

**DOMESTIC LIFE COMPANIES
COMPULSORY AND SECURITY SURPLUS
CALCULATION**



State of Wisconsin
Office of the Commissioner of Insurance
P. O. Box 7873
Madison, WI 53707-7873

Ref: Section Ins 51.80, Wis. Adm. Code

INSTRUCTIONS: This form is required of all life insurers licensed in Wisconsin except life insurers domiciled in foreign countries. Failure to complete this form will result in disciplinary action. Round all figures to the nearest dollar. Compulsory surplus is the surplus required in order not to be considered financially hazardous and to provide security against contingencies affecting financial condition not fully covered by reserves or reinsurance. Compulsory surplus is calculated as a factor of premium written net of premiums ceded to authorized reinsurers without regard to modified coinsurance. For purposes of calculating compulsory surplus assets, include investments in insurance subsidiaries only to the extent that the insurance subsidiary has security surplus. The Commissioner may modify the compulsory surplus requirement for insurers based on relevant factors and a negative result on this form does not necessarily result in regulatory action. This form is required as of March 31, June 30, September 30. Complete it, using the prior 12 months' data. Send completed form with all quarterly statement filings to the above address by the required quarterly filing date.

Company Name MEMBERS Life Insurance Company	NAIC Number 86126
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NATIONWIDE BUSINESS FOR 12 MONTHS ENDING June 30, 2006

	A Individual Life and A&H (including Credit Life & A&H)	B Group Life and A&H (including Credit Life & A&H)	C Annuity and Other Considerations	D All Other Insurance (including P&C)	E Deposit Type Funds	F Totals Cols. A+B+ C+D+E
	Total of Col. A+B= Sch. T, Line 99, Col. 2+4 See note	Total of Col. A+B= Sch. T, Line 99, Col. 2+4 See note	Sch. T, Line 99, Col. 3+6 See note		Sch. T, Line 99, Col. 5 See note	Sch. T, Line 99, Col. 2+3+4+5+6 plus Col. D See note
Nationwide Total Net						
1. Premium Written From Sch. T, Line 99	12,780,836	3,655,126	36,546,654	0	0	52,982,616
2. Less Dividends, etc.— itemize Col. A-E (Annual Statement, page 11, Ex. 4, Line 9, sum of Cols. 1+2 = Col. F) See note	1,449,488	0	0	0	0	1,449,488
3. Add Premiums Ceded to Unauthorized Reinsurers (Sch. S, Part 3, Section 1, Col. 10 and Section 2, Col. 7 for those reinsurers listed in Part 4) See note	0	0	0	0	0	0
4. ADD Modified Coinsurance Premium Ceded to Authorized Reinsurers	0	0	0	0	0	0
5. LESS Modified Coinsurance Premiums Assumed	0	0	0	0	0	0
6. Total (Line 1-2+3+4-5)	11,331,348	3,655,126	36,546,654	0	0	51,533,128
7. Factor*	.15	.10	.075	.20	.075	
8. Total (Line 6 x Line 7)	1,699,702	365,512	2,740,999	0	0	

9. Amount of Reserve for Annuities and Deposit Administration Funds (Annual Statement, Page 12, Line 0299999, Column 2; and Annual Statement, Exhibit 7, Line 14 [Guaranteed Interest Contracts, Annuities Certain, and Other Deposit Funds only]) See note	609,572,438
Factor	x .02
10.Total (Line 9 x .02)	12,191,448
11.Total of Line 8, Columns C+E	2,740,999
12.Compulsory Surplus Requirement (Line 8, sum of Columns A + B + D) + (Greater of Line 10 or 11) but do not enter less than \$2 million	14,256,662
13.Security Surplus Factor: Enter Percentage Based on Premium Entered on Line 6, Column F	139%
14.Security Surplus Requirement (Line 12 x Line 13)	19,816,760
15.Comparison of Assets Less Liabilities to Compulsory & Security Surplus	
a. Assets (Annual/Quarterly Statement, Page 2, Line 26, Column 3)	788,989,392
b. LESS Investments in Insurance Subsidiaries	0
c. ADD Security Surplus Excess of Insurance Subsidiaries	0
d. Total Assets for Compulsory/Security Surplus	788,989,392
e. Liabilities (Annual/Quarterly Statement, Page 3, Line 28)	760,084,179
f. Subtotal - Surplus adjusted for Compulsory/Security Surplus (Line 15d Less Line 15e)	28,905,213
g. Compulsory Surplus Requirement (Line 12 above)	14,256,662
h. Total Compulsory Surplus Excess (Deficiency) (Line 15f Less Line 15g)	14,648,551
i. Total Security Surplus Excess (Deficiency) (Line 15f Less Line 14)	9,088,453

*If a compulsory surplus order has been issued on this company, adjust these factors to the terms of the Order.

NOTE:Annual statement references are given ONLY as a guide to the information requested as of quarter-end.

Name of Person Completing Form	E-mail Address of Person Completing Form
Christopher Mangan	chris.mangan@cunamutual.com

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