



LIFE, AND ACCIDENT AND HEALTH COMPANIES/FRATERNAL BENEFIT SOCIETIES - ASSOCIATION EDITION

ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2021
OF THE CONDITION AND AFFAIRS OF THE

MedMutual Life Insurance Company

NAIC Group Code 0730 0730 NAIC Company Code 62375 Employer's ID Number 21-0706531
(Current) (Prior)

Organized under the Laws of Ohio, State of Domicile or Port of Entry OH

Country of Domicile United States of America

Licensed as business type: Life, Accident and Health [X] Fraternal Benefit Societies []

Incorporated/Organized 10/03/1955 Commenced Business 10/03/1955

Statutory Home Office 2060 East Ninth Street, Cleveland, OH, US 44115-1355
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 2060 East Ninth Street, Cleveland, OH, US 44115-1355
(Street and Number) (City or Town, State, Country and Zip Code) 216-687-7000
(Area Code) (Telephone Number)

Mail Address 2060 East Ninth Street, Cleveland, OH, US 44115-1355
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 2060 East Ninth Street, Cleveland, OH, US 44115-1355
(Street and Number) (City or Town, State, Country and Zip Code) 216-687-7000
(Area Code) (Telephone Number)

Internet Website Address www.medmutuallife.com

Statutory Statement Contact Kevin Spruch, 216-687-2759
(Name) (Area Code) (Telephone Number)
Kevin.Spruch@medmutual.com, 216-360-4073
(E-mail Address) (FAX Number)

OFFICERS

President & CEO Richard Alan Chiricosta Treasurer Raymond Karl Mueller
Secretary Patricia Bunn Decensi

OTHER

DIRECTORS OR TRUSTEES

James Charles Cellura Richard Alan Chiricosta Andrea Marie Hogben
Steffany Matticola Larkins Raymond Karl Mueller

State of Ohio SS
County of Cuyahoga

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.

Richard Alan Chiricosta
President & CEO

Patricia Bunn Decensi
Secretary

Raymond Karl Mueller
Treasurer

Subscribed and sworn to before me this

day of _____

- a. Is this an original filing?
b. If no,
1. State the amendment number.....
2. Date filed
3. Number of pages attached.....

Yes [X] No []

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MedMutual Life Insurance Company

ASSETS

| | Current Year | | | Prior Year |
|--|--------------|-------------------------|---|-----------------------------|
| | 1 Assets | 2 Nonadmitted Assets | 3 Net Admitted Assets (Cols. 1 - 2) | 4 Net Admitted Assets |
| 1. Bonds (Schedule D) | 28,845,593 | | 28,845,593 | 29,865,372 |
| 2. Stocks (Schedule D): | | | | |
| 2.1 Preferred stocks | | | 0 | 0 |
| 2.2 Common stocks | | | 0 | 0 |
| 3. Mortgage loans on real estate (Schedule B): | | | | |
| 3.1 First liens | | | 0 | 0 |
| 3.2 Other than first liens | | | 0 | 0 |
| 4. Real estate (Schedule A): | | | | |
| 4.1 Properties occupied by the company (less \$ encumbrances) | | | 0 | 0 |
| 4.2 Properties held for the production of income (less \$ encumbrances) | | | 0 | 0 |
| 4.3 Properties held for sale (less \$ encumbrances) | | | 0 | 0 |
| 5. Cash (\$ 5,302,691 , Schedule E - Part 1), cash equivalents (\$ 16,129,308 , Schedule E - Part 2) and short-term investments (\$, Schedule DA) | 21,432,000 | | 21,432,000 | 8,452,966 |
| 6. Contract loans (including \$ premium notes) | | | 0 | 0 |
| 7. Derivatives (Schedule DB) | | | 0 | 0 |
| 8. Other invested assets (Schedule BA) | | | 0 | 0 |
| 9. Receivables for securities | | | 0 | 0 |
| 10. Securities lending reinvested collateral assets (Schedule DL) | | | 0 | 0 |
| 11. Aggregate write-ins for invested assets | 0 | 0 | 0 | 0 |
| 12. Subtotals, cash and invested assets (Lines 1 to 11) | 50,277,592 | 0 | 50,277,592 | 38,318,338 |
| 13. Title plants less \$ charged off (for Title insurers only) | | | 0 | 0 |
| 14. Investment income due and accrued | 68,826 | 0 | 68,826 | 106,748 |
| 15. Premiums and considerations: | | | | |
| 15.1 Uncollected premiums and agents' balances in the course of collection | 1,920,680 | 0 | 1,920,680 | 1,440,515 |
| 15.2 Deferred premiums and agents' balances and installments booked but deferred and not yet due (including \$ earned but unbilled premiums) | | | 0 | 0 |
| 15.3 Accrued retrospective premiums (\$) and contracts subject to redetermination (\$) | | | 0 | 0 |
| 16. Reinsurance: | | | | |
| 16.1 Amounts recoverable from reinsurers | 710,357 | 0 | 710,357 | 292,210 |
| 16.2 Funds held by or deposited with reinsured companies | | | 0 | 0 |
| 16.3 Other amounts receivable under reinsurance contracts | | | 0 | 0 |
| 17. Amounts receivable relating to uninsured plans | 142,177 | 0 | 142,177 | 197,440 |
| 18.1 Current federal and foreign income tax recoverable and interest thereon | 2,814,278 | 0 | 2,814,278 | 643,387 |
| 18.2 Net deferred tax asset | | | 0 | 46,872 |
| 19. Guaranty funds receivable or on deposit | 6 | 0 | 6 | 6,072 |
| 20. Electronic data processing equipment and software | | | 0 | 0 |
| 21. Furniture and equipment, including health care delivery assets (\$) | | | 0 | 0 |
| 22. Net adjustment in assets and liabilities due to foreign exchange rates | | | 0 | 0 |
| 23. Receivables from parent, subsidiaries and affiliates | 4,000,327 | 0 | 4,000,327 | 4,871,762 |
| 24. Health care (\$ 0) and other amounts receivable | 9,400 | 9,400 | 0 | 0 |
| 25. Aggregate write-ins for other than invested assets | 128,258 | 43,592 | 84,666 | 19,507 |
| 26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25) | 60,071,903 | 52,992 | 60,018,911 | 45,942,851 |
| 27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts | | | 0 | 0 |
| 28. Total (Lines 26 and 27) | 60,071,903 | 52,992 | 60,018,911 | 45,942,851 |
| DETAILS OF WRITE-INS | | | | |
| 1101. | | | | |
| 1102. | | | | |
| 1103. | | | | |
| 1198. Summary of remaining write-ins for Line 11 from overflow page | 0 | 0 | 0 | 0 |
| 1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above) | 0 | 0 | 0 | 0 |
| 2501. Prepaid Assets | 29,753 | 29,753 | 0 | 0 |
| 2502. Other Receivables | 68,168 | 13,840 | 54,328 | 0 |
| 2503. Other Assets | 30,338 | 0 | 30,338 | 19,507 |
| 2598. Summary of remaining write-ins for Line 25 from overflow page | 0 | 0 | 0 | 0 |
| 2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above) | 128,258 | 43,592 | 84,666 | 19,507 |

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MedMutual Life Insurance Company
LIABILITIES, SURPLUS AND OTHER FUNDS

| | 1 Current Year | 2 Prior Year |
|--|-------------------|-----------------|
| 1. Aggregate reserve for life contracts \$ 6,392,500 (Exh. 5, Line 9999999) less \$ included in Line 6.3 (including \$ Modco Reserve) | 6,392,500 | .979,000 |
| 2. Aggregate reserve for accident and health contracts (including \$ 0 Modco Reserve) | 1,980,772 | .834,092 |
| 3. Liability for deposit-type contracts (Exhibit 7, Line 14, Col. 1) (including \$ Modco Reserve) | 0 | 0 |
| 4. Contract claims: | | |
| 4.1 Life (Exhibit 8, Part 1, Line 4.4, Col. 1 less sum of Cols. 9, 10 and 11) | 14,591,563 | 7,038,848 |
| 4.2 Accident and health (Exhibit 8, Part 1, Line 4.4, sum of Cols. 9, 10 and 11) | 40,000 | 36,250 |
| 5. Policyholders' dividends/refunds to members \$ and coupons \$ due and unpaid (Exhibit 4, Line 10) | .0 | 0 |
| 6. Provision for policyholders' dividends, refunds to members and coupons payable in following calendar year - estimated amounts: | | |
| 6.1 Policyholders' dividends and refunds to members apportioned for payment (including \$ Modco) | 0 | 0 |
| 6.2 Policyholders' dividends and refunds to members not yet apportioned (including \$ Modco) | 0 | 0 |
| 6.3 Coupons and similar benefits (including \$ Modco) | 0 | 0 |
| 7. Amount provisionally held for deferred dividend policies not included in Line 6 | | |
| 8. Premiums and annuity considerations for life and accident and health contracts received in advance less \$ discount; including \$ 109,088 accident and health premiums (Exhibit 1, Part 1, Col. 1, sum of lines 4 and 14) | 403,989 | 318,368 |
| 9. Contract liabilities not included elsewhere: | | |
| 9.1 Surrender values on canceled contracts | | |
| 9.2 Provision for experience rating refunds, including the liability of \$ accident and health experience rating refunds of which \$ 0 is for medical loss ratio rebate per the Public Health Service Act | 27,086 | 0 |
| 9.3 Other amounts payable on reinsurance, including \$ assumed and \$ 1,505,294 ceded | 1,505,294 | .559,100 |
| 9.4 Interest maintenance reserve (IMR, Line 6) | 9,279 | 17,432 |
| 10. Commissions to agents due or accrued-life and annuity contracts \$ 220,058 accident and health \$ 57,443 and deposit-type contract funds \$ | 277,500 | 237,700 |
| 11. Commissions and expense allowances payable on reinsurance assumed | | |
| 12. General expenses due or accrued (Exhibit 2, Line 12, Col. 7) | 675,799 | 578,119 |
| 13. Transfers to Separate Accounts due or accrued (net) (including \$ accrued for expense allowances recognized in reserves, net of reinsured allowances) | | |
| 14. Taxes, licenses and fees due or accrued, excluding federal income taxes (Exhibit 3, Line 9, Col. 6) | 745,273 | 605,241 |
| 15.1 Current federal and foreign income taxes, including \$ on realized capital gains (losses) | 0 | 0 |
| 15.2 Net deferred tax liability | | |
| 16. Unearned investment income | | |
| 17. Amounts withheld or retained by reporting entity as agent or trustee | | |
| 18. Amounts held for agents' account, including \$ agents' credit balances | | |
| 19. Remittances and items not allocated | | |
| 20. Net adjustment in assets and liabilities due to foreign exchange rates | | |
| 21. Liability for benefits for employees and agents if not included above | | |
| 22. Borrowed money \$ and interest thereon \$ | | |
| 23. Dividends to stockholders declared and unpaid | | |
| 24. Miscellaneous liabilities: | | |
| 24.01 Asset valuation reserve (AVR, Line 16, Col. 7) | 54,799 | 53,324 |
| 24.02 Reinsurance in unauthorized and certified (\$ 0) companies | 0 | 0 |
| 24.03 Funds held under reinsurance treaties with unauthorized and certified (\$) reinsurers | | |
| 24.04 Payable to parent, subsidiaries and affiliates | | |
| 24.05 Drafts outstanding | | |
| 24.06 Liability for amounts held under uninsured plans | 18,900 | 18,900 |
| 24.07 Funds held under coinsurance | | |
| 24.08 Derivatives | 0 | 0 |
| 24.09 Payable for securities | | |
| 24.10 Payable for securities lending | | |
| 24.11 Capital notes \$ and interest thereon \$ | | |
| 25. Aggregate write-ins for liabilities | 91,968 | 74,890 |
| 26. Total liabilities excluding Separate Accounts business (Lines 1 to 25) | 26,814,723 | 11,351,264 |
| 27. From Separate Accounts Statement | | |
| 28. Total liabilities (Lines 26 and 27) | 26,814,723 | 11,351,264 |
| 29. Common capital stock | 1,600,000 | 1,600,000 |
| 30. Preferred capital stock | | |
| 31. Aggregate write-ins for other than special surplus funds | 0 | 0 |
| 32. Surplus notes | 0 | 0 |
| 33. Gross paid in and contributed surplus (Page 3, Line 33, Col. 2 plus Page 4, Line 51.1, Col. 1) | 51,633,368 | 36,633,368 |
| 34. Aggregate write-ins for special surplus funds | 0 | 0 |
| 35. Unassigned funds (surplus) | (20,029,180) | (3,641,781) |
| 36. Less treasury stock, at cost: | | |
| 36.1 shares common (value included in Line 29 \$) | | |
| 36.2 shares preferred (value included in Line 30 \$) | | |
| 37. Surplus (Total Lines 31+32+33+34+35-36) (including \$ in Separate Accounts Statement) | 31,604,188 | 32,991,587 |
| 38. Totals of Lines 29, 30 and 37 (Page 4, Line 55) | 33,204,188 | 34,591,587 |
| 39. Totals of Lines 28 and 38 (Page 2, Line 28, Col. 3) | 60,018,911 | 45,942,851 |
| DETAILS OF WRITE-INS | | |
| 2501. Unclaimed Funds and Other Liabilities | 91,968 | 74,890 |
| 2502. | | |
| 2503. | | |
| 2598. Summary of remaining write-ins for Line 25 from overflow page | 0 | 0 |
| 2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above) | 91,968 | 74,890 |
| 3101. | | |
| 3102. | | |
| 3103. | | |
| 3198. Summary of remaining write-ins for Line 31 from overflow page | 0 | 0 |
| 3199. Totals (Lines 3101 thru 3103 plus 3198)(Line 31 above) | 0 | 0 |
| 3401. | | |
| 3402. | | |
| 3403. | | |
| 3498. Summary of remaining write-ins for Line 34 from overflow page | 0 | 0 |
| 3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) | 0 | 0 |

