158
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
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)					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits					
10. Matured endowments					
11. Annuity benefits	4,225				4,225
12. Surrender values and withdrawals for life contracts	11,691				11,691
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health					
15. Totals	15,916				15,916
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
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)										
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	234	65,937,082	(a)		No. of Policies				234	65,937,082
21. Issued during year	24	9,320,000							24	9,320,000
22. Other changes to in force (Net)	(22)	(3,422,304)							(22)	(3,422,304)
23. In force December 31 of current year	236	71,834,778	(a)						236	71,834,778

(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 Program 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)					

**NONE**

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



**ANNUAL STATEMENT FOR THE YEAR 2010 OF THE AMICA LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Montana

DURING THE YEAR 2010

NAIC Group Code 0028

**LIFE INSURANCE**

NAIC Company Code 72222

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	62,415		574		62,989
2. Annuity considerations	36,912				36,912
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	99,327		574		99,901
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
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)					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits					
10. Matured endowments					
11. Annuity benefits	55,164				55,164
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	55,164				55,164
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
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)										
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	99	16,652,651	(a)		No. of Policies	125,000			99	16,777,651
21. Issued during year	4	1,600,000							4	1,600,000
22. Other changes to in force (Net)	(6)	(2,000)							(6)	(2,000)
23. In force December 31 of current year	97	18,250,651	(a)			125,000			97	18,375,651

(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 Program 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)					

**NONE**

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



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE AMICA LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Nebraska

DURING THE YEAR 2010

NAIC Group Code 0028

LIFE INSURANCE

NAIC Company Code 72222

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. 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 various sub-categories. A large 'NONE' watermark is present across the table.

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



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE AMICA LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Nevada

DURING THE YEAR 2010

NAIC Group Code 0028

**LIFE INSURANCE**

NAIC Company Code 72222

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	180,862		964		181,826
2. Annuity considerations	508,807				508,807
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	689,669		964		690,633
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
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)					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits					
10. Matured endowments					
11. Annuity benefits	11,390				11,390
12. Surrender values and withdrawals for life contracts	4,764				4,764
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health					
15. Totals	16,154				16,154
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
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)										
<b>POLICY EXHIBIT</b>						No. of Policies				
20. In force December 31, prior year	197	62,640,397	(a)			209,900			197	62,850,297
21. Issued during year	22	5,460,000							22	5,460,000
22. Other changes to in force (Net)		2,167,973				920,600				3,088,573
23. In force December 31 of current year	219	70,268,370	(a)			1,130,500			219	71,398,870

(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 Program 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)					

**NONE**

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



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE AMICA LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF New Hampshire

DURING THE YEAR 2010

NAIC Group Code 0028

LIFE INSURANCE

NAIC Company Code 72222

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.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 various sub-categories. A large 'NONE' watermark is present across the table.

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



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE AMICA LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF New Jersey

DURING THE YEAR 2010

NAIC Group Code 0028

**LIFE INSURANCE**

NAIC Company Code 72222

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	3,603,397		46,260		3,649,657
2. Annuity considerations	989,868				989,868
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	4,593,265		46,260		4,639,525
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
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)					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits	951,479		157,800		1,109,279
10. Matured endowments					
11. Annuity benefits	797,119				797,119
12. Surrender values and withdrawals for life contracts	542,016				542,016
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health	11,229				11,229
15. Totals	2,301,843		157,800		2,459,643
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
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	525,910							2	525,910
17. Incurred during current year	7	830,000			3	197,400			10	1,027,400
Settled during current year:										
18.1 By payment in full	6	951,479			2	157,800			8	1,109,279
18.2 By payment on compromised claims										
18.3 Totals paid	6	951,479			2	157,800			8	1,109,279
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	6	951,479			2	157,800			8	1,109,279
19. Unpaid Dec. 31, current year (16+17-18.6)	3	404,431			1	39,600			4	444,031
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	3,659	1,325,746,240	(a)			10,075,000			3,659	1,335,821,240
21. Issued during year	191	83,168,000							191	83,168,000
22. Other changes to in force (Net)	(170)	(39,857,233)				(887,500)			(170)	(40,744,733)
23. In force December 31 of current year	3,680	1,369,057,007	(a)			9,187,500			3,680	1,378,244,507

(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 Program 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)					

**NONE**

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



**ANNUAL STATEMENT FOR THE YEAR 2010 OF THE AMICA LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF New Mexico

DURING THE YEAR 2010

NAIC Group Code 0028

**LIFE INSURANCE**

NAIC Company Code 72222

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	253,579		230		253,809
2. Annuity considerations	8,600				8,600
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	262,179		230		262,409
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
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)					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits	208,349				208,349
10. Matured endowments					
11. Annuity benefits	4,532				4,532
12. Surrender values and withdrawals for life contracts	69,097				69,097
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health					
15. Totals	281,978				281,978
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
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	203,349							1	203,349
17. Incurred during current year	1	5,000							1	5,000
Settled during current year:										
18.1 By payment in full	2	208,349							2	208,349
18.2 By payment on compromised claims										
18.3 Totals paid	2	208,349							2	208,349
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	2	208,349							2	208,349
19. Unpaid Dec. 31, current year (16+17-18.6)										
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	289	71,733,877	(a)			50,000			289	71,783,877
21. Issued during year	13	3,725,000							13	3,725,000
22. Other changes to in force (Net)	(19)	(3,002,167)							(19)	(3,002,167)
23. In force December 31 of current year	283	72,456,710	(a)			50,000			283	72,506,710

(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 Program 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)					

**NONE**

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



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE AMICA LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF New York

DURING THE YEAR 2010

NAIC Group Code 0028

LIFE INSURANCE

NAIC Company Code 72222

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.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 various sub-categories. A large 'NONE' watermark is present across the table.

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



**ANNUAL STATEMENT FOR THE YEAR 2010 OF THE AMICA LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF North Carolina

DURING THE YEAR 2010

NAIC Group Code 0028

**LIFE INSURANCE**

NAIC Company Code 72222

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	2,715,529		40,942		2,756,471
2. Annuity considerations	417,712				417,712
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	3,133,241		40,942		3,174,183
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
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)					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits	259,019				259,019
10. Matured endowments					
11. Annuity benefits	222,686				222,686
12. Surrender values and withdrawals for life contracts	90,522				90,522
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health	5,007				5,007
15. Totals	577,234				577,234
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
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	3	259,019							3	259,019
Settled during current year:										
18.1 By payment in full	3	259,019							3	259,019
18.2 By payment on compromised claims										
18.3 Totals paid	3	259,019							3	259,019
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	3	259,019							3	259,019
19. Unpaid Dec. 31, current year (16+17-18.6)										
<b>POLICY EXHIBIT</b>						No. of Policies				
20. In force December 31, prior year	3,481	987,209,013	(a)			8,916,800			3,481	996,125,813
21. Issued during year	248	93,976,000							248	93,976,000
22. Other changes to in force (Net)	(125)	(28,875,336)				628,600			(125)	(28,246,736)
23. In force December 31 of current year	3,604	1,052,309,677	(a)			9,545,400			3,604	1,061,855,077

(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 Program 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)					

**NONE**

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



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE AMICA LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF North Dakota

DURING THE YEAR 2010

NAIC Group Code 0028

**LIFE INSURANCE**

NAIC Company Code 72222

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	3,491				3,491
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	3,491				3,491
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
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)					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
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					
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
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)										
<b>POLICY EXHIBIT</b>					No. of Policies					
20. In force December 31, prior year	3	1,086,000	(a)						3	1,086,000
21. Issued during year										
22. Other changes to in force (Net)	2	1,160,000							2	1,160,000
23. In force December 31 of current year	5	2,246,000	(a)						5	2,246,000

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

**ACCIDENT AND HEALTH INSURANCE**

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Program 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)					

**NONE**

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



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE AMICA LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Ohio

DURING THE YEAR 2010

NAIC Group Code 0028

LIFE INSURANCE

NAIC Company Code 72222

Table with 5 columns: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, Ordinary, Credit Life (Group and Individual), Group, Industrial, Total. Rows include Life insurance, Annuity considerations, Deposit-type contract funds, Other 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 (No., Amount), Credit Life (No. of Ind.Pols. & Gr. Certifs., Amount), Group (No. of Certifs., Amount), Industrial (No., Amount), Total (No., Amount). Rows include Unpaid December 31, prior year, Incurred during current year, Settled during current year, 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 Program premium (b), Medicare Title XVIII exempt from state taxes or fees, Other Individual Policies, and Totals.

