

2520182230033

PROTECTIVE LIFE CORPORATION
REPORTING AND DISCLOSURE COMPLIANCE STATEMENT

In compliance with Section 110 of the Employee Retirement Income Security Act of 1974 ("ERISA") and the Regulations thereunder, found in Section 2520.104-23, Protective Life Corporation ("PROTECTIVE") is filing this Reporting and Disclosure Compliance Statement and in connection herewith, provides the following information:

EMPLOYER:	Protective Life Corporation
ADDRESS:	2801 Highway 280 South P. O. Box 2606 Birmingham, Alabama 35202
EMPLOYER IDENTIFICATION NO.	95-2492236
PLAN NAMES:	Protective Life Corporation Excess Benefit Plan ("Plan One") Protective Life Corporation Deferred Compensation Plan for Officers ("Plan Two")
NUMBER OF PLANS:	Two
NUMBER OF EMPLOYEES PARTICIPATING IN EACH PLAN:	80 in Plan One 135 in Plan Two

PROTECTIVE maintains the above-named unfunded Plan(s) primarily for the purpose of providing deferred compensation for a select group of management or highly compensated employees.

PROTECTIVE will provide the Plan documents to the Secretary of Labor upon request, as required by Section 104(a)(1) of ERISA.

Protective Life Corporation,
As Plan Administrator

By: *Pam A. McC*

Title: *Chief Accounting Officer*

Protective Life
Insurance Company
Post Office Box 2606
Birmingham, AL 35202
Phone 205 268 1000

1031/PUBLIC DISCLOSURE

2018 JUL -5 AM 10:33



United States Department of Labor
Employee Benefits Security Administration
Top Hat Plan Exemption
200 Constitution Avenue, NW, N-1515
Washington, DC 20210

Re: Protective Life Corporation Top Hat Plans

Dear Sir or Madam,

Attached, please find the Reporting and Disclosure Compliance Statement described in 29 CFR § 2520.104-23 for the following nonqualified deferred compensation plans sponsored by Protective Life Corporation ("Protective"):

1. Protective Life Corporation Excess Benefit Plan
2. Protective Life Corporation Deferred Compensation Plan for Officers

Please note that Form 5500 has also been submitted to the Department of Labor under separate cover as part of a filing under the Delinquent Filer Voluntary Compliance Program ("DFVCP"). Although Protective believes that a compliance statement was timely filed for the above plans, it is unable to locate file copies of the filings. Therefore, in an abundance of caution, this filing is being done to ensure compliance with the reporting rules under the Employee Retirement Income Security Act of 1974, as amended.

Please contact the undersigned should you have any questions.

Very truly yours,

Paul Wells
Senior Vice President, Chief Accounting Officer and Controller
Corporate Accounting

Extremely Urgent

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EMPLOYEE BENEFITS SECURITY ADMINIST
US DEPT OF LABOR
N-1515
200 CONSTITUTION AVE NW
WASHINGTON DC 20210

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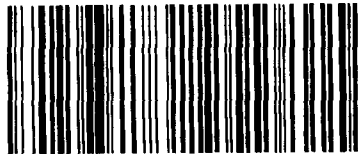
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BILLING: P/P

REF 1: 61515
REF 2: RACHEL GOODSON

US 21.8.16 LP2844 99 DR 04/2018

1Z3311670258165863 JUN 29 2018 OCT 11 0.1 LBS 1 OF 1

Express Mail

From: Rachel Goodson 5724
Name Ext.
Accounting 61515
Dept. Cost Center
(MANDATORY)

To: U.S. Dept of Labor
Employee Benefits Security Administration
Top Hat Plan Exemption
200 Constitution Ave NW N-1515
Phone: Washington, DC 20210

When does it need to be there?

- | | |
|--|--|
| <p>↓ ECONOMY SERVICES ↓</p> <input checked="" type="checkbox"/> GROUND
<input type="checkbox"/> ECONOMY 3 DAY DEL
<input type="checkbox"/> ECONOMY 2 DAY DEL | <p>↓ STANDARD SERVICES ↓</p> <input type="checkbox"/> DEL NEXT DAY BY 3:00
<input type="checkbox"/> DEL NEXT DAY BY 10:30
<input type="checkbox"/> SATURDAY DEL - Extra Chg. |
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