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MedMutual Life Insurance Company
SUMMARY OF OPERATIONS

| | 1 Current Year | 2 Prior Year |
|--|-------------------|-----------------|
| 1. Premiums and annuity considerations for life and accident and health contracts (Exhibit 1, Part 1, Line 20.4, Col. 1, less Col. 11) | 39,885,342 | 31,187,044 |
| 2. Considerations for supplementary contracts with life contingencies | 0 | 0 |
| 3. Net investment income (Exhibit of Net Investment Income, Line 17) | 339,363 | 474,330 |
| 4. Amortization of Interest Maintenance Reserve (IMR, Line 5) | 8,153 | 6,932 |
| 5. Separate Accounts net gain from operations excluding unrealized gains or losses | 0 | 0 |
| 6. Commissions and expense allowances on reinsurance ceded (Exhibit 1, Part 2, Line 26.1, Col. 1) | 0 | 0 |
| 7. Reserve adjustments on reinsurance ceded | 0 | 0 |
| 8. Miscellaneous Income: | | |
| 8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts | 0 | 0 |
| 8.2 Charges and fees for deposit-type contracts | 0 | 0 |
| 8.3 Aggregate write-ins for miscellaneous income | 0 | 0 |
| 9. Total (Lines 1 to 8.3) | 40,232,858 | 31,668,306 |
| 10. Death benefits | 39,026,025 | 21,798,580 |
| 11. Matured endowments (excluding guaranteed annual pure endowments) | 0 | 0 |
| 12. Annuity benefits (Exhibit 8, Part 2, Line 6.4, Cols. 4 + 8) | 0 | 0 |
| 13. Disability benefits and benefits under accident and health contracts | 5,599,671 | 2,504,929 |
| 14. Coupons, guaranteed annual pure endowments and similar benefits | 0 | 0 |
| 15. Surrender benefits and withdrawals for life contracts | 0 | 0 |
| 16. Group conversions | 0 | 0 |
| 17. Interest and adjustments on contract or deposit-type contract funds | 0 | 0 |
| 18. Payments on supplementary contracts with life contingencies | 0 | 0 |
| 19. Increase in aggregate reserves for life and accident and health contracts | 6,560,180 | 277,939 |
| 20. Totals (Lines 10 to 19) | 51,185,876 | 24,581,448 |
| 21. Commissions on premiums, annuity considerations, and deposit-type contract funds (direct business only) (Exhibit 1, Part 2, Line 31, Col. 1) | 3,079,054 | 2,654,356 |
| 22. Commissions and expense allowances on reinsurance assumed (Exhibit 1, Part 2, Line 26.2, Col. 1) | 0 | 0 |
| 23. General insurance expenses and fraternal expenses (Exhibit 2, Line 10, Cols. 1, 2, 3, 4 and 6) | 4,308,553 | 3,284,729 |
| 24. Insurance taxes, licenses and fees, excluding federal income taxes (Exhibit 3, Line 7, Cols. 1 + 2 + 3 + 5) | 956,641 | 756,798 |
| 25. Increase in loading on deferred and uncollected premiums | 0 | 0 |
| 26. Net transfers to or (from) Separate Accounts net of reinsurance | 0 | 0 |
| 27. Aggregate write-ins for deductions | (116,792) | 47,807 |
| 28. Totals (Lines 20 to 27) | 59,413,334 | 31,325,138 |
| 29. Net gain from operations before dividends to policyholders, refunds to members and federal income taxes (Line 9 minus Line 28) | (19,180,476) | 343,168 |
| 30. Dividends to policyholders and refunds to members | 0 | 0 |
| 31. Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30) | (19,180,476) | 343,168 |
| 32. Federal and foreign income taxes incurred (excluding tax on capital gains) | (2,842,416) | (681,187) |
| 33. Net gain from operations after dividends to policyholders, refunds to members and federal income taxes and before realized capital gains or (losses) (Line 31 minus Line 32) | (16,338,060) | 1,024,355 |
| 34. Net realized capital gains (losses) (excluding gains (losses) transferred to the IMR) less capital gains tax of \$ | 0 | (3,564) |
| 35. Net income (Line 33 plus Line 34) | (16,338,060) | 1,020,791 |
| CAPITAL AND SURPLUS ACCOUNT | | |
| 36. Capital and surplus, December 31, prior year (Page 3, Line 38, Col. 2) | 34,591,587 | 34,673,016 |
| 37. Net income (Line 35) | (16,338,060) | 1,020,791 |
| 38. Change in net unrealized capital gains (losses) less capital gains tax of \$ | | |
| 39. Change in net unrealized foreign exchange capital gain (loss) | | |
| 40. Change in net deferred income tax | (46,872) | (1,110,373) |
| 41. Change in nonadmitted assets | (992) | 11,150 |
| 42. Change in liability for reinsurance in unauthorized and certified companies | | |
| 43. Change in reserve on account of change in valuation basis, (increase) or decrease | 0 | 0 |
| 44. Change in asset valuation reserve | (1,475) | (2,997) |
| 45. Change in treasury stock (Page 3, Lines 36.1 and 36.2, Col. 2 minus Col. 1) | 0 | 0 |
| 46. Surplus (contributed to) withdrawn from Separate Accounts during period | | |
| 47. Other changes in surplus in Separate Accounts Statement | | |
| 48. Change in surplus notes | | |
| 49. Cumulative effect of changes in accounting principles | | |
| 50. Capital changes: | | |
| 50.1 Paid in | | |
| 50.2 Transferred from surplus (Stock Dividend) | | |
| 50.3 Transferred to surplus | 0 | |
| 51. Surplus adjustment: | | |
| 51.1 Paid in | 15,000,000 | 0 |
| 51.2 Transferred to capital (Stock Dividend) | | |
| 51.3 Transferred from capital | | |
| 51.4 Change in surplus as a result of reinsurance | | |
| 52. Dividends to stockholders | 0 | 0 |
| 53. Aggregate write-ins for gains and losses in surplus | 0 | 0 |
| 54. Net change in capital and surplus for the year (Lines 37 through 53) | (1,387,399) | (81,429) |
| 55. Capital and surplus, December 31, current year (Lines 36 + 54) (Page 3, Line 38) | 33,204,188 | 34,591,587 |
| DETAILS OF WRITE-INS | | |
| 08.301. | | |
| 08.302. | | |
| 08.303. | | |
| 08.398. Summary of remaining write-ins for Line 8.3 from overflow page | 0 | 0 |
| 08.399. Totals (Lines 08.301 thru 08.303 plus 08.398)(Line 8.3 above) | 0 | 0 |
| 2701. Other Expense | (116,792) | 47,807 |
| 2702. | | |
| 2703. | | |
| 2798. Summary of remaining write-ins for Line 27 from overflow page | 0 | 0 |
| 2799. Totals (Lines 2701 thru 2703 plus 2798)(Line 27 above) | (116,792) | 47,807 |
| 5301. | | |
| 5302. | | |
| 5303. | | |
| 5398. Summary of remaining write-ins for Line 53 from overflow page | 0 | 0 |
| 5399. Totals (Lines 5301 thru 5303 plus 5398)(Line 53 above) | 0 | 0 |

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MedMutual Life Insurance Company
CASH FLOW

| | 1 Current Year | 2 Prior Year |
|---|-------------------|-----------------|
| Cash from Operations | | |
| 1. Premiums collected net of reinsurance | 40,463,650 | 27,172,065 |
| 2. Net investment income | 474,348 | 577,124 |
| 3. Miscellaneous income | 0 | 0 |
| 4. Total (Lines 1 through 3) | 40,937,998 | 27,749,189 |
| 5. Benefit and loss related payments | 37,492,279 | 22,624,731 |
| 6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts | 0 | 0 |
| 7. Commissions, expenses paid and aggregate write-ins for deductions | 7,886,956 | 6,419,064 |
| 8. Dividends paid to policyholders | 0 | 0 |
| 9. Federal and foreign income taxes paid (recovered) net of \$ tax on capital gains (losses) | 0 | 0 |
| 10. Total (Lines 5 through 9) | 45,379,235 | 29,043,795 |
| 11. Net cash from operations (Line 4 minus Line 10) | (4,441,237) | (1,294,606) |
| Cash from Investments | | |
| 12. Proceeds from investments sold, matured or repaid: | | |
| 12.1 Bonds | 8,025,000 | 11,800,000 |
| 12.2 Stocks | 0 | 0 |
| 12.3 Mortgage loans | 0 | 0 |
| 12.4 Real estate | 0 | 0 |
| 12.5 Other invested assets | 0 | 0 |
| 12.6 Net gains or (losses) on cash, cash equivalents and short-term investments | 0 | 0 |
| 12.7 Miscellaneous proceeds | 0 | 0 |
| 12.8 Total investment proceeds (Lines 12.1 to 12.7) | 8,025,000 | 11,800,000 |
| 13. Cost of investments acquired (long-term only): | | |
| 13.1 Bonds | 7,103,516 | 12,133,880 |
| 13.2 Stocks | 0 | 0 |
| 13.3 Mortgage loans | 0 | 0 |
| 13.4 Real estate | 0 | 0 |
| 13.5 Other invested assets | 0 | 0 |
| 13.6 Miscellaneous applications | 0 | 0 |
| 13.7 Total investments acquired (Lines 13.1 to 13.6) | 7,103,516 | 12,133,880 |
| 14. Net increase (decrease) in contract loans and premium notes | 0 | 0 |
| 15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14) | 921,484 | (333,880) |
| Cash from Financing and Miscellaneous Sources | | |
| 16. Cash provided (applied): | | |
| 16.1 Surplus notes, capital notes | 0 | 0 |
| 16.2 Capital and paid in surplus, less treasury stock | 15,000,000 | 0 |
| 16.3 Borrowed funds | 0 | 0 |
| 16.4 Net deposits on deposit-type contracts and other insurance liabilities | 0 | 0 |
| 16.5 Dividends to stockholders | 0 | 0 |
| 16.6 Other cash provided (applied) | 1,498,787 | (3,462,388) |
| 17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6) | 16,498,787 | (3,462,388) |
| RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS | | |
| 18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) | 12,979,034 | (5,090,874) |
| 19. Cash, cash equivalents and short-term investments: | | |
| 19.1 Beginning of year | 8,452,966 | 13,543,840 |
| 19.2 End of year (Line 18 plus Line 19.1) | 21,432,000 | 8,452,966 |

Note: Supplemental disclosures of cash flow information for non-cash transactions:

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| | |
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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MedMutual Life Insurance Company

ANALYSIS OF OPERATIONS BY LINES OF BUSINESS - SUMMARY

| | 1 Total | 2 Individual Life | 3 Group Life | 4 Individual Annuities | 5 Group Annuities | 6 Accident and Health | 7 Fraternal | 8 Other Lines of Business | 9 YRT Mortality Risk Only |
|--|--------------|----------------------|-----------------|---------------------------|----------------------|--------------------------|----------------|---------------------------------|---------------------------------|
| 1. Premiums and annuity considerations for life and accident and health contracts | 39,885,342 | 219,865 | 32,518,346 | | | 7,147,131 | | | 0 |
| 2. Considerations for supplementary contracts with life contingencies | 0 | XXX | XXX | | | XXX | XXX | | XXX |
| 3. Net investment income | 339,363 | 1,871 | 276,681 | | | 60,811 | | | 0 |
| 4. Amortization of Interest Maintenance Reserve (IMR) | 8,153 | .45 | 6,647 | | | 1,461 | | | 0 |
| 5. Separate Accounts net gain from operations excluding unrealized gains or losses | 0 | 0 | 0 | | | 0 | XXX | | 0 |
| 6. Commissions and expense allowances on reinsurance ceded | 0 | 0 | 0 | | | 0 | XXX | 0 | 0 |
| 7. Reserve adjustments on reinsurance ceded | 0 | 0 | 0 | | | 0 | XXX | | 0 |
| 8. Miscellaneous Income: | | | | | | | | | |
| 8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts | 0 | 0 | 0 | | | 0 | XXX | | 0 |
| 8.2 Charges and fees for deposit-type contracts | 0 | 0 | 0 | | | 0 | XXX | | 0 |
| 8.3 Aggregate write-ins for miscellaneous income | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 9. Totals (Lines 1 to 8.3) | 40,232,858 | 221,781 | 32,801,674 | 0 | 0 | 7,209,403 | 0 | 0 | 0 |
| 10. Death benefits | 39,026,025 | 393,000 | 38,633,025 | | | XXX | XXX | | 0 |
| 11. Matured endowments (excluding guaranteed annual pure endowments) | 0 | 0 | 0 | | | XXX | XXX | | 0 |
| 12. Annuity benefits | 0 | XXX | XXX | | | XXX | XXX | | XXX |
| 13. Disability benefits and benefits under accident and health contracts | 5,599,671 | 0 | 0 | | | 5,599,671 | XXX | | 0 |
| 14. Coupons, guaranteed annual pure endowments and similar benefits | 0 | 0 | 0 | | | 0 | XXX | | 0 |
| 15. Surrender benefits and withdrawals for life contracts | 0 | 0 | 0 | | | XXX | XXX | | 0 |
| 16. Group conversions | 0 | 0 | 0 | | | 0 | XXX | | 0 |
| 17. Interest and adjustments on contract or deposit-type contract funds | 0 | 0 | 0 | | | 0 | XXX | | 0 |
| 18. Payments on supplementary contracts with life contingencies | 0 | 0 | 0 | | | XXX | XXX | | 0 |
| 19. Increase in aggregate reserves for life and accident and health contracts | 6,560,180 | 27,500 | 5,386,000 | | | 1,146,680 | XXX | | 0 |
| 20. Totals (Lines 10 to 19) | 51,185,876 | 420,500 | 44,019,025 | 0 | 0 | 6,746,351 | XXX | 0 | 0 |
| 21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only) | 3,079,054 | 15,364 | 2,427,136 | | | 636,553 | 0 | 0 | XXX |
| 22. Commissions and expense allowances on reinsurance assumed | 0 | 0 | 0 | | | 0 | XXX | 0 | 0 |
| 23. General insurance expenses and fraternal expenses | 4,308,553 | 44,053 | 3,304,130 | | | 960,370 | | | 0 |
| 24. Insurance taxes, licenses and fees, excluding federal income taxes | 956,641 | 5,175 | 722,567 | | | 228,899 | | | 0 |
| 25. Increase in loading on deferred and uncollected premiums | 0 | 0 | 0 | | | 0 | XXX | | 0 |
| 26. Net transfers to or (from) Separate Accounts net of reinsurance | 0 | 0 | 0 | | | 0 | XXX | | 0 |
| 27. Aggregate write-ins for deductions | (116,792) | 0 | (121,997) | 0 | 0 | 5,206 | 0 | 0 | 0 |
| 28. Totals (Lines 20 to 27) | 59,413,334 | 485,092 | 50,350,862 | 0 | 0 | 8,577,379 | 0 | 0 | 0 |
| 29. Net gain from operations before dividends to policyholders, refunds to members and federal income taxes (Line 9 minus Line 28) | (19,180,476) | (263,312) | (17,549,187) | 0 | 0 | (1,367,977) | 0 | 0 | 0 |
| 30. Dividends to policyholders and refunds to members | 0 | 0 | 0 | | | 0 | XXX | | 0 |
| 31. Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30) | (19,180,476) | (263,312) | (17,549,187) | 0 | 0 | (1,367,977) | 0 | 0 | 0 |
| 32. Federal income taxes incurred (excluding tax on capital gains) | (2,842,416) | (39,021) | (2,600,670) | | | (202,725) | | | 0 |
| 33. Net gain from operations after dividends to policyholders, refunds to members and federal income taxes and before realized capital gains or (losses) (Line 31 minus Line 32) | (16,338,060) | (224,291) | (14,948,517) | 0 | 0 | (1,165,252) | 0 | 0 | 0 |
| 34. Policies/certificates in force end of year | 0 | 0 | 0 | | | 0 | XXX | | 0 |
| DETAILS OF WRITE-INS | | | | | | | | | |
| 08.301. | | | | | | | | | |
| 08.302. | | | | | | | | | |
| 08.303. | | | | | | | | | |
| 08.398. Summary of remaining write-ins for Line 8.3 from overflow page | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 08.399. Totals (Lines 08.301 thru 08.303 plus 08.398) (Line 8.3 above) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 2701. Other Expense | (116,792) | | (121,997) | | | 5,206 | | | |
| 2702. | | | | | | | | | |
| 2703. | | | | | | | | | |
| 2798. Summary of remaining write-ins for Line 27 from overflow page | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 2799. Totals (Lines 2701 thru 2703 plus 2798) (Line 27 above) | (116,792) | 0 | (121,997) | 0 | 0 | 5,206 | 0 | 0 | 0 |