NONE

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



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE AMICA LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Oklahoma

DURING THE YEAR 2010

NAIC Group Code 0028

LIFE INSURANCE

NAIC Company Code 72222

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.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 various sub-categories. A large 'NONE' watermark is present across the table.

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



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE AMICA LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Oregon

DURING THE YEAR 2010

NAIC Group Code 0028

**LIFE INSURANCE**

NAIC Company Code 72222

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	717,369		20,969		738,338
2. Annuity considerations	15,978				15,978
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	733,347		20,969		754,316
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
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)					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits	463,161				463,161
10. Matured endowments					
11. Annuity benefits	40,514				40,514
12. Surrender values and withdrawals for life contracts	53,692				53,692
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health	11,635				11,635
15. Totals	569,002				569,002
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
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	4	463,161							4	463,161
Settled during current year:										
18.1 By payment in full	4	463,161							4	463,161
18.2 By payment on compromised claims										
18.3 Totals paid	4	463,161							4	463,161
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	4	463,161							4	463,161
19. Unpaid Dec. 31, current year (16+17-18.6)										
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	976	258,909,115	(a)		No. of Policies	4,567,000			976	263,476,115
21. Issued during year	59	28,500,000							59	28,500,000
22. Other changes to in force (Net)	(46)	(8,102,003)				342,200			(46)	(7,759,803)
23. In force December 31 of current year	989	279,307,112	(a)			4,909,200			989	284,216,312

(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 Program 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)					

**NONE**

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



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE AMICA LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Pennsylvania

DURING THE YEAR 2010

NAIC Group Code 0028

LIFE INSURANCE

NAIC Company Code 72222

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. 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 various sub-categories. A large 'NONE' watermark is present across the table.

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



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE AMICA LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Rhode Island

DURING THE YEAR 2010

NAIC Group Code 0028

**LIFE INSURANCE**

NAIC Company Code 72222

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	5,786,761		1,044,449		6,831,210
2. Annuity considerations	5,322,768				5,322,768
3. Deposit-type contract funds	15,948,971	XXX		XXX	15,948,971
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	27,058,500		1,044,449		28,102,949
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
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)					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits	709,318		1,090,500		1,799,818
10. Matured endowments					
11. Annuity benefits	6,502,348				6,502,348
12. Surrender values and withdrawals for life contracts	1,312,617				1,312,617
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health	16,225				16,225
15. Totals	8,540,508		1,090,500		9,631,008
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
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	25,361							1	25,361
17. Incurred during current year	21	2,053,484			18	1,175,400			39	3,228,884
Settled during current year:										
18.1 By payment in full	18	709,318			16	1,090,500			34	1,799,818
18.2 By payment on compromised claims										
18.3 Totals paid	18	709,318			16	1,090,500			34	1,799,818
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	18	709,318			16	1,090,500			34	1,799,818
19. Unpaid Dec. 31, current year (16+17-18.6)	4	1,369,527			2	84,900			6	1,454,427
<b>POLICY EXHIBIT</b>						No. of Policies				
20. In force December 31, prior year	8,023	1,892,088,511	(a)		1	247,718,300			8,024	2,139,806,811
21. Issued during year	453	130,639,487							453	130,639,487
22. Other changes to in force (Net)	(285)	(43,639,339)				2,440,100			(285)	(41,199,239)
23. In force December 31 of current year	8,191	1,979,088,659	(a)		1	250,158,400			8,192	2,229,247,059

(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 Program 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)					

**NONE**

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



**ANNUAL STATEMENT FOR THE YEAR 2010 OF THE AMICA LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF South Carolina

DURING THE YEAR 2010

NAIC Group Code 0028

**LIFE INSURANCE**

NAIC Company Code 72222

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	558,763		33,552		592,315
2. Annuity considerations	38,525				38,525
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	597,288		33,552		630,840
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
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)					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits	105,000		41,200		146,200
10. Matured endowments					
11. Annuity benefits	106,599				106,599
12. Surrender values and withdrawals for life contracts	379,520				379,520
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health	3,240				3,240
15. Totals	594,359		41,200		635,559
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
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	105,000			1	41,200			3	146,200
Settled during current year:										
18.1 By payment in full	2	105,000			1	41,200			3	146,200
18.2 By payment on compromised claims										
18.3 Totals paid	2	105,000			1	41,200			3	146,200
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	2	105,000			1	41,200			3	146,200
19. Unpaid Dec. 31, current year (16+17-18.6)										
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	643	153,835,128	(a)			7,307,300			643	161,142,428
21. Issued during year	28	11,175,000							28	11,175,000
22. Other changes to in force (Net)	(12)	(843,086)				(268,100)			(12)	(1,111,186)
23. In force December 31 of current year	659	164,167,042	(a)			7,039,200			659	171,206,242

(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 Program 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)					

**NONE**

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



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE AMICA LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF South Dakota

DURING THE YEAR 2010

NAIC Group Code 0028

LIFE INSURANCE

NAIC Company Code 72222

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, DETAILS OF WRITE-INS.

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, 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 Program 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). Large 'NONE' watermark is present.

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



**ANNUAL STATEMENT FOR THE YEAR 2010 OF THE AMICA LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Tennessee

DURING THE YEAR 2010

NAIC Group Code 0028

**LIFE INSURANCE**

NAIC Company Code 72222

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	500,842		11,390		512,232
2. Annuity considerations	153,418				153,418
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	654,260		11,390		665,650
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
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)					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits					
10. Matured endowments					
11. Annuity benefits	61,985				61,985
12. Surrender values and withdrawals for life contracts	28,178				28,178
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health	755				755
15. Totals	90,918				90,918
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
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)										
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	625	178,831,951	(a)		No. of Policies	2,480,600			625	181,312,551
21. Issued during year	47	16,982,000							47	16,982,000
22. Other changes to in force (Net)	(22)	(7,540,843)				406,700			(22)	(7,134,143)
23. In force December 31 of current year	650	188,273,108	(a)			2,887,300			650	191,160,408

(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 Program 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)					

**NONE**

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



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE AMICA LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Texas

