

1.) CORPORATION NAME:

SECURITY NATIONAL LIFE INSURANCE COMPANY

DUE DATE: **10/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**JOSEPH BLACKBURN, JR.
300 WEST MAIN STREET
RICHMOND, VA**

SCC ID NO: **F0448284**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	50,000
PREFER	10,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

UT

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 5300 S. 360 WEST
SUITE 250

CITY/ST/ZIP: SALT LAKE CITY, UT 84123

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

<p>NAME: SCOTT M. QUIST TITLE: PRESIDENT ADDRESS: 5300 SOUTH 360 WEST, SUITE 250 CITY/ST/ZIP/CO: SALT LAKE CITY, UT 84123</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: DIANA C. OLSON TITLE: VP/CONTROLLER ADDRESS: 5300 SOUTH 360 WEST, SUITE 250 CITY/ST/ZIP/CO: SALT LAKE CITY, UT 84123</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: JEFFREY RUSSELL STEPHENS TITLE: SECRETARY ADDRESS: 5300 SOUTH 360 WEST CITY/ST/ZIP/CO: SALT LAKE CITY, UT 84123</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: GARRETT STEPHEN SILL TITLE: TREASURER ADDRESS: 5300 SOUTH 360 WEST CITY/ST/ZIP/CO: SALT LAKE CITY, UT 84123</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: JASON GARY OVERBAUGH TITLE: VICE PRESIDENT ADDRESS: 5300 SOUTH 360 WEST CITY/ST/ZIP/CO: SALT LAKE CITY, UT 84123</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: SCOTT ANDREW QUIST TITLE: VICE PRESIDENT ADDRESS: 5300 SOUTH 360 WEST CITY/ST/ZIP/CO: SALT LAKE CITY, UT 84123</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	FAYE ANNE RUBY BLACKETT VICE PRESIDENT 5300 SOUTH 360 WEST SALT LAKE CITY, UT 84123	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	RONALD JAMES DOWDEN VICE PRESIDENT 5300 SOUTH 360 WEST SALT LAKE CITY, UT 84123	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CHRISTOPHER WYNN MEREDITH VICE PRESIDENT 5300 SOUTH 360 WEST SALT LAKE CITY, UT 84123	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CHRISTIE QUIST OVERBAUGH VICE PRESIDENT 5300 SOUTH 360 WEST SALT LAKE CITY, UT 84123	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	STEPHEN WILLIAMS TURNER VICE PRESIDENT 5300 SOUTH 360 WEST SALT LAKE CITY, UT 84123	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOHN WAYNE VAN VALKENBURG VICE PRESIDENT 5300 SOUTH 360 WEST SALT LAKE CITY, UT 84123	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	GUY VICTOR WINSTEAD VICE PRESIDENT 5300 SOUTH 360 WEST SALT LAKE CITY, UT 84123	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JACK LYNN BECKSTEAD DIRECTOR 5300 SOUTH 360 WEST SALT LAKE CITY, UT 84123	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	GILBERT AMOS FULLER DIRECTOR 5300 SOUTH 360 WEST SALT LAKE CITY, UT 84123	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ROBERT GAIL HUNTER DIRECTOR 5300 SOUTH 360 WEST SALT LAKE CITY, UT 84123	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	HOWARD CRAIG MOODY DIRECTOR 5300 SOUTH 360 WEST SALT LAKE CITY, UT 84123	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: NORMAN GILBERT WILBUR OFFICER DIRECTOR
TITLE: DIRECTOR
ADDRESS: 5300 SOUTH 360 WEST
CITY/ST/ZIP/CO: SALT LAKE CITY, UT 84123

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

<u>/s/ DIANA C. OLSON</u>	<u>DIANA C. OLSON,</u>	<u>9/10/2013</u>
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	VP/CONTROLLER PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.