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MedMutual Life Insurance Company
ANALYSIS OF OPERATIONS BY LINES OF BUSINESS - INDIVIDUAL LIFE INSURANCE (b)

| | 1 Total | 2 Industrial Life | 3 Whole Life | 4 Term Life | 5 Indexed Life | 6 Universal Life | 7 Universal Life With Secondary Guarantees | 8 Variable Life | 9 Variable Universal Life | 10 Credit Life (c) | 11 Other Individual Life | 12 YRT Mortality Risk Only |
|--|------------|----------------------|-----------------|----------------|-------------------|---------------------|---|--------------------|---------------------------------|--------------------------|--------------------------------|----------------------------------|
| 1. Premiums for life contracts ^(a) | 219,865 | | | 219,865 | | | | | | | | |
| 2. Considerations for supplementary contracts with life contingencies | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX |
| 3. Net investment income | 1,871 | | | | 1,871 | | | | | | | |
| 4. Amortization of Interest Maintenance Reserve (IMR) | 45 | | | | 45 | | | | | | | |
| 5. Separate Accounts net gain from operations excluding unrealized gains or losses | 0 | | | | | | | | | | | |
| 6. Commissions and expense allowances on reinsurance ceded | 0 | 0 | | | | | | | | | | |
| 7. Reserve adjustments on reinsurance ceded | 0 | | | | | | | | | | | |
| 8. Miscellaneous Income: | | | | | | | | | | | | |
| 8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts | 0 | | | | | | | | | | | |
| 8.2 Charges and fees for deposit-type contracts | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 8.3 Aggregate write-ins for miscellaneous income | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 9. Totals (Lines 1 to 8.3) | 221,781 | 0 | 0 | 221,781 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 10. Death benefits | 393,000 | | | 393,000 | | | | | | | | |
| 11. Matured endowments (excluding guaranteed annual pure endowments) | 0 | | | | | | | | | | | |
| 12. Annuity benefits | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX |
| 13. Disability benefits and benefits under accident and health contracts | 0 | | | | | | | | | | | |
| 14. Coupons, guaranteed annual pure endowments and similar benefits | 0 | | | | | | | | | | | |
| 15. Surrender benefits and withdrawals for life contracts | 0 | | | | | | | | | | | |
| 16. Group conversions | 0 | | | | | | | | | | | |
| 17. Interest and adjustments on contract or deposit-type contract funds | 0 | | | | | | | | | | | |
| 18. Payments on supplementary contracts with life contingencies | 0 | | | | | | | | | | | |
| 19. Increase in aggregate reserves for life and accident and health contracts | 27,500 | | | 27,500 | | | | | | | | |
| 20. Totals (Lines 10 to 19) | 420,500 | 0 | 0 | 420,500 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only) | 15,364 | 0 | | 15,364 | | | | | | | | XXX |
| 22. Commissions and expense allowances on reinsurance assumed | 0 | 0 | | | | | | | | | | |
| 23. General insurance expenses | 44,053 | | | 44,053 | | | | | | | | |
| 24. Insurance taxes, licenses and fees, excluding federal income taxes | 5,175 | | | 5,175 | | | | | | | | |
| 25. Increase in loading on deferred and uncollected premiums | 0 | | | | | | | | | | | |
| 26. Net transfers to or (from) Separate Accounts net of reinsurance | 0 | | | | | | | | | | | |
| 27. Aggregate write-ins for deductions | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 28. Totals (Lines 20 to 27) | 485,092 | 0 | 0 | 485,092 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 29. Net gain from operations before dividends to policyholders, refunds to members and federal income taxes (Line 9 minus Line 28) | (263,312) | 0 | 0 | (263,312) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 30. Dividends to policyholders and refunds to members | 0 | | | | | | | | | | | |
| 31. Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30) | (263,312) | 0 | 0 | (263,312) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 32. Federal income taxes incurred (excluding tax on capital gains) | (39,021) | | | (39,021) | | | | | | | | |
| 33. Net gain from operations after dividends to policyholders, refunds to members and federal income taxes and before realized capital gains or (losses) (Line 31 minus Line 32) | (224,291) | 0 | 0 | (224,291) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 34. Policies/certificates in force end of year | 0 | | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | | | |
| 08.301. | | | | | | | | | | | | |
| 08.302. | | | | | | | | | | | | |
| 08.303. | | | | | | | | | | | | |
| 08.398. Summary of remaining write-ins for Line 8.3 from overflow page | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 08.399. Totals (Lines 08.301 thru 08.303 plus 08.398) (Line 8.3 above) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 2701. | | | | | | | | | | | | |
| 2702. | | | | | | | | | | | | |
| 2703. | | | | | | | | | | | | |
| 2798. Summary of remaining write-ins for Line 27 from overflow page | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 2799. Totals (Lines 2701 thru 2703 plus 2798) (Line 27 above) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |

(a) Include premium amounts for preneed plans included in Line 1

(b) Indicate if blocks of business in run-off that comprise less than 5% of premiums and less than 5% of reserve and loans liability are aggregated with material blocks of business and which columns are affected

(c) Individual and Group Credit Life are combined and included on page. (Indicate whether included with Individual or Group.)

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MedMutual Life Insurance Company
ANALYSIS OF OPERATIONS BY LINES OF BUSINESS - GROUP LIFE INSURANCE (c)

| | 1 Total | 2 Whole Life | 3 Term Life | 4 Universal Life | 5 Variable Life | 6 Variable Universal Life | 7 Credit Life (d) | 8 Other Group Life (a) | 9 YRT Mortality Risk Only |
|--|--------------|-----------------|----------------|---------------------|--------------------|------------------------------|----------------------|---------------------------|------------------------------|
| 1. Premiums for life contracts ^(b) | 32,518,346 | | 32,518,346 | | | | | | |
| 2. Considerations for supplementary contracts with life contingencies | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX |
| 3. Net investment income | 276,681 | | 276,681 | | | | | | |
| 4. Amortization of Interest Maintenance Reserve (IMR) | 6,647 | | 6,647 | | | | | | |
| 5. Separate Accounts net gain from operations excluding unrealized gains or losses | 0 | | | | | | | | |
| 6. Commissions and expense allowances on reinsurance ceded | 0 | | | | | | | | |
| 7. Reserve adjustments on reinsurance ceded | 0 | | | | | | | | |
| 8. Miscellaneous Income: | | | | | | | | | |
| 8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts | 0 | | | | | | | | |
| 8.2 Charges and fees for deposit-type contracts | 0 | | | | | | | 0 | 0 |
| 8.3 Aggregate write-ins for miscellaneous income | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 9. Totals (Lines 1 to 8.3) | 32,801,674 | 0 | 32,801,674 | 0 | 0 | 0 | 0 | 0 | 0 |
| 10. Death benefits | 38,633,025 | | 38,633,025 | | | | | | |
| 11. Matured endowments (excluding guaranteed annual pure endowments) | 0 | | | | | | | | |
| 12. Annuity benefits | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX |
| 13. Disability benefits and benefits under accident and health contracts | 0 | | | | | | | | |
| 14. Coupons, guaranteed annual pure endowments and similar benefits | 0 | | | | | | | | |
| 15. Surrender benefits and withdrawals for life contracts | 0 | | | | | | | | |
| 16. Group conversions | 0 | | | | | | | | |
| 17. Interest and adjustments on contract or deposit-type contract funds | 0 | | | | | | | | |
| 18. Payments on supplementary contracts with life contingencies | 0 | | | | | | | | |
| 19. Increase in aggregate reserves for life and accident and health contracts | 5,386,000 | | 5,386,000 | | | | | | |
| 20. Totals (Lines 10 to 19) | 44,019,025 | 0 | 44,019,025 | 0 | 0 | 0 | 0 | 0 | 0 |
| 21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only) | 2,427,136 | | 2,427,136 | | | | | | XXX |
| 22. Commissions and expense allowances on reinsurance assumed | 0 | | | | | | | | |
| 23. General insurance expenses | 3,304,130 | | 3,304,130 | | | | | | |
| 24. Insurance taxes, licenses and fees, excluding federal income taxes | 722,567 | | 722,567 | | | | | | |
| 25. Increase in loading on deferred and uncollected premiums | 0 | | | | | | | | |
| 26. Net transfers to or (from) Separate Accounts net of reinsurance | 0 | | | | | | | | |
| 27. Aggregate write-ins for deductions | (121,997) | 0 | (121,997) | 0 | 0 | 0 | 0 | 0 | 0 |
| 28. Totals (Lines 20 to 27) | 50,350,862 | 0 | 50,350,862 | 0 | 0 | 0 | 0 | 0 | 0 |
| 29. Net gain from operations before dividends to policyholders, refunds to members and federal income taxes (Line 9 minus Line 28) | (17,549,187) | 0 | (17,549,187) | 0 | 0 | 0 | 0 | 0 | 0 |
| 30. Dividends to policyholders and refunds to members | 0 | | | | | | | | |
| 31. Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30) | (17,549,187) | 0 | (17,549,187) | 0 | 0 | 0 | 0 | 0 | 0 |
| 32. Federal income taxes incurred (excluding tax on capital gains) | (2,600,670) | | (2,600,670) | | | | | | |
| 33. Net gain from operations after dividends to policyholders, refunds to members and federal income taxes and before realized capital gains or (losses) (Line 31 minus Line 32) | (14,948,517) | 0 | (14,948,517) | 0 | 0 | 0 | 0 | 0 | 0 |
| 34. Policies/certificates in force end of year | 0 | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | |
| 08.301. | | | | | | | | | |
| 08.302. | | | | | | | | | |
| 08.303. | | | | | | | | | |
| 08.398. Summary of remaining write-ins for Line 8.3 from overflow page | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 08.399. Totals (Lines 08.301 thru 08.303 plus 08.398) (Line 8.3 above) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 2701. Other Expense | (121,997) | | (121,997) | | | | | | |
| 2702. | | | | | | | | | |
| 2703. | | | | | | | | | |
| 2798. Summary of remaining write-ins for Line 27 from overflow page | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 2799. Totals (Lines 2701 thru 2703 plus 2798) (Line 27 above) | (121,997) | 0 | (121,997) | 0 | 0 | 0 | 0 | 0 | 0 |

(a) Includes the following amounts for FEGLI/SGLI: Line 1 , Line 10 , Line 16 , Line 23 , Line 24

(b) Include premium amounts for preneed plans included in Line 1

(c) Indicate if blocks of business in run-off that comprise less than 5% of premiums and less than 5% of reserve and loans liability are aggregated with material blocks of business and which columns are affected.

(d) Individual and Group Credit Life are combined and included on page. (Indicate whether included with Individual or Group.)