DURING THE YEAR 2010

NAIC Group Code 0028

**LIFE INSURANCE**

NAIC Company Code 72222

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	4,771,946		99,329		4,871,275
2. Annuity considerations	1,415,444				1,415,444
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	6,187,390		99,329		6,286,719
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
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)					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits	1,913,133		308,300		2,221,433
10. Matured endowments					
11. Annuity benefits	1,266,451				1,266,451
12. Surrender values and withdrawals for life contracts	482,225				482,225
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health	7,008				7,008
15. Totals	3,668,817		308,300		3,977,117
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
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	552,134							2	552,134
17. Incurred during current year	11	1,662,000			1	308,300			12	1,970,300
Settled during current year:										
18.1 By payment in full	10	1,913,133			1	308,300			11	2,221,433
18.2 By payment on compromised claims										
18.3 Totals paid	10	1,913,133			1	308,300			11	2,221,433
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	10	1,913,133			1	308,300			11	2,221,433
19. Unpaid Dec. 31, current year (16+17-18.6)	3	301,001							3	301,001
<b>POLICY EXHIBIT</b>						No. of Policies				
20. In force December 31, prior year	5,076	1,730,443,150	(a)			21,800,300			5,076	1,752,243,450
21. Issued during year	536	216,389,000							536	216,389,000
22. Other changes to in force (Net)	(251)	(65,417,037)				514,300			(251)	(64,902,737)
23. In force December 31 of current year	5,361	1,881,415,113	(a)			22,314,600			5,361	1,903,729,713

(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 Program 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)					

NONE

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



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE AMICA LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Utah

DURING THE YEAR 2010

NAIC Group Code 0028

LIFE INSURANCE

NAIC Company Code 72222

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 various sub-categories. A large 'NONE' watermark is present across the table.

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



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE AMICA LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Vermont

DURING THE YEAR 2010

NAIC Group Code 0028

**LIFE INSURANCE**

NAIC Company Code 72222

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	388,215				388,215
2. Annuity considerations	51,211				51,211
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	439,426				439,426
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
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)					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits	299,371				299,371
10. Matured endowments					
11. Annuity benefits	58,995				58,995
12. Surrender values and withdrawals for life contracts	58,092				58,092
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health					
15. Totals	416,458				416,458
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
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	3	299,371							3	299,371
Settled during current year:										
18.1 By payment in full	3	299,371							3	299,371
18.2 By payment on compromised claims										
18.3 Totals paid	3	299,371							3	299,371
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	3	299,371							3	299,371
19. Unpaid Dec. 31, current year (16+17-18.6)										
<b>POLICY EXHIBIT</b>						No. of Policies				
20. In force December 31, prior year	469	127,333,044	(a)						469	127,333,044
21. Issued during year	11	4,025,000							11	4,025,000
22. Other changes to in force (Net)	(7)	1,576,140							(7)	1,576,140
23. In force December 31 of current year	473	132,934,184	(a)						473	132,934,184

(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 Program 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)					

**NONE**

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



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE AMICA LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Virginia

DURING THE YEAR 2010

NAIC Group Code 0028

**LIFE INSURANCE**

NAIC Company Code 72222

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	1,470,170		15,557		1,485,727
2. Annuity considerations	374,755				374,755
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	1,844,925		15,557		1,860,482
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
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)					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits	351,296				351,296
10. Matured endowments					
11. Annuity benefits	121,573				121,573
12. Surrender values and withdrawals for life contracts	168,459				168,459
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health	10,695				10,695
15. Totals	652,023				652,023
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
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	3	451,377							3	451,377
Settled during current year:										
18.1 By payment in full	2	351,296							2	351,296
18.2 By payment on compromised claims										
18.3 Totals paid	2	351,296							2	351,296
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	2	351,296							2	351,296
19. Unpaid Dec. 31, current year (16+17-18.6)	1	100,081							1	100,081
<b>POLICY EXHIBIT</b>						No. of Policies				
20. In force December 31, prior year	1,664	600,105,996	(a)			3,388,300			1,664	603,494,296
21. Issued during year	100	45,606,000							100	45,606,000
22. Other changes to in force (Net)	(69)	(22,107,332)				206,700			(69)	(21,900,632)
23. In force December 31 of current year	1,695	623,604,664	(a)			3,595,000			1,695	627,199,664

(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 Program 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)					

**NONE**

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



**ANNUAL STATEMENT FOR THE YEAR 2010 OF THE AMICA LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Washington

DURING THE YEAR 2010

NAIC Group Code 0028

**LIFE INSURANCE**

NAIC Company Code 72222

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	1,433,912		29,999		1,463,911
2. Annuity considerations	78,936				78,936
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	1,512,848		29,999		1,542,847
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
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)					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits	343,139				343,139
10. Matured endowments	192				192
11. Annuity benefits	223,975				223,975
12. Surrender values and withdrawals for life contracts	204,646				204,646
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health	15,249				15,249
15. Totals	787,201				787,201
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
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	3	5,853							3	5,853
17. Incurred during current year	12	344,070							12	344,070
Settled during current year:										
18.1 By payment in full	11	343,139							11	343,139
18.2 By payment on compromised claims										
18.3 Totals paid	11	343,139							11	343,139
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	11	343,139							11	343,139
19. Unpaid Dec. 31, current year (16+17-18.6)	4	6,784							4	6,784
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	2,004	605,057,537	(a)		1	6,536,987			2,005	611,594,524
21. Issued during year	121	47,125,000							121	47,125,000
22. Other changes to in force (Net)	(139)	(33,417,812)				708,662			(139)	(32,709,150)
23. In force December 31 of current year	1,986	618,764,725	(a)		1	7,245,649			1,987	626,010,374

(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 Program 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)					

**NONE**

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



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE AMICA LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF West Virginia

DURING THE YEAR 2010

NAIC Group Code 0028

**LIFE INSURANCE**

NAIC Company Code 72222

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	81,537		161		81,698
2. Annuity considerations	800				800
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	82,337		161		82,498
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
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)					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits			35,000		35,000
10. Matured endowments					
11. Annuity benefits	2,645				2,645
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	2,645		35,000		37,645
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
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					1	35,000			1	35,000
Settled during current year:										
18.1 By payment in full					1	35,000			1	35,000
18.2 By payment on compromised claims										
18.3 Totals paid					1	35,000			1	35,000
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements					1	35,000			1	35,000
19. Unpaid Dec. 31, current year (16+17-18.6)										
<b>POLICY EXHIBIT</b>						No. of Policies				
20. In force December 31, prior year	96	24,920,893	(a)			35,000			96	24,955,893
21. Issued during year	4	1,200,000							4	1,200,000
22. Other changes to in force (Net)	(3)	(187,000)				(35,000)			(3)	(222,000)
23. In force December 31 of current year	97	25,933,893	(a)						97	25,933,893

(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 Program 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)					

**NONE**

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



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE AMICA LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Wisconsin

DURING THE YEAR 2010

NAIC Group Code 0028

**LIFE INSURANCE**

NAIC Company Code 72222

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	358,827		7,286		366,113
2. Annuity considerations	15,040				15,040
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	373,867		7,286		381,153
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
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)					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits					
10. Matured endowments					
11. Annuity benefits	2,112				2,112
12. Surrender values and withdrawals for life contracts	1,135				1,135
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health					
15. Totals	3,247				3,247
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
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)										
<b>POLICY EXHIBIT</b>						No. of Policies				
20. In force December 31, prior year	540	175,794,447	(a)			1,586,800			540	177,381,247
21. Issued during year	44	18,500,000							44	18,500,000
22. Other changes to in force (Net)	(21)	(10,650,468)				146,900			(21)	(10,503,568)
23. In force December 31 of current year	563	183,643,979	(a)			1,733,700			563	185,377,679

(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 Program 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)					

**NONE**

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



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE AMICA LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Wyoming

DURING THE YEAR 2010

NAIC Group Code 0028

LIFE INSURANCE

NAIC Company Code 72222

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.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 various sub-categories. A large 'NONE' watermark is overlaid on the table.

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



**ANNUAL STATEMENT FOR THE YEAR 2010 OF THE AMICA LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Grand Total

DURING THE YEAR 2010

NAIC Group Code 0028

**LIFE INSURANCE**

NAIC Company Code 72222

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	68,502,725		2,577,229		71,079,954
2. Annuity considerations	24,658,462				24,658,462
3. Deposit-type contract funds	15,948,971	XXX		XXX	15,948,971
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	109,110,158		2,577,229		111,687,387
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
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)					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits	20,656,549		2,524,900		23,181,449
10. Matured endowments	192				192
11. Annuity benefits	18,816,469				18,816,469
12. Surrender values and withdrawals for life contracts	9,981,060				9,981,060
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health	241,961				241,961
15. Totals	49,696,231		2,524,900		52,221,131
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
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	32	4,596,471			1	125,000			33	4,721,471
17. Incurred during current year	191	20,974,847			34	2,611,100			225	23,585,947
Settled during current year:										
18.1 By payment in full	188	20,656,549			30	2,524,900			218	23,181,449
18.2 By payment on compromised claims										
18.3 Totals paid	188	20,656,549			30	2,524,900			218	23,181,449
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	188	20,656,549			30	2,524,900			218	23,181,449
19. Unpaid Dec. 31, current year (16+17-18.6)	35	4,914,769			5	211,200			40	5,125,969
<b>POLICY EXHIBIT</b>						No. of Policies				
20. In force December 31, prior year	80,643	25,514,154,924	(a)		2	584,759,887			80,645	26,098,914,811
21. Issued during year	5,309	2,111,679,680							5,309	2,111,679,680
22. Other changes to in force (Net)	(3,769)	(928,307,232)				11,438,462			(3,769)	(916,868,770)
23. In force December 31 of current year	82,183	26,697,527,372	(a)		2	596,198,349			82,185	27,293,725,721

(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 Program 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)					

**NONE**

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

ANNUAL STATEMENT FOR THE YEAR 2010 OF THE AMICA LIFE INSURANCE COMPANY  
**FORM FOR CALCULATING THE INTEREST MAINTENANCE RESERVE**

**INTEREST MAINTENANCE RESERVE**

	1 Amount
1. Reserve as of December 31, Prior Year .....	5,571,729
2. Current year's realized pre-tax capital gains/(losses) of \$ ..... 4,238,750 transferred into the reserve net of taxes of \$ ..... 1,483,562 .....	2,755,188
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) .....	8,326,917
5. Current year's amortization released to Summary of Operations (Amortization, Line 1, Column 4) .....	1,074,137
6. Reserve as of December 31, current year (Line 4 minus Line 5)	7,252,780

**AMORTIZATION**

Year of Amortization	1 Reserve as of December 31, Prior Year	2 Current Year's Realized Capital Gains/(Losses) Transferred into the Reserve Net of Taxes	3 Adjustment for Current Year's Liability Gains/(Losses) Released From the Reserve	4 Balance Before Reduction for Current Year's Amortization (Cols. 1 + 2 + 3)
1. 2010 .....	629,225	444,912		1,074,137
2. 2011 .....	511,238	565,659		1,076,897
3. 2012 .....	505,123	419,522		924,645
4. 2013 .....	477,914	350,132		828,046
5. 2014 .....	490,437	279,450		769,887
6. 2015 .....	479,442	201,960		681,402
7. 2016 .....	465,168	148,559		613,727
8. 2017 .....	381,794	121,023		502,817
9. 2018 .....	286,923	93,348		380,271
10. 2019 .....	267,702	63,630		331,332
11. 2020 .....	181,078	30,778		211,856
12. 2021 .....	139,840	12,488		152,328
13. 2022 .....	110,831	10,129		120,960
14. 2023 .....	103,283	7,354		110,637
15. 2024 .....	110,993	4,718		115,711
16. 2025 .....	105,639	1,526		107,165
17. 2026 .....	94,114			94,114
18. 2027 .....	94,029			94,029
19. 2028 .....	67,493			67,493
20. 2029 .....	59,104			59,104
21. 2030 .....	32,788			32,788
22. 2031 .....	(7,095)			(7,095)
23. 2032 .....	(12,148)			(12,148)
24. 2033 .....	(3,186)			(3,186)
25. 2034 .....				
26. 2035 .....				
27. 2036 .....				
28. 2037 .....				
29. 2038 .....				
30. 2039 .....				
31. 2040 and Later				
32. Total (Lines 1 to 31)	5,571,729	2,755,188		8,326,917

ANNUAL STATEMENT FOR THE YEAR 2010 OF THE AMICA LIFE INSURANCE COMPANY

**ASSET VALUATION RESERVE**

	Default Component			Equity Component			7 Total Amount (Cols. 3 + 6)
	1 Other Than Mortgage Loans	2 Mortgage Loans	3 Total (Cols. 1 + 2)	4 Common Stock	5 Real Estate and Other Invested Assets	6 Total (Cols. 4 + 5)	
1. Reserve as of December 31, prior year .....	2,930,789		2,930,789	4,873,097	231,625	5,104,722	8,035,511
2. Realized capital gains/(losses) net of taxes - General Account .....				753,479	(7,836)	745,643	745,643
3. Realized capital gains/(losses) net of taxes - Separate Accounts .....							
4. Unrealized capital gains/(losses) net of deferred taxes - General Account .....	193,849		193,849	2,177,862	72,275	2,250,137	2,443,986
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 .....	551,346		551,346				551,346
8. Accumulated balances (Lines 1 through 5 - 6 + 7) .....	3,675,985		3,675,985	7,804,438	296,064	8,100,502	11,776,486
9. Maximum reserve .....	3,169,339		3,169,339	5,713,501	246,080	5,959,581	9,128,920
10. Reserve objective .....	2,246,688		2,246,688	5,713,501	246,080	5,959,581	8,206,269
11. 20% of (Line 10 - Line 8) .....	(285,859)		(285,859)	(418,187)	(9,997)	(428,184)	(714,043)
12. Balance before transfers (Lines 8 + 11) .....	3,390,125		3,390,125	7,386,251	286,067	7,672,317	11,062,443
13. Transfers .....							XXX
14. Voluntary contribution .....							
15. Adjustment down to maximum/up to zero .....	(220,786)		(220,786)	(1,672,750)	(39,987)	(1,712,737)	(1,933,523)
16. Reserve as of December 31, current year (Lines 12 + 13 + 14 + 15)	3,169,339		3,169,339	5,713,501	246,080	5,959,580	9,128,920