Analysis of Operations by Lines of Business - Individual Annuities
N O N E

Analysis of Operations by Lines of Business - Group Annuities
N O N E

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MedMutual Life Insurance Company
ANALYSIS OF OPERATIONS BY LINES OF BUSINESS - ACCIDENT AND HEALTH (a)

| | 1 Total | Comprehensive | | 4 Medicare Supplement | 5 Vision Only | 6 Dental Only | 7 Federal Employees Health Benefits Plan | 8 Title XVIII Medicare | 9 Title XIX Medicaid | 10 Credit A&H | 11 Disability Income | 12 Long-Term Care | 13 Other Health |
|--|-------------|-----------------|------------|-----------------------------|------------------|------------------|---|------------------------------|----------------------------|------------------|----------------------------|-------------------------|--------------------|
| | | 2 Individual | 3 Group | | | | | | | | | | |
| 1. Premiums for accident and health contracts | 7,147,131 | | | 590,126 | | | | | | | 6,113,672 | | 443,333 |
| 2. Considerations for supplementary contracts with life contingencies | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX |
| 3. Net investment income | 60,811 | | | 5,021 | | | | | | | 52,018 | | 3,772 |
| 4. Amortization of Interest Maintenance Reserve (IMR) | 1,461 | | | 121 | | | | | | | 1,250 | | .91 |
| 5. Separate Accounts net gain from operations excluding unrealized gains or losses | 0 | | | | | | | | | | | | |
| 6. Commissions and expense allowances on reinsurance ceded | 0 | | | | | | | | | 0 | | | |
| 7. Reserve adjustments on reinsurance ceded | 0 | | | | | | | | | 0 | | | |
| 8. Miscellaneous Income: | | | | | | | | | | | | | |
| 8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts | 0 | | | | | | | | | | | | |
| 8.2 Charges and fees for deposit-type contracts | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX |
| 8.3 Aggregate write-ins for miscellaneous income | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 9. Totals (Lines 1 to 8.3) | 7,209,403 | 0 | 0 | 595,268 | 0 | 0 | 0 | 0 | 0 | 0 | 6,166,939 | 0 | 447,196 |
| 10. Death benefits | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX |
| 11. Matured endowments (excluding guaranteed annual pure endowments) | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX |
| 12. Annuity benefits | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX |
| 13. Disability benefits and benefits under accident and health contracts | 5,599,671 | (53,976) | | 404,878 | | | | | | | 5,180,997 | | 67,773 |
| 14. Coupons, guarantee annual pure endowments and similar benefits | 0 | | | | | | | | | | | | |
| 15. Surrender benefits and withdrawals for life contracts | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX |
| 16. Group conversions | 0 | | | | | | | | | | | | |
| 17. Interest and adjustments on contract or deposit-type contract funds | 0 | | | | | | | | | | | | |
| 18. Payments on supplementary contracts with life contingencies | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX |
| 19. Increase in aggregate reserves for life and accident and health contracts | 1,146,680 | | | | | | | | | | 1,155,184 | | (8,504) |
| 20. Totals (Lines 10 to 19) | 6,746,351 | (53,976) | 0 | 404,878 | 0 | 0 | 0 | 0 | 0 | 0 | 6,336,181 | 0 | 59,269 |
| 21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only) | 636,553 | | | 31 | | | | | | | 561,072 | | 75,450 |
| 22. Commissions and expense allowances on reinsurance assumed | 0 | | | | | | | | | | 0 | | |
| 23. General insurance expenses | 960,370 | | | 38,119 | | | | | | | 834,143 | | 88,108 |
| 24. Insurance taxes, licenses and fees, excluding federal income taxes | 228,899 | | | 72,488 | | | | | | | 146,757 | | 9,654 |
| 25. Increase in loading on deferred and uncollected premiums | 0 | | | | | | | | | | | | |
| 26. Net transfers to or (from) Separate Accounts net of reinsurance | 0 | | | | | | | | | | | | |
| 27. Aggregate write-ins for deductions | 5,206 | 0 | 0 | 5,206 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 28. Totals (Lines 20 to 27) | 8,577,379 | (53,976) | 0 | 520,721 | 0 | 0 | 0 | 0 | 0 | 0 | 7,878,153 | 0 | 232,481 |
| 29. Net gain from operations before dividends to policyholders, and refunds to members and federal income taxes (Line 9 minus Line 28) | (1,367,977) | 53,976 | 0 | 74,547 | 0 | 0 | 0 | 0 | 0 | 0 | (1,711,214) | 0 | 214,714 |
| 30. Dividends to policyholders and refunds to members | 0 | | | | | | | | | | | | |
| 31. Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30) | (1,367,977) | 53,976 | 0 | 74,547 | 0 | 0 | 0 | 0 | 0 | 0 | (1,711,214) | 0 | 214,714 |
| 32. Federal income taxes incurred (excluding tax on capital gains) | (202,725) | 7,999 | | 11,047 | | | | | | | (253,590) | | 31,819 |
| 33. Net gain from operations after dividends to policyholders, refunds to members and federal income taxes and before realized capital gains or (losses) (Line 31 minus Line 32) | (1,165,252) | 45,977 | 0 | 63,499 | 0 | 0 | 0 | 0 | 0 | 0 | (1,457,624) | 0 | 182,895 |
| 34. Policies/certificates in force end of year | 0 | | | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | | | | |
| 08.301. | | | | | | | | | | | | | |
| 08.302. | | | | | | | | | | | | | |
| 08.303. | | | | | | | | | | | | | |
| 08.398. Summary of remaining write-ins for Line 8.3 from overflow page | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 08.399. Totals (Lines 08.301 thru 08.303 plus 08.398) (Line 8.3 above) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 2701. Other Expense | 5,206 | | | 5,206 | | | | | | | | | |
| 2702. | | | | | | | | | | | | | |
| 2703. | | | | | | | | | | | | | |
| 2798. Summary of remaining write-ins for Line 27 from overflow page | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 2799. Totals (Lines 2701 thru 2703 plus 2798) (Line 27 above) | 5,206 | 0 | 0 | 5,206 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |

(a) Indicate if blocks of business in run-off that comprise less than 5% of premiums and less than 5% of reserve and loans liability are aggregated with material blocks of business and which columns are affected.

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MedMutual Life Insurance Company
ANALYSIS OF INCREASE IN RESERVES DURING THE YEAR - INDIVIDUAL LIFE INSURANCE ^(a)

| | 1 Total | 2 Industrial Life | 3 Whole Life | 4 Term Life | 5 Indexed Life | 6 Universal Life | 7 Universal Life With Secondary Guarantees | 8 Variable Life | 9 Variable Universal Life | 10 Credit Life ^(b) (N/A Fraternal) | 11 Other Individual Life | 12 YRT Mortality Risk Only |
|--|------------|----------------------|-----------------|----------------|-------------------|---------------------|---|--------------------|---------------------------------|---|--------------------------------|-------------------------------------|
| Involving Life or Disability Contingencies (Reserves) (Net of Reinsurance Ceded) | | | | | | | | | | | | |
| 1. Reserve December 31 of prior year | 173,000 | 0 | 0 | 173,000 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 2. Tabular net premiums or considerations | 153,906 | | | 153,906 | | | | | | | | |
| 3. Present value of disability claims incurred | 0 | | | | | | | | | | | |
| 4. Tabular interest | 10,337 | | | 10,337 | | | | | | | | |
| 5. Tabular less actual reserve released | 0 | | | | | | | | | | | |
| 6. Increase in reserve on account of change in valuation basis | 0 | | | | | | | | | | | |
| 6.1 Change in excess of VM-20 deterministic/stochastic reserve over net premium reserve | 0 | XXX | | | | | | | | XXX | | |
| 7. Other increases (net) | 41,383 | | | 41,383 | | | | | | | | |
| 8. Totals (Lines 1 to 7) | 378,626 | 0 | 0 | 378,626 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 9. Tabular cost | 164,243 | | | 164,243 | | | | | | | | |
| 10. Reserves released by death | 8,985 | | | 8,985 | | | | | | | | |
| 11. Reserves released by other terminations (net) | 4,898 | | | 4,898 | | | | | | | | |
| 12. Annuity, supplementary contract and disability payments involving life contingencies | 0 | | | | | | | | | | | |
| 13. Net transfers to or (from) Separate Accounts | 0 | | | | | | | | | | | |
| 14. Total Deductions (Lines 9 to 13) | 178,126 | 0 | 0 | 178,126 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 15. Reserve December 31 of current year | 200,500 | 0 | 0 | 200,500 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Cash Surrender Value and Policy Loans | | | | | | | | | | | | |
| 16. CSV Ending balance December 31, current year | 0 | | | | | | | | | | | |
| 17. Amount Available for Policy Loans Based upon Line 16 CSV | 0 | | | | | | | | | | | |

(a) Indicate if blocks of business in run-off that comprise less than 5% of premiums and less than 5% of reserve and loans liability are aggregated with material blocks of business and which columns are affected.

(b) Individual and Group Credit Life are combined and included on _____ page. (Indicate whether included with Individual or Group.)

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MedMutual Life Insurance Company
ANALYSIS OF INCREASE IN RESERVES DURING THE YEAR - GROUP LIFE INSURANCE ^(a)
(N/A Fraternal)

| | 1 Total | 2 Whole Life | 3 Term Life | 4 Variable Life | 5 Universal Life | 6 Variable Universal Life | 7 Credit Life ^(b) | 8 Other Group Life | 9 YRT Mortality Risk Only |
|--|------------|-----------------|----------------|--------------------|---------------------|------------------------------------|------------------------------------|-----------------------------|------------------------------------|
| Involving Life or Disability Contingencies (Reserves) (Net of Reinsurance Ceded) | | | | | | | | | |
| 1. Reserve December 31 of prior year | 806,000 | 0 | 806,000 | 0 | 0 | 0 | 0 | 0 | 0 |
| 2. Tabular net premiums or considerations | 1,273,329 | | 1,273,329 | | | | | | |
| 3. Present value of disability claims incurred | 132,000 | | 132,000 | | | | | | |
| 4. Tabular interest | 24,155 | | 24,155 | | | | | | |
| 5. Tabular less actual reserve released | 0 | | | | | | | | |
| 6. Increase in reserve on account of change in valuation basis | 0 | | | | | | | | |
| 7. Other increases (net) | 5,383,000 | | 5,383,000 | | | | | | |
| 8. Totals (Lines 1 to 7) | 7,618,484 | 0 | 7,618,484 | 0 | 0 | 0 | 0 | 0 | 0 |
| 9. Tabular cost | 1,297,484 | | 1,297,484 | | | | | | |
| 10. Reserves released by death | 15,000 | | 15,000 | | | | | | |
| 11. Reserves released by other terminations (net) | 114,000 | | 114,000 | | | | | | |
| 12. Annuity, supplementary contract and disability payments involving life contingencies | 0 | | | | | | | | |
| 13. Net transfers to or (from) Separate Accounts | 0 | | | | | | | | |
| 14. Total Deductions (Lines 9 to 13) | 1,426,484 | 0 | 1,426,484 | 0 | 0 | 0 | 0 | 0 | 0 |
| 15. Reserve December 31 of current year | 6,192,000 | 0 | 6,192,000 | 0 | 0 | 0 | 0 | 0 | 0 |
| Cash Surrender Value and Policy Loans | | | | | | | | | |
| 16. CSV Ending balance December 31, current year | 0 | | | | | | | | |
| 17. Amount Available for Policy Loans Based upon Line 16 CSV | 0 | | | | | | | | |

(a) Indicate if blocks of business in run-off that comprise less than 5% of premiums and less than 5% of reserve and loans liability are aggregated with material blocks of business and which columns are affected.

(b) Individual and Group Credit Life are combined and included on page. (Indicate whether included with Individual or Group.)

Analysis of Increase in Reserves During the Year - Individual Annuities

N O N E

Analysis of Increase in Reserves During the Year - Group Annuities

N O N E

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MedMutual Life Insurance Company
EXHIBIT OF NET INVESTMENT INCOME

| | 1 Collected During Year | 2 Earned During Year |
|---|----------------------------|-------------------------|
| 1. U.S. Government bonds | (a) 196,530 | 175,663 |
| 1.1 Bonds exempt from U.S. tax | (a) | |
| 1.2 Other bonds (unaffiliated) | (a) 198,686 | 181,617 |
| 1.3 Bonds of affiliates | (a) | |
| 2.1 Preferred stocks (unaffiliated) | (b) | |
| 2.11 Preferred stocks of affiliates | (b) | |
| 2.2 Common stocks (unaffiliated) | | |
| 2.21 Common stocks of affiliates | | |
| 3. Mortgage loans | (c) | |
| 4. Real estate | (d) | |
| 5. Contract loans | | |
| 6. Cash, cash equivalents and short-term investments | (e) 453 | 467 |
| 7. Derivative instruments | (f) | |
| 8. Other invested assets | | |
| 9. Aggregate write-ins for investment income | 0 | 0 |
| 10. Total gross investment income | 395,669 | 357,747 |
| 11. Investment expenses | (g) 18,384 | |
| 12. Investment taxes, licenses and fees, excluding federal income taxes | (g) 0 | 0 |
| 13. Interest expense | (h) | |
| 14. Depreciation on real estate and other invested assets | (i) | 0 |
| 15. Aggregate write-ins for deductions from investment income | | |
| 16. Total deductions (Lines 11 through 15) | | 18,384 |
| 17. Net investment income (Line 10 minus Line 16) | | 339,363 |
| DETAILS OF WRITE-INS | | |
| 0901. | | |
| 0902. | | |
| 0903. | | |
| 0998. Summary of remaining write-ins for Line 9 from overflow page | 0 | 0 |
| 0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above) | 0 | 0 |
| 1501. | | |
| 1502. | | |
| 1503. | | |
| 1598. Summary of remaining write-ins for Line 15 from overflow page | 0 | 0 |
| 1599. Totals (Lines 1501 thru 1503 plus 1598) (Line 15, above) | 0 | 0 |

- (a) Includes \$ 12,822 accrual of discount less \$ 111,117 amortization of premium and less \$ 20,152 paid for accrued interest on purchases.
- (b) Includes \$ 0 accrual of discount less \$ 0 amortization of premium and less \$ 0 paid for accrued dividends on purchases.
- (c) Includes \$ 0 accrual of discount less \$ 0 amortization of premium and less \$ paid for accrued interest on purchases.
- (d) Includes \$ for company's occupancy of its own buildings; and excludes \$ interest on encumbrances.
- (e) Includes \$ accrual of discount less \$ amortization of premium and less \$ paid for accrued interest on purchases.
- (f) Includes \$ accrual of discount less \$ amortization of premium.
- (g) Includes \$ investment expenses and \$ investment taxes, licenses and fees, excluding federal income taxes, attributable to segregated and Separate Accounts.
- (h) Includes \$ interest on surplus notes and \$ interest on capital notes.
- (i) Includes \$ 0 depreciation on real estate and \$ depreciation on other invested assets.