**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)
<b>LONG-TERM BONDS</b>												
1.		Exempt Obligations .....	230,317,491	XXX	XXX	230,317,491	0.0000		0.0000		0.0000	
2.	1	Highest Quality .....	535,009,125	XXX	XXX	535,009,125	0.0004	214,004	0.0023	1,230,521	0.0030	1,605,027
3.	2	High Quality .....	127,672,364	XXX	XXX	127,672,364	0.0019	242,577	0.0058	740,500	0.0090	1,149,051
4.	3	Medium Quality .....	4,342,589	XXX	XXX	4,342,589	0.0093	40,386	0.0230	99,880	0.0340	147,648
5.	4	Low Quality .....		XXX	XXX		0.0213		0.0530		0.0750	
6.	5	Lower Quality .....		XXX	XXX		0.0432		0.1100		0.1700	
7.	6	In or Near Default .....		XXX	XXX		0.0000		0.2000		0.2000	
8.		Total Unrated Multi-class Securities Acquired by Conversion .....		XXX	XXX		XXX		XXX		XXX	
9.		Total Bonds (Sum of Lines 1 through 8) (Page 2, Line 1, Net Admitted Asset)	897,341,569	XXX	XXX	897,341,569	XXX	496,967	XXX	2,070,900	XXX	2,901,727
<b>PREFERRED STOCK</b>												
10.	1	Highest Quality .....		XXX	XXX		0.0004		0.0023		0.0030	
11.	2	High Quality .....		XXX	XXX		0.0019		0.0058		0.0090	
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) (Page 2, Line 2.1, Net Admitted Asset)		XXX	XXX		XXX		XXX		XXX	
<b>SHORT - TERM BONDS</b>												
18.		Exempt Obligations .....		XXX	XXX		0.0000		0.0000		0.0000	
19.	1	Highest Quality .....	9,072,596	XXX	XXX	9,072,596	0.0004	3,629	0.0023	20,867	0.0030	27,218
20.	2	High Quality .....	26,710,507	XXX	XXX	26,710,507	0.0019	50,750	0.0058	154,921	0.0090	240,395
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)	35,783,103	XXX	XXX	35,783,103	XXX	54,379	XXX	175,788	XXX	267,612

**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)
<b>DERIVATIVE INSTRUMENTS</b>												
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)	933,124,672	XXX	XXX	933,124,672	XXX	551,346	XXX	2,246,688	XXX	3,169,339
<b>MORTGAGE LOANS</b>												
In Good Standing:												
35.		Farm Mortgages .....			XXX		0.0063 (a)		0.0120 (a)		0.0190 (a)	
36.		Residential Mortgages - Insured or Guaranteed .....			XXX		0.0003		0.0006		0.0010	
37.		Residential Mortgages - All Other .....			XXX		0.0013		0.0030		0.0040	
38.		Commercial Mortgages - Insured or Guaranteed .....			XXX		0.0003		0.0006		0.0010	
39.		Commercial Mortgages - All Other .....			XXX		0.0063 (a)		0.0120 (a)		0.0190 (a)	
40.		In Good Standing With Restructured Terms .....			XXX		0.2800 (b)		0.6200 (b)		1.0000 (b)	
Overdue, Not in Process:												
41.		Farm Mortgages .....			XXX		0.0420		0.0760		0.1200	
42.		Residential Mortgages - Insured or Guaranteed .....			XXX		0.0005		0.0012		0.0020	
43.		Residential Mortgages - All Other .....			XXX		0.0025		0.0058		0.0090	
44.		Commercial Mortgages - Insured or Guaranteed .....			XXX		0.0005		0.0012		0.0020	
45.		Commercial Mortgages - All Other .....			XXX		0.0420		0.0760		0.1200	
In Process of Foreclosure:												
46.		Farm Mortgages .....			XXX		0.0000		0.1700		0.1700	
47.		Residential Mortgages - Insured or Guaranteed .....			XXX		0.0000		0.0040		0.0040	
48.		Residential Mortgages - All Other .....			XXX		0.0000		0.0130		0.0130	
49.		Commercial Mortgages - Insured or Guaranteed .....			XXX		0.0000		0.0040		0.0040	
50.		Commercial Mortgages - All Other .....			XXX		0.0000		0.1700		0.1700	
51.		Total Schedule B Mortgages (Sum of Lines 35 through 50) (Page 2, Line 3, Net Admitted Asset)			XXX		XXX		XXX		XXX	
52.		Schedule DA Mortgages			XXX		(c)		(c)		(c)	
53.		Total Mortgage Loans on Real Estate (Lines 51 + 52)			XXX		XXX		XXX		XXX	

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

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

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

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

Line Number	NAIC Designation	Description	1 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 .....	43,950,013	XXX	XXX	43,950,013	0.0000		0.1300 (d)	5,713,501	0.1300 (d)	5,713,501
2.		Unaffiliated - Private .....		XXX	XXX		0.0000		0.1600		0.1600	
3.		Federal Home Loan Bank .....		XXX	XXX		0.0000		0.0050		0.0080	
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 (d)		0.1300 (d)	
13.		Unaffiliated Common Stock - Private .....					0.0000		0.1600		0.1600	
14.		Mortgage Loans .....					(c)		(c)		(c)	
15.		Real Estate .....					(e)		(e)		(e)	
16.		Affiliated - Certain Other (See SVO Purposes and Procedures Manual) .....		XXX	XXX		0.0000		0.1300		0.1300	
17.		Affiliated - All Other .....		XXX	XXX		0.0000		0.1600		0.1600	
18.		Total Common Stock (Sum of Lines 1 through 17)(Page 2, Line 2.2, Net Admitted Asset)	43,950,013			43,950,013	XXX		XXX	5,713,501	XXX	5,713,501
REAL ESTATE												
19.		Home Office Property (General Account only) .....					0.0000		0.0750		0.0750	
20.		Investment Properties .....					0.0000		0.0750		0.0750	
21.		Properties Acquired in Satisfaction of Debt .....					0.0000		0.1100		0.1100	
22.		Total Real Estate (Sum of Lines 19 through 21)					XXX		XXX		XXX	
OTHER INVESTED ASSETS												
INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF BONDS												
23.		Exempt Obligations .....		XXX	XXX		0.0000		0.0000		0.0000	
24.	1	Highest Quality .....		XXX	XXX		0.0004		0.0023		0.0030	
25.	2	High Quality .....		XXX	XXX		0.0019		0.0058		0.0090	
26.	3	Medium Quality .....		XXX	XXX		0.0093		0.0230		0.0340	
27.	4	Low Quality .....		XXX	XXX		0.0213		0.0530		0.0750	
28.	5	Lower Quality .....		XXX	XXX		0.0432		0.1100		0.1700	
29.	6	In or Near Default .....		XXX	XXX		0.0000		0.2000		0.2000	
30.		Total with Bond Characteristics (Sum of Lines 23 through 29)		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												
31.	1	Highest Quality .....		XXX	XXX		0.0004		0.0023		0.0030	
32.	2	High Quality .....		XXX	XXX		0.0019		0.0058		0.0090	
33.	3	Medium Quality .....		XXX	XXX		0.0093		0.0230		0.0340	
34.	4	Low Quality .....		XXX	XXX		0.0213		0.0530		0.0750	
35.	5	Lower Quality .....		XXX	XXX		0.0432		0.1100		0.1700	
36.	6	In or Near Default .....		XXX	XXX		0.0000		0.2000		0.2000	
37.		Affiliated Life with AVR .....		XXX	XXX		0.0000		0.0000		0.0000	
38.		Total with Preferred Stock Characteristics (Sum of Lines 31 through 37)		XXX	XXX		XXX		XXX		XXX	
INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF MORTGAGE LOANS												
In Good Standing:												
39.		Farm Mortgages .....			XXX		0.0063 (a)		0.0120 (a)		0.0190 (a)	
40.		Residential Mortgages - Insured or Guaranteed .....			XXX		0.0003		0.0006		0.0010	
41.		Residential Mortgages - All Other .....		XXX	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 .....			XXX		0.0063 (a)		0.0120 (a)		0.0190 (a)	
44.		In Good Standing With Restructured Terms .....			XXX		0.2800 (b)		0.6200 (b)		1.0000 (b)	
Overdue, Not in Process:												
45.		Farm Mortgages .....			XXX		0.0420		0.0760		0.1200	
46.		Residential Mortgages - Insured or Guaranteed .....			XXX		0.0005		0.0012		0.0020	
47.		Residential Mortgages - All Other .....			XXX		0.0025		0.0058		0.0090	
48.		Commercial Mortgages - Insured or Guaranteed .....			XXX		0.0005		0.0012		0.0020	
49.		Commercial Mortgages - All Other .....			XXX		0.0420		0.0760		0.1200	
In Process of Foreclosure:												
50.		Farm Mortgages .....			XXX		0.0000		0.1700		0.1700	
51.		Residential Mortgages - Insured or Guaranteed .....			XXX		0.0000		0.0040		0.0040	
52.		Residential Mortgages - All Other .....			XXX		0.0000		0.0130		0.0130	
53.		Commercial Mortgages - Insured or Guaranteed .....			XXX		0.0000		0.0040		0.0040	
54.		Commercial Mortgages - All Other .....			XXX		0.0000		0.1700		0.1700	
55.		Total with Mortgage Loan Characteristics (Sum of Lines 39 through 54)			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												
56.		Unaffiliated Public .....		XXX	XXX		0.0000		0.1300 (d)		0.1300 (d)	
57.		Unaffiliated Private .....		XXX	XXX		0.0000		0.1600		0.1600	
58.		Affiliated Life with AVR .....		XXX	XXX		0.0000		0.0000		0.0000	
59.		Affiliated Certain Other (See SVO Purposes & Procedures Manual) .....		XXX	XXX		0.0000		0.1300		0.1300	
60.		Affiliated Other - All Other .....		XXX	XXX		0.0000		0.1600		0.1600	
61.		Total with Common Stock Characteristics (Sum of Lines 56 through 60)		XXX	XXX		XXX		XXX		XXX	
INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF REAL ESTATE												
62.		Home Office Property (General Account only) .....					0.0000		0.0750		0.0750	
63.		Investment Properties .....					0.0000		0.0750		0.0750	
64.		Properties Acquired in Satisfaction of Debt .....					0.0000		0.1100		0.1100	
65.		Total with Real Estate Characteristics (Lines 62 through 64)					XXX		XXX		XXX	
LOW INCOME HOUSING TAX CREDIT INVESTMENTS												
66.		Guaranteed Federal Low Income Housing Tax Credit .....					0.0003		0.0006		0.0010	
67.		Non-guaranteed Federal Low Income Housing Tax Credit .....					0.0063		0.0120		0.0190	
68.		State Low Income Housing Tax Credit .....					0.0273		0.0600		0.0975	
69.		All Other Low Income Housing Tax Credit .....					0.0273		0.0600		0.0975	
70.		Total LIHTC					XXX		XXX		XXX	
ALL OTHER INVESTMENTS												
71.		Other Invested Assets - Schedule BA .....	1,892,923	XXX		1,892,923	0.0000		0.1300	246,080	0.1300	246,080
72.		Other Short-Term Invested Assets - Schedule DA .....		XXX			0.0000		0.1300		0.1300	
73.		Total All Other (Sum of Lines 71 + 72) .....	1,892,923	XXX		1,892,923	XXX		XXX	246,080	XXX	246,080
74.		Total Other Invested Assets - Schedules BA & DA (Sum of Lines 30, 38, 55, 61, 65, 70 and 73)	1,892,923			1,892,923	XXX		XXX	246,080	XXX	246,080