EXHIBIT OF CAPITAL GAINS (LOSSES)

| | 1 Realized Gain (Loss) On Sales or Maturity | 2 Other Realized Adjustments | 3 Total Realized Capital Gain (Loss) (Columns 1 + 2) | 4 Change in Unrealized Capital Gain (Loss) | 5 Change in Unrealized Foreign Exchange Capital Gain (Loss) |
|--|---|------------------------------------|---|---|--|
| 1. U.S. Government bonds | | | | | |
| 1.1 Bonds exempt from U.S. tax | | | | | |
| 1.2 Other bonds (unaffiliated) | | | | | |
| 1.3 Bonds of affiliates | | | | | |
| 2.1 Preferred stocks (unaffiliated) | | | | | |
| 2.11 Preferred stocks of affiliates | | | | | |
| 2.2 Common stocks (unaffiliated) | | | | | |
| 2.21 Common stocks of affiliates | | | | | |
| 3. Mortgage loans | | | | | |
| 4. Real estate | | | | | |
| 5. Contract loans | | | | | |
| 6. Cash, cash equivalents and short-term investments | | | | | |
| 7. Derivative instruments | | | | | |
| 8. Other invested assets | | | | | |
| 9. Aggregate write-ins for capital gains (losses) | | | | | |
| 10. Total capital gains (losses) | | | | | |
| DETAILS OF WRITE-INS | | | | | |
| 0901. | | | | | |
| 0902. | | | | | |
| 0903. | | | | | |
| 0998. Summary of remaining write-ins for Line 9 from overflow page | | | | | |
| 0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above) | | | | | |

NONE

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MedMutual Life Insurance Company

EXHIBIT - 1 PART 1 - PREMIUMS AND ANNUITY CONSIDERATIONS FOR LIFE AND ACCIDENT AND HEALTH CONTRACTS

| | 1 Total | 2 Industrial Life | Ordinary | | 5 Credit Life (Group and Individual) | Insurance Group | | Accident and Health | | | 11 Aggregate of All Other Lines of Business | 12 Fraternal (Fraternal Benefit Societies Only) |
|---|-------------|----------------------|---------------------|---------------------------|---|---------------------|----------------|---------------------|------------------------------------|-------------|--|--|
| | | | 3 Life Insurance | 4 Individual Annuities | | 6 Life Insurance | 7 Annuities | 8 Group | 9 Credit (Group and Individual) | 10 Other | | |
| FIRST YEAR (other than single) | | | | | | | | | | | | |
| 1. Uncollected | 0 | | | | | | | | | | | |
| 2. Deferred and accrued | 0 | | | | | | | | | | | |
| 3. Deferred , accrued and uncollected: | | | | | | | | | | | | |
| 3.1 Direct | 0 | | | | | | | | | | | |
| 3.2 Reinsurance assumed | 0 | | | | | | | | | | | |
| 3.3 Reinsurance ceded | 0 | | | | | | | | | | | |
| 3.4 Net (Line 1 + Line 2) | 0 | | | | | | | | | | | |
| 4. Advance | 0 | | | | | | | | | | | |
| 5. Line 3.4 + Line 4 | 0 | | | | | | | | | | | |
| 6. Collected during year: | | | | | | | | | | | | |
| 6.1 Direct | 10,288,781 | | | | | | | | | | | |
| 6.2 Reinsurance assumed | 0 | | | | | | | | | | | |
| 6.3 Reinsurance ceded | 0 | | | | | | | | | | | |
| 6.4 Net | 10,288,781 | | | | | | | | | | | |
| 7. Line 5 + Line 6.4 | 10,288,781 | | | | | | | | | | | |
| 8. Prior year (uncollected + deferred and accrued - advance) | 0 | | | | | | | | | | | |
| 9. First year premiums and considerations: | | | | | | | | | | | | |
| 9.1 Direct | 10,288,781 | | | | | | | | | | | |
| 9.2 Reinsurance assumed | 0 | | | | | | | | | | | |
| 9.3 Reinsurance ceded | 0 | | | | | | | | | | | |
| 9.4 Net (Line 7 - Line 8) | 10,288,781 | | | | | | | | | | | |
| SINGLE | | | | | | | | | | | | |
| 10. Single premiums and considerations: | | | | | | | | | | | | |
| 10.1 Direct | 0 | | | | | | | | | | | |
| 10.2 Reinsurance assumed | 0 | | | | | | | | | | | |
| 10.3 Reinsurance ceded | 0 | | | | | | | | | | | |
| 10.4 Net | 0 | | | | | | | | | | | |
| RENEWAL | | | | | | | | | | | | |
| 11. Uncollected | 1,920,680 | | | | | | | | | | | |
| 12. Deferred and accrued | (1,532,380) | | | | | | | | | | | |
| 13. Deferred, accrued and uncollected: | | | | | | | | | | | | |
| 13.1 Direct | 1,893,594 | | | | | | | | | | | |
| 13.2 Reinsurance assumed | 0 | | | | | | | | | | | |
| 13.3 Reinsurance ceded | 0 | | | | | | | | | | | |
| 13.4 Net (Line 11 + Line 12) | 1,505,294 | | | | | | | | | | | |
| 14. Advance | 388,301 | | | | | | | | | | | |
| 15. Line 13.4 - Line 14 | 403,989 | | | | | | | | | | | |
| 16. Collected during year: | | | | | | | | | | | | |
| 16.1 Direct | 38,156,327 | | | | | | | | | | | |
| 16.2 Reinsurance assumed | 0 | | | | | | | | | | | |
| 16.3 Reinsurance ceded | 7,981,458 | | | | | | | | | | | |
| 16.4 Net | 30,174,869 | | | | | | | | | | | |
| 17. Line 15 + Line 16.4 | 30,159,180 | | | | | | | | | | | |
| 18. Prior year (uncollected + deferred and accrued - advance) | 562,619 | | | | | | | | | | | |
| 19. Renewal premiums and considerations: | | | | | | | | | | | | |
| 19.1 Direct | 38,524,213 | | | | | | | | | | | |
| 19.2 Reinsurance assumed | 0 | | | | | | | | | | | |
| 19.3 Reinsurance ceded | 8,927,652 | | | | | | | | | | | |
| 19.4 Net (Line 17 - Line 18) | 29,596,561 | | | | | | | | | | | |
| TOTAL | | | | | | | | | | | | |
| 20. Total premiums and annuity considerations: | | | | | | | | | | | | |
| 20.1 Direct | 48,812,994 | | | | | | | | | | | |
| 20.2 Reinsurance assumed | 0 | | | | | | | | | | | |
| 20.3 Reinsurance ceded | 8,927,652 | | | | | | | | | | | |
| 20.4 Net (Lines 9.4 + 10.4 + 19.4) | 39,885,342 | | | | | | | | | | | |

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MedMutual Life Insurance Company

EXHIBIT - 1 PART 2 - POLICYHOLDERS' DIVIDENDS, REFUNDS TO MEMBERS AND COUPONS APPLIED, REINSURANCE COMMISSIONS AND EXPENSE ALLOWANCES AND COMMISSIONS INCURRED (Direct Business Only)

| | 1 Total | 2 Industrial Life | Insurance | | | | | | | | | 11 Aggregate of All Other Lines of Business | 12 Fraternal (Fraternal Benefit Societies Only) | | |
|--|------------|----------------------|---------------------|------------------------------|--|---------------------|----------------|---------------------|---------------------------------------|-------------|--------|--|--|--|--|
| | | | Ordinary | | 5 Credit Life (Group and Individual) | Group | | Accident and Health | | | | | | | |
| | | | 3 Life Insurance | 4 Individual Annuities | | 6 Life Insurance | 7 Annuities | 8 Group | 9 Credit (Group and Individual) | 10 Other | | | | | |
| POLICYHOLDERS' DIVIDENDS, REFUNDS TO MEMBERS AND COUPONS APPLIED (included in Part 1) | | | | | | | | | | | | | | | |
| 21. To pay renewal premiums | 0 | | | | | | | | | | | | | | |
| 22. All other | 0 | | | | | | | | | | | | | | |
| REINSURANCE COMMISSIONS AND EXPENSE ALLOWANCES INCURRED | | | | | | | | | | | | | | | |
| 23. First year (other than single): | | | | | | | | | | | | | | | |
| 23.1 Reinsurance ceded | 0 | | | | | | | | | | | | | | |
| 23.2 Reinsurance assumed | 0 | | | | | | | | | | | | | | |
| 23.3 Net ceded less assumed | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | | |
| 24. Single: | | | | | | | | | | | | | | | |
| 24.1 Reinsurance ceded | 0 | | | | | | | | | | | | | | |
| 24.2 Reinsurance assumed | 0 | | | | | | | | | | | | | | |
| 24.3 Net ceded less assumed | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | | |
| 25. Renewal: | | | | | | | | | | | | | | | |
| 25.1 Reinsurance ceded | 0 | | | | | | | | | | | | | | |
| 25.2 Reinsurance assumed | 0 | | | | | | | | | | | | | | |
| 25.3 Net ceded less assumed | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | | |
| 26. Totals: | | | | | | | | | | | | | | | |
| 26.1 Reinsurance ceded (Page 6, Line 6) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | | |
| 26.2 Reinsurance assumed (Page 6, Line 22) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | | |
| 26.3 Net ceded less assumed | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | | |
| COMMISSIONS INCURRED (direct business only) | | | | | | | | | | | | | | | |
| 27. First year (other than single) | 375,711 | | .72 | | | 297,744 | | .37,101 | | | 40,795 | | | | |
| 28. Single | 0 | | | | | | | | | | | | | | |
| 29. Renewal | 2,703,343 | | 15,293 | | | 2,129,393 | | .532,909 | | | 25,749 | | | | |
| 30. Deposit-type contract funds | 0 | | | | | | | | | | | | | | |
| 31. Totals (to agree with Page 6, Line 21) | 3,079,054 | 0 | 15,364 | 0 | 0 | 2,427,136 | 0 | 570,010 | 0 | 66,543 | 0 | | 0 | | |

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MedMutual Life Insurance Company
EXHIBIT 2 - GENERAL EXPENSES

| | Insurance | | | 5 | 6 | 7 | |
|--|-----------|-----------------------|----------------|-----|---------|---------------------|--|
| | 1 Life | Accident and Health | | | 6 | 7 | |
| | | 2 Cost Containment | 3 All Other | | | | |
| 1. Rent | 425 | 0 | .921 | | | 1,346 | |
| 2. Salaries and wages | 2,359,166 | 1,627 | .759,427 | | | 3,120,220 | |
| 3.11 Contributions for benefit plans for employees | 494,847 | 364 | .160,578 | | | 655,789 | |
| 3.12 Contributions for benefit plans for agents | | | | | | 0 | |
| 3.21 Payments to employees under non-funded benefit plans | | | | | | 0 | |
| 3.22 Payments to agents under non-funded benefit plans | | | | | | 0 | |
| 3.31 Other employee welfare | 43 | .4 | .163 | | | 210 | |
| 3.32 Other agent welfare | | | | | | 0 | |
| 4.1 Legal fees and expenses | 3,799 | .4 | .1,196 | | | 4,999 | |
| 4.2 Medical examination fees | | | | | | 0 | |
| 4.3 Inspection report fees | | | | | | 0 | |
| 4.4 Fees of public accountants and consulting actuaries | 101,404 | 0 | .32,023 | | | 133,427 | |
| 4.5 Expense of investigation and settlement of policy claims | | | | | | 0 | |
| 5.1 Traveling expenses | .3,196 | .1 | .1,332 | | | 4,530 | |
| 5.2 Advertising | 3,729 | | 2,143 | | | 5,872 | |
| 5.3 Postage, express, telegraph and telephone | 1,427 | 104 | .1,529 | | | 3,060 | |
| 5.4 Printing and stationery | 3,074 | .15 | .1,189 | | | 4,278 | |
| 5.5 Cost or depreciation of furniture and equipment | 31 | .18 | .447 | | | 496 | |
| 5.6 Rental of equipment | | | | | | 0 | |
| 5.7 Cost or depreciation of EDP equipment and software | (7,496) | 977 | .1,085 | | | (5,434) | |
| 6.1 Books and periodicals | .6,945 | .16 | .2,271 | | | 9,232 | |
| 6.2 Bureau and association fees | 3,807 | .7 | .1,310 | | | 5,124 | |
| 6.3 Insurance, except on real estate | | | .342 | | | 342 | |
| 6.4 Miscellaneous losses | | | | | | 0 | |
| 6.5 Collection and bank service charges | | | | | 12,694 | 12,694 | |
| 6.6 Sundry general expenses | | | | | | 0 | |
| 6.7 Group service and administration fees | | | | | | 0 | |
| 6.8 Reimbursements by uninsured plans | | | (135,066) | | | (135,066) | |
| 7.1 Agency expense allowance | | | | | | 0 | |
| 7.2 Agents' balances charged off (less \$ recovered) | | | | | | 0 | |
| 7.3 Agency conferences other than local meetings | | | | | | 0 | |
| 8.1 Official publication (Fraternal Benefit Societies Only) | XXX | XXX | XXX | XXX | XXX | 0 | |
| 8.2 Expense of supreme lodge meetings (Fraternal Benefit Societies Only) | XXX | XXX | XXX | XXX | XXX | 0 | |
| 9.1 Real estate expenses | | | | | | 0 | |
| 9.2 Investment expenses not included elsewhere | | | | | 5,690 | 5,690 | |
| 9.3 Aggregate write-ins for expenses | 373,786 | 3,533 | 122,809 | 0 | 0 | 500,128 | |
| 10. General expenses incurred | 3,348,183 | 6,671 | .953,699 | 0 | .18,384 | (b) 0 (a) 4,326,937 | |
| 11. General expenses unpaid Dec. 31, prior year | 354,937 | 2,623 | .215,927 | 0 | 4,632 | 578,119 | |
| 12. General expenses unpaid Dec. 31, current year | 418,371 | 2,001 | .252,027 | | 3,400 | 675,799 | |
| 13. Amounts receivable relating to uninsured plans, prior year | 0 | .0 | .197,440 | 0 | .0 | .197,440 | |
| 14. Amounts receivable relating to uninsured plans, current year | | | 142,177 | | | 142,177 | |
| 15. General expenses paid during year (Lines 10+11-12-13-14) | 3,284,749 | 7,294 | 862,336 | 0 | 19,616 | 0 | |
| | | | | | | 4,173,995 | |
| DETAILS OF WRITE-INS | | | | | | | |
| 09.301. Vendor Services | 373,786 | 3,533 | 122,809 | | | 500,128 | |
| 09.302. | | | | | | | |
| 09.303. | | | | | | | |
| 09.398. Summary of remaining write-ins for Line 9.3 from overflow page | 0 | .0 | .0 | 0 | 0 | 0 | |
| 09.399. Totals (Lines 09.301 thru 09.303 plus 09.398) (Line 9.3 above) | 373,786 | 3,533 | 122,809 | 0 | 0 | 500,128 | |

(a) Includes management fees of \$ 1,209,249 to affiliates and \$ to non-affiliates.

(b) Show the distribution of this amount in the following categories (Fraternal Benefit Societies Only):

1. Charitable \$; 2. Institutional \$; 3. Recreational and Health \$; 4. Educational \$;
 5. Religious \$; 6. Membership \$; 7. Other \$; 8. Total \$ 0

EXHIBIT 3 - TAXES, LICENSES AND FEES (EXCLUDING FEDERAL INCOME TAXES)

| | Insurance | | | 4 | 5 | 6 |
|---|-----------|--------------------------|----------------------------------|---|---|---------|
| | 1 Life | 2 Accident and Health | 3 All Other Lines of Business | | | |
| 1. Real estate taxes | | | | | | 0 |
| 2. State insurance department licenses and fees | 161,778 | .115,090 | | | | 276,868 |
| 3. State taxes on premiums | 565,964 | .113,794 | | | | 679,758 |
| 4. Other state taxes, including \$ for employee benefits | | | | | | 0 |
| 5. U.S. Social Security taxes | | | | | | 0 |
| 6. All other taxes | | .15 | | | | .15 |
| 7. Taxes, licenses and fees incurred | 727,742 | .228,899 | 0 | 0 | 0 | 956,641 |
| 8. Taxes, licenses and fees unpaid Dec. 31, prior year | 476,776 | .128,465 | 0 | 0 | 0 | 605,241 |
| 9. Taxes, licenses and fees unpaid Dec. 31, current year | 611,947 | .133,327 | | | | 745,273 |
| 10. Taxes, licenses and fees paid during year (Lines 7 + 8 - 9) | 592,571 | .224,037 | 0 | 0 | 0 | 816,609 |

EXHIBIT 4 - DIVIDENDS OR REFUNDS

| | 1 Life | 2 Accident and Health |
|---|-----------|--------------------------|
| 1. Applied to pay renewal premiums | | |
| 2. Applied to shorten the endowment or premium-paying period | | |
| 3. Applied to provide paid-up additions | | |
| 4. Applied to provide paid-up annuities | | |
| 5. Total Lines 1 through 4 | | |
| 6. Paid in cash | | |
| 7. Left on deposit | | |
| 8. Aggregate write-ins for dividend or refund options | | |
| 9. Total Lines 5 through 8 | | |
| 10. Amount due and unpaid | | |
| 11. Provision for dividends or refunds payable in the following calendar year | | |
| 12. Terminal dividends | | |
| 13. Provision for deferred dividend contracts | | |
| 14. Amount provisionally held for deferred dividend contracts not included in Line 13 | | |
| 15. Total Lines 10 through 14 | | |
| 16. Total from prior year | | |
| 17. Total dividends or refunds (Lines 9 + 15 - 16) | | |
| DETAILS OF WRITE-INS | | |
| 0801. | | |
| 0802. | | |
| 0803. | | |
| 0898. Summary of remaining write-ins for Line 8 from overflow page | | |
| 0899. Totals (Lines 0801 thru 0803 plus 0898) (Line 8 above) | | |

NONE

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MedMutual Life Insurance Company

EXHIBIT 5 - AGGREGATE RESERVE FOR LIFE CONTRACTS

(a) Included in the above table are amounts of deposit-type contracts that originally contained a mortality risk. Amounts of deposit-type contracts in Column 2 that no longer contain a mortality risk are Life Insurance \$; Annuities \$; Supplementary Contracts with Life Contingencies \$; Accidental Death Benefits \$; Disability - Active Lives \$; Disability - Disabled Lives \$; Miscellaneous Reserves \$

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MedMutual Life Insurance Company
EXHIBIT 5 - INTERROGATORIES

- 1.1 Has the reporting entity ever issued both participating and non-participating contracts? Yes [] No [X]
 1.2 If not, state which kind is issued.
 Non-Participating
- 2.1 Does the reporting entity at present issue both participating and non-participating contracts? Yes [] No [X]
 2.2 If not, state which kind is issued.
 Non-Participating
3. Does the reporting entity at present issue or have in force contracts that contain non-guaranteed elements? Yes [] No [X]
 If so, attach a statement that contains the determination procedures, answers to the interrogatories and an actuarial opinion as described in the instructions.
4. Has the reporting entity any assessment or stipulated premium contracts in force? Yes [] No [X]
 If so, state:
 4.1 Amount of insurance? \$
 4.2 Amount of reserve? \$
 4.3 Basis of reserve:

 4.4 Basis of regular assessments:

 4.5 Basis of special assessments:

 4.6 Assessments collected during the year \$
5. If the contract loan interest rate guaranteed in any one or more of its currently issued contracts is less than 5%, not in advance, state the contract loan rate guarantees on any such contracts.
6. Does the reporting entity hold reserves for any annuity contracts that are less than the reserves that would be held on a standard basis? Yes [] No [X]
 6.1 If so, state the amount of reserve on such contracts on the basis actually held: \$
- 6.2 That would have been held (on an exact or approximate basis) using the actual ages of the annuitants; the interest rate(s) used in 6.1; and the same mortality basis used by the reporting entity for the valuation of comparable annuity benefits issued to standard lives. If the reporting entity has no comparable annuity benefits for standard lives to be valued, the mortality basis shall be the table most recently approved by the state of domicile for valuing individual annuity benefits: \$
- Attach statement of methods employed in their valuation.
7. Does the reporting entity have any Synthetic GIC contracts or agreements in effect as of December 31 of the current year? Yes [] No [X]
 7.1 If yes, state the total dollar amount of assets covered by these contracts or agreements \$
- 7.2 Specify the basis (fair value, amortized cost, etc.) for determining the amount:

 7.3 State the amount of reserves established for this business: \$
- 7.4 Identify where the reserves are reported in the blank:

8. Does the reporting entity have any Contingent Deferred Annuity contracts or agreements in effect as of December 31 of the current year? Yes [] No [X]
 8.1 If yes, state the total dollar amount of account value covered by these contracts or agreements: \$
- 8.2 State the amount of reserves established for this business: \$
- 8.3 Identify where the reserves are reported in the blank:

9. Does the reporting entity have any Guaranteed Lifetime Income Benefit contracts, agreements or riders in effect as of December 31 of the current year? Yes [] No [X]
 9.1 If yes, state the total dollar amount of any account value associated with these contracts, agreements or riders: \$
- 9.2 State the amount of reserves established for this business: \$
- 9.3 Identify where the reserves are reported in the blank:

EXHIBIT 5A - CHANGES IN BASES OF VALUATION DURING THE YEAR

| 1 Description of Valuation Class | Valuation Basis | | 4 Increase in Actuarial Reserve Due to Change |
|-------------------------------------|-------------------|-----------------|--|
| | 2 Changed From | 3 Changed To | |
| | | | |
| 9999999 - Total (Column 4, only) | | | |

NONE

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MedMutual Life Insurance Company

EXHIBIT 6 - AGGREGATE RESERVES FOR ACCIDENT AND HEALTH CONTRACTS ^(a)

| | 1 Total | Comprehensive | | 4 Medicare Supplement | 5 Vision Only | 6 Dental Only | 7 Federal Employees Health Benefits Plan | 8 Title XVIII Medicare | 9 Title XIX Medicaid | 10 Credit A&H | 11 Disability Income | 12 Long-Term Care | 13 Other Health |
|---|------------|-----------------|------------|-----------------------------|------------------|------------------|--|------------------------------|----------------------------|------------------|----------------------------|-------------------------|--------------------|
| | | 2 Individual | 3 Group | | | | | | | | | | |
| ACTIVE LIFE RESERVE | | | | | | | | | | | | | |
| 1. Unearned premium reserves | 0 | | | | | | | | | | | | |
| 2. Additional contract reserves (b) | 0 | | | | | | | | | | | | |
| 3. Additional actuarial reserves-Asset/Liability analysis | 0 | | | | | | | | | | | | |
| 4. Reserve for future contingent benefits | 0 | | | | | | | | | | | | |
| 5. Reserve for rate credits | 0 | | | | | | | | | | | | |
| 6. Aggregate write-ins for reserves | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 7. Totals (Gross) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 8. Reinsurance ceded | 0 | | | | | | | | | | | | |
| 9. Totals (Net) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| CLAIM RESERVE | | | | | | | | | | | | | |
| 10. Present value of amounts not yet due on claims | 11,129,325 | | | | | | | | | | 11,120,137 | | .9,188 |
| 11. Additional actuarial reserves-Asset/Liability analysis | 640,000 | | | | | | | | | | 640,000 | | |
| 12. Reserve for future contingent benefits | 0 | | | | | | | | | | | | |
| 13. Aggregate write-ins for reserves | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 14. Totals (Gross) | 11,769,325 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 11,760,137 | 0 | .9,188 |
| 15. Reinsurance ceded | 9,788,553 | | | | | | | | | | 9,788,553 | | |
| 16. Totals (Net) | 1,980,772 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1,971,584 | 0 | .9,188 |
| 17. TOTAL (Net) | 1,980,772 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1,971,584 | 0 | .9,188 |
| 18. TABULAR FUND INTEREST | 0 | | | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | | | | |
| 0601. | | | | | | | | | | | | | |
| 0602. | | | | | | | | | | | | | |
| 0603. | | | | | | | | | | | | | |
| 0698. Summary of remaining write-ins for Line 6 from overflow page | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 0699. TOTALS (Lines 0601 thru 0603 plus 0698) (Line 6 above) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 1301. | | | | | | | | | | | | | |
| 1302. | | | | | | | | | | | | | |
| 1303. | | | | | | | | | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 1399. TOTALS (Lines 1301 thru 1303 plus 1398) (Line 13 above) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |

(a) Indicate if blocks of business in run-off that comprise less than 5% of premiums and less than 5% of reserve and loans liability are aggregated with material blocks of business and which columns are affected.

(b) Attach statement as to valuation standard used in calculating this reserve, specifying reserve bases, interest rates and methods.

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MedMutual Life Insurance Company

EXHIBIT 7 - DEPOSIT TYPE CONTRACTS

| | 1 Total | 2 Guaranteed Interest Contracts | 3 Annuities Certain | 4 Supplemental Contracts | 5 Dividend Accumulations or Refunds | 6 Premium and Other Deposit Funds |
|--|------------|---------------------------------------|------------------------|--------------------------------|--|--|
| 1. Balance at the beginning of the year before reinsurance | | | | | | |
| 2. Deposits received during the year | | | | | | |
| 3. Investment earnings credited to the account | | | | | | |
| 4. Other net change in reserves | | | | | | |
| 5. Fees and other charges assessed | | | | | | |
| 6. Surrender charges | | | | | | |
| 7. Net surrender or withdrawal payments | | | | | | |
| 8. Other net transfers to or (from) Separate Accounts | | | | | | |
| 9. Balance at the end of current year before reinsurance (Lines 1+2+3+4-5-6-7-8) | | | | | | |
| 10. Reinsurance balance at the beginning of the year | | | | | | |
| 11. Net change in reinsurance assumed | | | | | | |
| 12. Net change in reinsurance ceded | | | | | | |
| 13. Reinsurance balance at the end of the year (Lines 10+11-12) | | | | | | |
| 14. Net balance at the end of current year after reinsurance (Lines 9 + 13) | | | | | | |

NONE

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MedMutual Life Insurance Company

EXHIBIT 8 - CLAIMS FOR LIFE AND ACCIDENT AND HEALTH CONTRACTS**PART 1 - Liability End of Current Year**

| | 1 Total | 2 Industrial Life | Ordinary | | | 6 Credit Life (Group and Individual) | Group | | Accident and Health | | |
|-----------------------------|------------|----------------------|---------------------|---------------------------|------------------------------|---|---------------------|----------------|---------------------|-------------------------------------|-------------|
| | | | 3 Life Insurance | 4 Individual Annuities | 5 Supplementary Contracts | | 7 Life Insurance | 8 Annuities | 9 Group | 10 Credit (Group and Individual) | 11 Other |
| 1. Due and unpaid: | | | | | | | | | | | |
| 1.1 Direct | 0 | | | | | | | | | | |
| 1.2 Reinsurance assumed | 0 | | | | | | | | | | |
| 1.3 Reinsurance ceded | 0 | | | | | | | | | | |
| 1.4 Net | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 2. In course of settlement: | | | | | | | | | | | |
| 2.1 Resisted | 0 | | | | | | | | | | |
| 2.11 Direct | 0 | | | | | | | | | | |
| 2.12 Reinsurance assumed | 0 | | | | | | | | | | |
| 2.13 Reinsurance ceded | 0 | | | | | | | | | | |
| 2.14 Net | 0 | 0 | (b) 0 | (b) 0 | 0 | (b) 0 | (b) 0 | 0 | 0 | 0 | 0 |
| 2.2 Other | 6,815,894 | | | | | | 6,815,894 | | | | |
| 2.21 Direct | 6,815,894 | | | | | | | | | | |
| 2.22 Reinsurance assumed | 0 | | | | | | | | | | |
| 2.23 Reinsurance ceded | 1,450,600 | | | | | | 1,450,600 | | | | |
| 2.24 Net | 5,365,294 | 0 | (b) 0 | (b) 0 | 0 | (b) 0 | (b) 5,365,294 | 0 | (b) 0 | (b) 0 | (b) 0 |
| 3. Incurred but unreported: | | | | | | | | | | | |
| 3.1 Direct | 9,497,773 | | | 4,000 | | | 9,453,773 | | | | 40,000 |
| 3.2 Reinsurance assumed | 0 | | | | | | | | | | |
| 3.3 Reinsurance ceded | 231,504 | | | | | | 231,504 | | | | |
| 3.4 Net | 9,266,270 | 0 | (b) 4,000 | (b) 0 | 0 | (b) 0 | (b) 9,222,270 | 0 | (b) 0 | (b) 0 | (b) 40,000 |
| 4. TOTALS | 16,313,667 | 0 | 4,000 | 0 | 0 | 0 | 16,269,667 | 0 | 0 | 0 | 40,000 |
| 4.1 Direct | 0 | | | | | | | | | | |
| 4.2 Reinsurance assumed | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 4.3 Reinsurance ceded | 1,682,104 | 0 | 0 | 0 | 0 | 0 | 1,682,104 | 0 | 0 | 0 | 0 |
| 4.4 Net | 14,631,563 | (a) 0 | (a) 4,000 | 0 | 0 | 0 | (a) 14,587,563 | 0 | 0 | 0 | 40,000 |

(a) Including matured endowments (but not guaranteed annual pure endowments) unpaid amounting to \$ in Column 2, \$ in Column 3 and \$ in Column 7.