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

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

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

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

(e) Determined using the same factors and breakdowns used for directly owned real estate.

**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
<b>NONE</b>								
0599999 - Total								



Schedule H - Part 1 - Analysis of Underwriting Operations

**N O N E**

Schedule H - Part 2 - Reserves and Liabilities

**N O N E**

Schedule H - Part 3 - Prior Year's Claim Reserves and Liabilities

**N O N E**

Schedule H - Part 4 - Reinsurance

**N O N E**

Schedule H - Part 5 - Health Claims

**N O N E**







ANNUAL STATEMENT FOR THE YEAR 2010 OF THE AMICA LIFE INSURANCE COMPANY

**SCHEDULE S - PART 3 - SECTION 1**

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

1 NAIC Company Code	2 Federal ID Number	3 Effective Date	4 Name of Company	5 Location	6 Type of Reinsurance Ceded	7 Amount in Force at End of Year	Reserve Credit Taken		10 Premiums	Outstanding Surplus Relief		13 Modified Coinsurance Reserve	14 Funds Withheld Under Coinsurance
							8 Current Year	9 Prior Year		11 Current Year	12 Prior Year		
82627	06-0839705	01/01/1989	Swiss Re Life & Health America, Inc.	Armonk, New York	YRT/I	5,038,778	28,201	26,760	136,419				
82627	06-0839705	01/18/1990	Swiss Re Life & Health America, Inc.	Armonk, New York	CO/I	275,000	3,456	12,090	2,959				
82627	06-0839705	10/25/1984	Swiss Re Life & Health America, Inc.	Armonk, New York	YRT/I	1,022,938	6,093	10,578	6,850				
82627	06-0839705	08/01/1977	Swiss Re Life & Health America, Inc.	Armonk, New York	YRT/I	160,624	25,025	22,995					
82627	06-0839705	05/03/1999	Swiss Re Life & Health America, Inc.	Armonk, New York	YRT/I	20,671,132	94,905	86,760	73,524				
82627	06-0839705	10/25/1984	Swiss Re Life & Health America, Inc.	Armonk, New York	CO/I	900,000	7,342	11,141	4,959				
82627	06-0839705	11/01/1984	Swiss Re Life & Health America, Inc.	Armonk, New York	CO/I	91,088,646	325,220	328,290	371,961				
82627	06-0839705	10/01/1994	Swiss Re Life & Health America, Inc.	Armonk, New York	CO/I	1,450,000	15,769	14,837	7,008				
82627	06-0839705	01/01/1996	Swiss Re Life & Health America, Inc.	Armonk, New York	CO/I	68,413,458	237,298	272,301	303,989				
82627	06-0839705	09/19/1997	Swiss Re Life & Health America, Inc.	Armonk, New York	CO/I	4,133,987,574	21,240,369	18,121,861	7,434,083				
82627	06-0839705	03/01/1979	Swiss Re Life & Health America, Inc.	Armonk, New York	CO/I	811,000	29,567	24,732	25,645				
82627	06-0839705	08/01/1987	Swiss Re Life & Health America, Inc.	Armonk, New York	YRT/I	18,153,132	7,522	6,974	53,696				
82627	06-0839705	07/29/1988	Swiss Re Life & Health America, Inc.	Armonk, New York	ADB/I		3,005	3,425	12,653				
82627	06-0839705	01/01/1983	Swiss Re Life & Health America, Inc.	Armonk, New York	ADB/I		38,456	40,007	21,845				
82627	06-0839705	08/01/2008	Swiss Re Life & Health America, Inc.	Armonk, New York	CO/I	421,571,150	3,034,713	754,724	836,160				
82627	06-0839705	05/01/2007	Swiss Re Life & Health America, Inc.	Armonk, New York	YRT/I	10,530,000	14,280	8,436	6,139				
66133	41-1760577	08/01/2008	Wilton Reassurance Company	Minneapolis, MN	CO/I	756,193,500	5,542,314	2,084,129	1,432,492				
90670	43-1178580	02/01/1979	Scottish Re Life Corporation	Charlotte, North Carolina	YRT/I								
90670	43-1178580	02/01/1979	Scottish Re Life Corporation	Charlotte, North Carolina	CO/I	1,830,000	10,315	13,287	27,096				
66346	58-0828824	01/01/1998	Munich American Reassurance Company	Atlanta, Georgia	YRT/G	226,869,600			534,963				
66346	58-0828824	01/01/1998	Munich American Reassurance Company	Atlanta, Georgia	CAT/G				50,000				
70688	36-6071399	04/01/2004	TransAmerica Financial Life Insurance Company	Purchase, New York	CO/I	5,907,452,209	41,594,369	34,573,114	10,386,350				
70688	36-6071399	05/01/2009	TransAmerica Financial Life Insurance Company	Purchase, New York	CO/I	2,104,021,175	14,895,805	7,819,412	4,170,775				
0199999. Authorized General Account, Affiliates						13,770,439,916	87,154,024	64,235,853	25,899,566				
0399999. Total Authorized General Account						13,770,439,916	87,154,024	64,235,853	25,899,566				
0699999. Total Unauthorized General Account													
0799999. Total Authorized and Unauthorized General Account						13,770,439,916	87,154,024	64,235,853	25,899,566				
1099999. Total Authorized Separate Accounts													
1399999. Total Unauthorized Separate Accounts													
1499999. Total Authorized and Unauthorized Separate Accounts													
1599999 - Totals						13,770,439,916	87,154,024	64,235,853	25,899,566				





ANNUAL STATEMENT FOR THE YEAR 2010 OF THE AMICA LIFE INSURANCE COMPANY

**SCHEDULE S - PART 5**

Five Year Exhibit of Reinsurance Ceded Business  
(000 OMITTED)

	1 2010	2 2009	3 2008	4 2007	5 2006
<b>A. OPERATIONS ITEMS</b>					
1. Premiums and annuity considerations for life and accident and health contracts .....	25,900	23,202	21,913	19,653	15,226
2. Commissions and reinsurance expense allowances .....	8,262	8,045	7,565	7,088	6,574
3. Contract claims .....	6,683	6,538	4,959	2,370	3,070
4. Surrender benefits and withdrawals for life contracts .....					
5. Dividends to policyholders .....					
6. Reserve adjustments on reinsurance ceded .....					
7. Increase in aggregate reserve for life and accident and health contracts .....	22,918	24,345	11,367	11,271	6,849
<b>B. BALANCE SHEET ITEMS</b>					
8. Premiums and annuity considerations for life and accident and health contracts deferred and uncollected .....	2,662	2,122	2,182	2,646	1,922
9. Aggregate reserves for life and accident and health contracts .....	87,154	64,236	39,891	28,524	17,252
10. Liability for deposit-type contracts .....					
11. Contract claims unpaid .....	1,161	934	845	570	1,691
12. Amounts recoverable on reinsurance .....	587	1,348	15	301	700
13. Experience rating refunds due or unpaid .....	230	372	351	384	1,164
14. Policyholders' dividends (not included in Line 10) .....					
15. Commissions and reinsurance expense allowances unpaid .....	784	801	844	1,026	794
16. Unauthorized reinsurance offset .....					
<b>C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)</b>					
17. Funds deposited by and withheld from (F) .....					
18. Letters of credit (L) .....					
19. Trust agreements (T) .....					
20. Other (O) .....					

ANNUAL STATEMENT FOR THE YEAR 2010 OF THE AMICA LIFE INSURANCE COMPANY

**SCHEDULE S - PART 6**

Restatement of Balance Sheet to Identify Net Credit for Ceded Reinsurance

	1 As Reported (net of ceded)	2 Restatement Adjustments	3 Restated (gross of ceded)
<b>ASSETS (Page 2, Col. 3)</b>			
1. Cash and invested assets (Line 12) .....	988,324,287		988,324,287
2. Reinsurance (Line 16) .....	1,601,297	(1,601,297)	
3. Premiums and considerations (Line 15) .....	11,373,010	2,662,371	14,035,381
4. Net credit for ceded reinsurance .....	XXX	87,254,350	87,254,350
5. All other admitted assets (balance) .....	22,742,914		22,742,914
6. Total assets excluding Separate Accounts (Line 26) .....	1,024,041,508	88,315,424	1,112,356,932
7. Separate Account assets (Line 27) .....			
8. Total assets (Line 28)	1,024,041,508	88,315,424	1,112,356,932
<b>LIABILITIES, CAPITAL AND SURPLUS (Page 3)</b>			
9. Contract reserves (Lines 1 and 2) .....	606,785,121	87,154,024	693,939,145
10. Liability for deposit-type contracts (Line 3) .....	160,965,388		160,965,388
11. Claim reserves (Line 4) .....	4,664,567	1,161,400	5,825,967
12. Policyholder dividends/reserves (Lines 5 through 7) .....			
13. Premium & annuity considerations received in advance (Line 8) .....	170,301		170,301
14. Other contract liabilities (Line 9) .....	7,252,780		7,252,780
15. Reinsurance in unauthorized companies (Line 24.02) .....			
16. Funds held under reinsurance treaties with unauthorized reinsurers (Line 24.03) .....			
17. All other liabilities (balance) .....	58,504,229		58,504,229
18. Total liabilities excluding Separate Accounts (Line 26) .....	838,342,386	88,315,424	926,657,810
19. Separate Account liabilities (Line 27) .....			
20. Total liabilities (Line 28) .....	838,342,386	88,315,424	926,657,810
21. Capital & surplus (Line 38) .....	185,699,122	XXX	185,699,122
22. Total liabilities, capital & surplus (Line 39)	1,024,041,508	88,315,424	1,112,356,932
<b>NET CREDIT FOR CEDED REINSURANCE</b>			
23. Contract reserves .....	87,154,024		
24. Claim reserves .....	1,161,400		
25. Policyholder dividends/reserves .....			
26. Premium & annuity considerations received in advance .....			
27. Liability for deposit-type contracts .....			
28. Other contract liabilities .....			
29. Reinsurance ceded assets .....	1,601,297		
30. Other ceded reinsurance recoverables .....			
31. Total ceded reinsurance recoverables .....	89,916,721		
32. Premiums and considerations .....	2,662,371		
33. Reinsurance in unauthorized companies .....			
34. Funds held under reinsurance treaties with unauthorized reinsurers .....			
35. Other ceded reinsurance payables/offsets .....			
36. Total ceded reinsurance payable/offsets .....	2,662,371		
37. Total net credit for ceded reinsurance	87,254,350		