(b) Include only portion of disability and accident and health claim liabilities applicable to assumed "accrued" benefits. Reserves (including reinsurance assumed and net of reinsurance ceded) for unaccrued benefits for Ordinary Life Insurance \$ Individual Annuities \$, Credit Life (Group and Individual) \$, and Group Life \$, are included in Page 3, Line 1, (See Exhibit 5, Section on Disability Disabled Lives); and for Group Accident and Health \$ Credit (Group and Individual) Accident and Health \$, and Other Accident and Health \$ are included in Page 3, Line 2 (See Exhibit 6, Claim Reserve).

Individual Annuities \$, Credit Life (Group and Individual) \$, and Group Life \$, are included in Page 3, Line 1, (See Exhibit 5, Section on Disability Disabled Lives); and for Group Accident and Health \$ Credit (Group and Individual) Accident and Health \$, and Other Accident and Health \$ are included in Page 3, Line 2 (See Exhibit 6, Claim Reserve).

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MedMutual Life Insurance Company
EXHIBIT 8 - CLAIMS FOR LIFE AND ACCIDENT AND HEALTH CONTRACTS

PART 2 - Incurred During the Year

| | 1 Total | 2 Industrial Life (a) | Ordinary | | | 6 Credit Life (Group and Individual) | Group | | Accident and Health | | |
|--|----------------|-----------------------------|----------------------------|---------------------------|---------------------------------|--|----------------------------|----------------|---------------------|--|-------------|
| | | | 3 Life Insurance (b) | 4 Individual Annuities | 5 Supplementary Contracts | | 7 Life Insurance (c) | 8 Annuities | 9 Group | 10 Credit (Group and Individual) | 11 Other |
| 1. Settlements During the Year: | | | | | | | | | | | |
| 1.1 Direct | 41,995,295 | | 391,000 | | | | 34,302,684 | | 6,914,893 | | 386,719 |
| 1.2 Reinsurance assumed | 0 | | | | | | | | | | |
| 1.3 Reinsurance ceded | 4,507,916 | | | | | | 2,802,226 | | 1,705,690 | | |
| 1.4 Net | (d) 37,487,379 | 0 | 391,000 | 0 | 0 | 0 | 31,500,458 | 0 | 5,209,202 | 0 | 386,719 |
| 2. Liability December 31, current year from Part 1: | | | | | | | | | | | |
| 2.1 Direct | 16,313,667 | 0 | 4,000 | 0 | 0 | 0 | 16,269,667 | 0 | 0 | 0 | 40,000 |
| 2.2 Reinsurance assumed | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 2.3 Reinsurance ceded | 1,682,104 | 0 | 0 | 0 | 0 | 0 | 1,682,104 | 0 | 0 | 0 | 0 |
| 2.4 Net | 14,631,563 | 0 | 4,000 | 0 | 0 | 0 | 14,587,563 | 0 | 0 | 0 | 40,000 |
| 3. Amounts recoverable from reinsurers December 31, current year | 710,357 | | | | | | 710,357 | | | | |
| 4. Liability December 31, prior year: | | | | | | | | | | | |
| 4.1 Direct | 7,549,176 | 0 | 2,000 | 0 | 0 | 0 | 7,510,926 | 0 | 0 | 0 | 36,250 |
| 4.2 Reinsurance assumed | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 4.3 Reinsurance ceded | 474,078 | 0 | 0 | 0 | 0 | 0 | 474,078 | 0 | 0 | 0 | 0 |
| 4.4 Net | 7,075,098 | 0 | 2,000 | 0 | 0 | 0 | 7,036,848 | 0 | 0 | 0 | 36,250 |
| 5. Amounts recoverable from reinsurers December 31, prior year | 292,210 | 0 | 0 | 0 | 0 | 0 | 292,210 | 0 | 0 | 0 | 0 |
| 6. Incurred Benefits | | | | | | | | | | | |
| 6.1 Direct | 50,759,786 | 0 | 393,000 | 0 | 0 | 0 | 43,061,424 | 0 | 6,914,893 | 0 | 390,469 |
| 6.2 Reinsurance assumed | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 6.3 Reinsurance ceded | 6,134,089 | 0 | 0 | 0 | 0 | 0 | 4,428,399 | 0 | 1,705,690 | 0 | 0 |
| 6.4 Net | 44,625,697 | 0 | 393,000 | 0 | 0 | 0 | 38,633,025 | 0 | 5,209,202 | 0 | 390,469 |

(a) Including matured endowments (but not guaranteed annual pure endowments) amounting to \$ 0 in Line 1.1, \$ 0 in Line 1.4.

\$ 0 in Line 6.1, and \$ 0 in Line 6.4.

(b) Including matured endowments (but not guaranteed annual pure endowments) amounting to \$ 0 in Line 1.1, \$ 0 in Line 1.4.

\$ 0 in Line 6.1, and \$ 0 in Line 6.4.

(c) Including matured endowments (but not guaranteed annual pure endowments) amounting to \$ 0 in Line 1.1, \$ 0 in Line 1.4.

\$ 0 in Line 6.1, and \$ 0 in Line 6.4.

(d) Includes \$ 0 premiums waived under total and permanent disability benefits.

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MedMutual Life Insurance Company
EXHIBIT OF NON-ADMITTED ASSETS

| | 1 Current Year Total Nonadmitted Assets | 2 Prior Year Total Nonadmitted Assets | 3 Change in Total Nonadmitted Assets (Col. 2 - Col. 1) |
|--|---|---|---|
| 1. Bonds (Schedule D) | | 0 | 0 |
| 2. Stocks (Schedule D): | | | |
| 2.1 Preferred stocks | | 0 | 0 |
| 2.2 Common stocks | | 0 | 0 |
| 3. Mortgage loans on real estate (Schedule B): | | | |
| 3.1 First liens | | 0 | 0 |
| 3.2 Other than first liens | | 0 | 0 |
| 4. Real estate (Schedule A): | | | |
| 4.1 Properties occupied by the company | | 0 | 0 |
| 4.2 Properties held for the production of income | | 0 | 0 |
| 4.3 Properties held for sale | | 0 | 0 |
| 5. Cash (Schedule E - Part 1), cash equivalents (Schedule E - Part 2) and short-term investments (Schedule DA) | | 0 | 0 |
| 6. Contract loans | | 0 | 0 |
| 7. Derivatives (Schedule DB) | | 0 | 0 |
| 8. Other invested assets (Schedule BA) | | 0 | 0 |
| 9. Receivables for securities | | 0 | 0 |
| 10. Securities lending reinvested collateral assets (Schedule DL) | | 0 | 0 |
| 11. Aggregate write-ins for invested assets | 0 | 0 | 0 |
| 12. Subtotals, cash and invested assets (Lines 1 to 11) | 0 | 0 | 0 |
| 13. Title plants (for Title insurers only) | | 0 | 0 |
| 14. Investment income due and accrued | 0 | 0 | 0 |
| 15. Premiums and considerations: | | | |
| 15.1 Uncollected premiums and agents' balances in the course of collection | 0 | 0 | 0 |
| 15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due | 0 | 0 | 0 |
| 15.3 Accrued retrospective premiums and contracts subject to redetermination | 0 | 0 | 0 |
| 16. Reinsurance: | | | |
| 16.1 Amounts recoverable from reinsurers | 0 | 0 | 0 |
| 16.2 Funds held by or deposited with reinsured companies | | 0 | 0 |
| 16.3 Other amounts receivable under reinsurance contracts | | 0 | 0 |
| 17. Amounts receivable relating to uninsured plans | 0 | 0 | 0 |
| 18.1 Current federal and foreign income tax recoverable and interest thereon | 0 | 0 | 0 |
| 18.2 Net deferred tax asset | | 0 | 0 |
| 19. Guaranty funds receivable or on deposit | 0 | 0 | 0 |
| 20. Electronic data processing equipment and software | | 0 | 0 |
| 21. Furniture and equipment, including health care delivery assets | | 0 | 0 |
| 22. Net adjustment in assets and liabilities due to foreign exchange rates | | 0 | 0 |
| 23. Receivables from parent, subsidiaries and affiliates | 0 | 0 | 0 |
| 24. Health care and other amounts receivable | 9,400 | 4,500 | (4,900) |
| 25. Aggregate write-ins for other than invested assets | 43,592 | 47,500 | 3,908 |
| 26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25) | 52,992 | 52,000 | (992) |
| 27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts | | 0 | 0 |
| 28. Total (Lines 26 and 27) | 52,992 | 52,000 | (992) |
| DETAILS OF WRITE-INS | | | |
| 1101. | | | |
| 1102. | | | |
| 1103. | | | |
| 1198. Summary of remaining write-ins for Line 11 from overflow page | 0 | 0 | 0 |
| 1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above) | 0 | 0 | 0 |
| 2501. Prepaid Assets | 29,753 | 30,450 | 697 |
| 2502. Other Receivables | 13,840 | 17,050 | 3,210 |
| 2503. | | | |
| 2598. Summary of remaining write-ins for Line 25 from overflow page | 0 | 0 | 0 |
| 2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above) | 43,592 | 47,500 | 3,908 |

NOTES TO FINANCIAL STATEMENTS

NOTE 1 Summary of Significant Accounting Policies and Going Concern
A. Accounting Practices

The accompanying statutory financial statements of MedMutual Life Insurance Company (the Company or MMLIC) have been prepared in conformity with the National Association of Insurance Commissioners' (NAIC) Accounting Practices and Procedures Manual (NAIC SAP), as prescribed by the Ohio Department of Insurance (ODI). No accounting practices were employed by the Company in 2021 or 2020 that departed from NAIC SAP.

| | F/S SSAP # | F/S Page | F/S Line # | 2021 | 2020 |
|---|---------------|-------------|---------------|-----------------|---------------|
| NET INCOME | | | | | |
| (1) State basis (Page 4, Line 35, Columns 1 & 2) | XXX | XXX | XXX | \$ (16,338,060) | \$ 1,020,791 |
| (2) State Prescribed Practices that are an increase/(decrease) from NAIC SAP: | | | | | |
| (3) State Permitted Practices that are an increase/(decrease) from NAIC SAP: | | | | | |
| (4) NAIC SAP (1-2-3=4) | XXX | XXX | XXX | \$ (16,338,060) | \$ 1,020,791 |
| SURPLUS | | | | | |
| (5) State basis (Page 3, Line 38, Columns 1 & 2) | XXX | XXX | XXX | \$ 33,204,188 | \$ 34,591,587 |
| (6) State Prescribed Practices that are an increase/(decrease) from NAIC SAP: | | | | | |
| (7) State Permitted Practices that are an increase/(decrease) from NAIC SAP: | | | | | |
| (8) NAIC SAP (5-6-7=8) | XXX | XXX | XXX | \$ 33,204,188 | \$ 34,591,587 |

B. Use of Estimates in the Preparation of the Financial Statements

The preparation of the financial statements requires management to make estimates and assumptions that affect amounts reported in the statutory financial statements and accompanying notes. Such estimates and assumptions could change in the future as more information becomes known, which could impact the amounts reported and disclosed herein.

C. Accounting Policy
Basis of Presentation

Statutory accounting practices vary from generally accepted accounting principles (GAAP). The more significant differences from GAAP are as follows:

Investments

Investments in bonds are reported at cost, or the lower of amortized cost or fair value based on their NAIC rating; for GAAP, such fixed maturity investments are held as available-for-sale and are reported at fair value with unrealized holding gains and losses reported as a separate component of capital and surplus.

Under statutory accounting, a realized loss is recorded upon the sale of an investment at a loss or when a decline in the fair value of an investment is determined by management to be other than temporary. Realized capital gains and losses are determined on the first-in, first-out cost method.

For GAAP, when a decline in the fair value is other than temporary, the difference between the security's fair value and carrying value (amortized cost) must be realized in earnings if the Company has the intent to sell the security or does not have the intent and ability to hold the security until recovery of the carrying value. If the Company does not intend to sell the security and it is more likely than not that the Company will be required to sell the security before recovery of its amortized cost basis, the other-than-temporary impairment (OTTI) would be separated into (a) the amount representing the credit loss and (b) the amount related to all other factors. The amount of the total OTTI related to the credit loss would be recognized in earnings. The amount of the total OTTI related to other factors would be recognized in other comprehensive income.

Nonadmitted Assets

Certain assets designated as "nonadmitted", principally other receivables and prepaid expenses, not specifically identified as an admitted asset in the NAIC's Accounting Practices and Procedures Manual, are excluded from the statutory statements of admitted assets, liabilities and capital and surplus and are charged directly to capital and surplus. In accordance with GAAP, such assets are included in the balance sheet, net of valuation allowance, if necessary. Capital and surplus was reduced by nonadmitted assets of \$53,000 and \$52,000 at December 31, 2021 and 2020, respectively.

Guarantee Fund Premium Tax Assets

The Company recognizes premium tax assets that are recoverable in excess of one year if the credits are due to the insolvency of a writer of long-term care contracts. For GAAP, the Company is only permitted to recognize premium tax assets that are recoverable in the next calendar year as credits against taxes owed on premiums earned in the current calendar year.

Deferred Income Taxes

The Company computes deferred income taxes in accordance with Statement of Statutory Accounting Principle (SSAP) No. 101, Income Taxes. Under SSAP No. 101, gross deferred tax assets are reduced by a statutory valuation allowance adjustment if, based on the weight of available evidence, it is more-likely-than-not that some portion or all of the gross deferred tax assets will not be realized to calculate the adjusted gross deferred tax assets.

Considerable judgment is required in determining whether a valuation allowance is necessary, and if so, the amount of such valuation allowance. In evaluating the need for a valuation allowance the Company includes many factors, including: (1) the nature of the deferred tax assets and liabilities; (2) whether they are ordinary or capital; (3) the timing of reversal; (4) taxable income in prior carry back years as well as projected taxable earnings exclusive of reversing temporary differences and carry forwards; (5) the length of time that carryovers can be used; (6) unique tax rules that would impact the utilization of the deferred tax assets; and (7) any tax planning strategies that the Company would employ to avoid a tax benefit expiring unused.