ANNUAL STATEMENT FOR THE YEAR 2010 OF THE AMICA LIFE INSURANCE COMPANY

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

Allocated by States and Territories

States, Etc.		Direct Business Only					Totals
		1 Life (Group and Individual)	2 Annuities (Group and Individual)	3 Disability Income (Group and Individual)	4 Long-Term Care (Group and Individual)	5 Deposit-Type Contracts	
1. Alabama	AL	136,943	47,297				184,240
2. Alaska	AK	36,432	2,050				38,482
3. Arizona	AZ	655,655	49,602				705,257
4. Arkansas	AR	87,616	2,000				89,616
5. California	CA	3,946,858	869,667				4,816,525
6. Colorado	CO	1,072,760	448,799				1,521,559
7. Connecticut	CT	7,055,157	2,289,718				9,344,875
8. Delaware	DE	182,784					182,784
9. District of Columbia	DC	214,111	12,000				226,111
10. Florida	FL	3,708,473	1,901,311				5,609,784
11. Georgia	GA	1,905,042	306,128				2,211,170
12. Hawaii	HI	21,897	22,718				44,615
13. Idaho	ID	125,682	1,810				127,492
14. Illinois	IL	1,167,938	160,539				1,328,477
15. Indiana	IN	378,046	16,200				394,246
16. Iowa	IA	74,636					74,636
17. Kansas	KS	119,337	104,000				223,337
18. Kentucky	KY	238,356	1,750				240,106
19. Louisiana	LA	240,076	63,060				303,136
20. Maine	ME	720,644	204,201				924,845
21. Maryland	MD	1,573,559	198,597				1,772,156
22. Massachusetts	MA	8,699,831	2,612,956				11,312,787
23. Michigan	MI	773,689	8,700				782,389
24. Minnesota	MN	530,871	18,210				549,081
25. Mississippi	MS	32,084	120				32,204
26. Missouri	MO	177,158	6,000				183,158
27. Montana	MT	62,989	36,912				99,901
28. Nebraska	NE	66,824					66,824
29. Nevada	NV	181,826	508,807				690,633
30. New Hampshire	NH	2,286,521	1,422,346				3,708,867
31. New Jersey	NJ	3,649,657	989,868				4,639,525
32. New Mexico	NM	253,809	8,600				262,409
33. New York	NY	7,036,632	3,489,256				10,525,888
34. North Carolina	NC	2,756,471	417,712				3,174,183
35. North Dakota	ND	3,491					3,491
36. Ohio	OH	967,417	286,450				1,253,867
37. Oklahoma	OK	93,540	13,296				106,836
38. Oregon	OR	738,338	15,978				754,316
39. Pennsylvania	PA	2,275,395	667,907				2,943,302
40. Rhode Island	RI	6,831,210	5,322,768		15,948,971		28,102,949
41. South Carolina	SC	592,315	38,525				630,840
42. South Dakota	SD	23,495					23,495
43. Tennessee	TN	512,232	153,418				665,650
44. Texas	TX	4,871,275	1,415,444				6,286,719
45. Utah	UT	190,369					190,369
46. Vermont	VT	388,215	51,211				439,426
47. Virginia	VA	1,485,727	374,755				1,860,482
48. Washington	WA	1,463,911	78,936				1,542,847
49. West Virginia	WV	81,698	800				82,498
50. Wisconsin	WI	366,113	15,040				381,153
51. Wyoming	WY	24,849	3,000				27,849
52. American Samoa	AS						
53. Guam	GU						
54. Puerto Rico	PR						
55. U.S. Virgin Islands	VI						
56. Northern Mariana Islands	MP						
57. Canada	CN						
58. Aggregate Other Alien	OT						
59. Total		71,079,954	24,658,462		15,948,971		111,687,387



**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>
<b>MARCH FILING</b>	
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
<b>APRIL FILING</b>	
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
<b>JUNE FILING</b>	
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
<b>AUGUST FILING</b>	
11. Will Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile 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.

<b>MARCH FILING</b>	
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? .....	NO
16. Will the actuarial opinion on non-guaranteed elements as required in interrogatory #3 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1? .....	YES
17. Will the actuarial opinion on X-Factors be filed with the state of domicile and electronically with the NAIC by March 1? .....	YES
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

**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 Worker's Compensation Carve-Out Supplement be filed by March 1? ..... NO
  - 34. Will Supplemental Schedule O be filed with the state of domicile and the NAIC by March 1? ..... NO
  - 35. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1? ..... NO
- APRIL FILING**
- 36. Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1? ..... NO
  - 37. Will the Interest-Sensitive Life Insurance Products Report Forms be filed with the state of domicile and the NAIC by April 1? ..... YES
  - 38. Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1? ..... NO
  - 39. Will the Accident and Health Policy Experience Exhibit be filed by April 1? ..... NO
  - 40. Will the Analysis of Annuity Operations by Lines of Business be filed with the state of domicile and the NAIC by April 1? ..... YES
  - 41. 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
  - 42. 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
  - 43. 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

**AUGUST FILING**

- 44. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1? ..... SEE EXPLANATION

Explanations:

- 12.
- 13.
- 14.
- 15.
- 18.
- 19.
- 20.
- 21.
- 22.
- 23.
- 24.
- 26.
- 27.
- 28.
- 29.
- 30.
- 31.
- 32.
- 33.
- 34.
- 35.
- 36.
- 38.
- 39.
- 42.
- 43.

44. Not Required  
Bar Codes:

12. SIS Stockholder Information Supplement [Document Identifier 420]



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



14. Trusteed Surplus Statement [Document Identifier 490]



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



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



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



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]



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE AMICA LIFE INSURANCE COMPANY

- 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. Workers' Compensation Carve-Out Supplement [Document Identifier 495] 
- 34. Supplemental Schedule O [Document Identifier 465] 
- 35. Medicare Part D Coverage Supplement [Document Identifier 365] 
- 36. Long-Term Care Experience Reporting Forms [Document Identifier 306] 
- 38. Credit Insurance Experience Exhibit [Document Identifier 230] 
- 39. Accident and Health Policy Experience Exhibit [Document Identifier 210] 
- 42. Supplemental Health Care Exhibit (Parts 1, 2 and 3) [Document Identifier 216] 
- 43. Supplemental Health Care Exhibit's Expense Allocation Report [Document Identifier 217] 

**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. Amica Companies supplemental retirement trust .....	2,716,910	1,183,411	1,533,499	1,425,934
2597. Summary of remaining write-ins for Line 25 from overflow page	2,716,910	1,183,411	1,533,499	1,425,934

Additional Write-ins for Liabilities Line 25

	1 Current Year	2 Prior Year
2504. Reserve for non-funded pensions and deferrals .....	1,572,070	1,425,934
2597. Summary of remaining write-ins for Line 25 from overflow page	1,572,070	1,425,934

## 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 .....	53
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 .....	SI11

**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 .....	SI12
Schedule DB - Part B - Section 1 .....	E20
Schedule DB - Part B - Section 2 .....	E21
Schedule DB - Part B - Verification Between Years .....	SI12
Schedule DB - Part C - Section 1 .....	SI13
Schedule DB - Part C - Section 2 .....	SI14
Schedule DB - Part D .....	E22
Schedule DB - Verification .....	SI15
Schedule DL - Part 1 .....	E23
Schedule DL - Part 2 .....	E24
Schedule E - Part 1 - Cash .....	E25
Schedule E - Part 2 - Cash Equivalents .....	E26
Schedule E - Part 3 - Special Deposits .....	E27
Schedule E - Verification Between Years .....	SI16
Schedule F .....	36
Schedule H - Accident and Health Exhibit - Part 1 .....	37
Schedule H - Part 2, Part 3 and Part 4 .....	38
Schedule H - Part 5 - Health Claims .....	39
Schedule S - Part 1 - Section 1 .....	40
Schedule S - Part 1 - Section 2 .....	41
Schedule S - Part 2 .....	42
Schedule S - Part 3 - Section 1 .....	43
Schedule S - Part 3 - Section 2 .....	44
Schedule S - Part 4 .....	45
Schedule S - Part 5 .....	46
Schedule S - Part 6 .....	47
Schedule T - Part 2 Interstate Compact .....	49
Schedule T - Premiums and Annuity Considerations .....	48
Schedule Y - Information Concerning Activities of Insurer Members of a Holding Company Group .....	50
Schedule Y - Part 2 - Summary of Insurer's Transactions With Any Affiliates .....	51
Summary Investment Schedule .....	SI01
Summary of Operations .....	4
Supplemental Exhibits and Schedules Interrogatories .....	52