Admitted adjusted deferred income tax assets are limited to (1) the amount of federal income taxes paid in prior years that can be recovered through loss carrybacks for existing temporary differences that reverse during a timeframe corresponding with the Internal Revenue Service tax loss carryback provisions, not to exceed three years, plus (2) the amount of adjusted gross deferred income tax assets expected to be realized within three years limited to an amount that is no greater than 15% of current period's adjusted statutory capital and surplus, plus 3) the amount of remaining adjusted gross deferred income tax assets that can be offset against existing gross deferred income tax liabilities after considering the character (i.e., ordinary versus capital) and reversal patterns of the deferred tax assets and liabilities. The remaining adjusted deferred income tax assets are nonadmitted.

Under GAAP, a deferred income tax asset is recorded for the amount of gross deferred income tax assets expected to be realized in all future years, and a valuation allowance is established for deferred income tax assets not realizable.

Contract Liabilities

Under statutory accounting, life contract liabilities are based on statutory mortality tables and interest rates rather than on the basis of mortality, interest, and withdrawal assumptions anticipated by the Company as would be required under GAAP.

Reinsurance

Policy and contract liabilities ceded to reinsurers have been reported as reductions of the related reserves rather than as assets as would be required under GAAP.

NOTES TO FINANCIAL STATEMENTS

Premium Deficiency Reserves

Premium deficiency reserves are recognized when expected claims, claim adjustment expenses, and administrative costs exceed the premium to be collected for the remainder of the contract period. The Company considers anticipated net investment income as a factor in determining the premium deficiency reserve amount. Under GAAP, general overhead is excluded from the premium deficiency reserve calculation.

Valuation Reserve

Capital gains on bonds, net of taxes, that arise from interest rate fluctuations are credited to an interest maintenance reserve (IMR), and the IMR is amortized over the remaining life of the bond sold. For GAAP, capital gain and losses are recognized as current income or loss. An asset valuation reserve (AVR) is maintained for the risk asset defaults based on NAIC prescribed formula with changes reflected in unassigned surplus. AVR is not recognized for GAAP.

Statutory Statement of Cash Flow

Cash and short-term investments in the statutory statements of cash flow represent cash balances and investments with initial maturities of one year or less. Under GAAP, the corresponding caption of cash and cash equivalents includes cash balances and investments with maturities of three months or less.

Other significant accounting practices are as follows:

Cash and Invested Assets

Short-term investments, principally money market accounts, include investments with remaining maturities of one year or less at the time of acquisition and are principally carried at amortized cost, which approximates fair value.

U.S. government securities and corporate bonds not backed by other assets are recorded at cost adjusted for amortization of premiums and discounts using the interest method. The fair values disclosed for these securities are obtained from independent pricing services.

Other-Than-Temporary Impairment

The Company reviews the values of the Company's investments on a quarterly basis. If the value of the investment falls below its cost basis, the decline is analyzed to determine whether it is an other-than-temporary decline in value. To make this determination for each security, the following is considered:

- The length of time and the extent to which the fair value has been less than the amortized cost basis.
- The Company's ability and intent to hold the security long enough for it to recover its value.
- A significant deterioration in the earning performance, credit rating, asset quality or business prospects of the investee.
- A significant adverse change in the regulatory, economic, or technological environment of the investee.
- Factors that raise significant concerns about the investee's ability to continue as a going concern such as negative cash flows from operations, working capital deficiencies, or noncompliance with statutory capital requirements or debt covenants.

Fair Value Measurements

Assets recorded in the statutory statements of admitted assets, liabilities and capital and surplus are categorized based on the level of judgment associated with the inputs used to measure their fair value. Level inputs are as follows:

Level 1- Values are unadjusted quoted prices for identical assets in active markets accessible at the measurement date.

Level 2- Inputs include quoted prices for similar assets in active markets, quoted prices from those willing to trade in markets that are not active, or other inputs that are observable or can be corroborated by market data for the term of the instrument. Such inputs include market interest rates, volatilities, spreads, and yield curves.

Level 3- Certain inputs are unobservable (supported by little or no market activity) and significant to the fair value measurement. Unobservable inputs reflect the Company's best estimate of what hypothetical market participants would use to determine a transaction price for the asset at the reporting date.

Premiums

Premiums are earned and recorded, net of amounts assumed and ceded under reinsurance agreements, pro rata over the period for which coverage is provided. Uncollected premiums include uncollected amounts from insured individuals and groups and are reported net of an allowance for amounts deemed uncollectible. Premium payments received prior to the period of coverage are classified as advance premiums.

The Company is subject to premium and loss experience rating agreements with certain life insurance customers. These premium adjustments are recognized as adjustments to earned premium in the period in which it is determined that adjustments are required. There were no material balances at December 31, 2021 or 2020.

Uncertain Tax Policies

The Company records uncertain tax positions on the basis of a two-step process whereby (1) the Company determines whether it is more likely than not that the tax positions will be sustained on the basis of the technical merits of the position and (2) for those tax positions that meet the more-likely-than-not recognition threshold, the Company recognizes the largest amount of tax benefit that is more than 50 percent likely to be realized upon ultimate settlement with the related tax authority.

Changes to liabilities for uncertain tax positions are recorded as income tax expense in the accompanying statutory statements of revenue and expenses. The total liability for uncertain tax positions at December 31, 2021 and 2020 was \$30,000 and \$32,000, respectively. The Company does not expect any significant changes in its uncertain tax positions in 2022.

- D. Going Concern
Not Applicable.

NOTE 2 Accounting Changes and Corrections of Errors

Not Applicable.

NOTE 3 Business Combinations and Goodwill

Not Applicable.

NOTE 4 Discontinued Operations

Not Applicable.

NOTE 5 Investments

- A. Mortgage Loans, including Mezzanine Real Estate Loans
Not Applicable.
- B. Debt Restructuring
Not Applicable.
- C. Reverse Mortgages
Not Applicable.
- D. Loan-Backed Securities
Not Applicable.
- E. Dollar Repurchase Agreements and/or Securities Lending Transactions
Not Applicable.
- F. Repurchase Agreements Transactions Accounted for as Secured Borrowing

NOTES TO FINANCIAL STATEMENTS

Not Applicable.

- G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing
Not Applicable.

- H. Repurchase Agreements Transactions Accounted for as a Sale
Not Applicable.

- I. Reverse Repurchase Agreements Transactions Accounted for as a Sale
Not Applicable.

- J. Not Applicable.

- K. Low Income Housing tax Credits (LIHTC)
Not Applicable.

- L. Restricted Assets

1. Restricted Assets (Including Pledged)

| Restricted Asset Category | Gross (Admitted & Nonadmitted) Restricted | | | | | 6 | 7 | | |
|--|---|---------------------------------|--|--|------------------|-----------------------|----------------------------------|--|--|
| | Current Year | | | | | | | | |
| | 1 | 2 | 3 | 4 | 5 | | | | |
| Restricted Asset Category | Total General Account (G/A) | G/A Supporting S/A Activity (a) | Total Separate Account (S/A) Restricted Assets | S/A Assets Supporting G/A Activity (b) | Total (1 plus 3) | Total From Prior Year | Increase/ (Decrease) (5 minus 6) | | |
| a. Subject to contractual obligation for which liability is not shown | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | | |
| b. Collateral held under security lending agreements | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | | |
| c. Subject to repurchase agreements | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | | |
| d. Subject to reverse repurchase agreements | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | | |
| e. Subject to dollar repurchase agreements | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | | |
| f. Subject to dollar reverse repurchase agreements | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | | |
| g. Placed under option contracts | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | | |
| h. Letter stock or securities restricted as to sale - excluding FHLB capital stock | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | | |
| i. FHLB capital stock | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | | |
| j. On deposit with states | \$ 2,344,823 | \$ - | \$ - | \$ - | \$ 2,344,823 | \$ 2,009,521 | \$ 335,302 | | |
| k. On deposit with other regulatory bodies | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | | |
| l. Pledged collateral to FHLB (including assets backing funding agreements) | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | | |
| m. Pledged as collateral not captured in other categories | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | | |
| n. Other restricted assets | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | | |
| o. Total Restricted Assets | \$ 2,344,823 | \$ - | \$ - | \$ - | \$ 2,344,823 | \$ 2,009,521 | \$ 335,302 | | |

(a) Subset of Column 1

(b) Subset of Column 3

| Restricted Asset Category | Current Year | | | |
|--|-------------------------------|---------------------------------------|--|--|
| | 8 | 9 | Percentage | |
| | | | 10 | 11 |
| Restricted Asset Category | Total Non-admitted Restricted | Total Admitted Restricted (5 minus 8) | Gross (Admitted & Non-admitted) Restricted to Total Assets (c) | Admitted Restricted to Total Admitted Assets (d) |
| a. Subject to contractual obligation for which liability is not shown | \$ - | \$ - | 0.000% | 0.000% |
| b. Collateral held under security lending agreements | \$ - | \$ - | 0.000% | 0.000% |
| c. Subject to repurchase agreements | \$ - | \$ - | 0.000% | 0.000% |
| d. Subject to reverse repurchase agreements | \$ - | \$ - | 0.000% | 0.000% |
| e. Subject to dollar repurchase agreements | \$ - | \$ - | 0.000% | 0.000% |
| f. Subject to dollar reverse repurchase agreements | \$ - | \$ - | 0.000% | 0.000% |
| g. Placed under option contracts | \$ - | \$ - | 0.000% | 0.000% |
| h. Letter stock or securities restricted as to sale - excluding FHLB capital stock | \$ - | \$ - | 0.000% | 0.000% |
| i. FHLB capital stock | \$ - | \$ - | 0.000% | 0.000% |
| j. On deposit with states | \$ - | \$ 2,344,823 | 3.903% | 3.907% |
| k. On deposit with other regulatory bodies | \$ - | \$ - | 0.000% | 0.000% |
| l. Pledged collateral to FHLB (including assets backing funding agreements) | \$ - | \$ - | 0.000% | 0.000% |
| m. Pledged as collateral not captured in other categories | \$ - | \$ - | 0.000% | 0.000% |
| n. Other restricted assets | \$ - | \$ - | 0.000% | 0.000% |
| o. Total Restricted Assets | \$ - | \$ 2,344,823 | 3.903% | 3.907% |

(c) Column 5 divided by Asset Page, Column 1, Line 28

(d) Column 9 divided by Asset Page, Column 3, Line 28

2. Detail of Assets Pledged as Collateral Not Captured in Other Categories (Contracts That Share Similar Characteristics, Such as Reinsurance and Derivatives, Are Reported in the Aggregate)

Not Applicable.

NOTES TO FINANCIAL STATEMENTS

3. Detail of Other Restricted Assets (Contracts That Share Similar Characteristics, Such as Reinsurance and Derivatives, Are Reported in the Aggregate)
Not Applicable.
4. Collateral Received and Reflected as Assets Within the Reporting Entity's Financial Statements
Not Applicable.

M. Working Capital Finance Investments

Not Applicable.

N. Offsetting and Netting of Assets and Liabilities

Not Applicable.

O. 5GI Securities

Not Applicable.

P. Short Sales

Not Applicable.

Q. Prepayment Penalty and Acceleration Fees

| | General Account | Separate Account |
|--|-----------------|------------------|
| 1. Number of CUSIPs | 0 | 0 |
| 2. Aggregate Amount of Investment Income | \$ - | \$ - |

R. Reporting Entity's Share of Cash Pool by Asset Type

Not Applicable.

NOTE 6 Joint Ventures, Partnerships and Limited Liability Companies

Not Applicable.

NOTE 7 Investment Income

Not Applicable.

NOTE 8 Derivative Instruments

Not Applicable.

NOTE 9 Income Taxes

A. The components of the net deferred tax asset/(liability) at the end of current period are as follows:

The Company is taxed as a life insurance company and met the requirements to file a consolidated federal income tax return with its Parent and other affiliates in 2021 and 2020. According to Internal Revenue Code (IRC) Section 816(a), if a company's average life reserves comprise more than 50 percent of its aggregate reserves it will be taxed as a life insurance company. Under the TCJA, net operating losses (NOLs) of life insurance companies may carryforward indefinitely, but limits utilization to 80 percent of a given year's taxable income with no loss carryback capacity. If MMLIC meets this test, it will no longer be able to carryback NOLs. The Company's DTAs would be admitted under SSAP 101 paragraph 11b versus 11a in the event the Company has future taxable income.

Deferred income tax assets (DTAs) and liabilities (DTLs) represent the expected future tax consequences of temporary items with differences generated by statutory accounting as defined in SSAP No. 101. DTAs and DTLs are computed by means of identifying temporary differences which are measured using a balance sheet approach whereby statutory and tax basis statutory statements of admitted assets, liabilities and capital and surplus are compared.

Current federal income tax recoverable from the Parent include all current income taxes, including interest, expected to be paid in a subsequent accounting period. Any tax related to the tax sharing agreement is included in the current federal income tax payable balance until the tax return is filed and amounts are then settled with the Parent.

The Company is subject to federal income tax examinations by tax authorities for the years 2018 through 2021. 2017 and prior years are closed.

The Company paid no federal income taxes during 2021 or 2020.

1.

| | As of End of Current Period | | | 12/31/2020 | | | Change | | |
|--|-----------------------------|----------------|------------------------------|-----------------|----------------|------------------------------|---------------------------------|--------------------------------|------------------------------|
| | (1) Ordinary | (2) Capital | (3) (Col. 1 + 2) Total | (4) Ordinary | (5) Capital | (6) (Col. 4 + 5) Total | (7) (Col. 1 - 4) Ordinary | (8) (Col. 2 - 5) Capital | (9) (Col. 7 + 8) Total |
| (a) Gross Deferred Tax Assets | \$ 2,172,166 | \$ - | \$ 2,172,166 | \$ 976,098 | \$ - | \$ 976,098 | \$ 1,196,068 | \$ - | \$ 1,196,068 |
| (b) Statutory Valuation Allowance Adjustment | \$ 2,172,166 | \$ - | \$ 2,172,166 | \$ 926,502 | \$ - | \$ 926,502 | \$ 1,245,664 | \$ - | \$ 1,245,664 |
| (c) Adjusted Gross Deferred Tax Assets (1a - 1b) | \$ - | \$ - | \$ - | \$ 49,596 | \$ - | \$ 49,596 | \$ (49,596) | \$ - | \$ (49,596) |
| (d) Deferred Tax Assets Nonadmitted | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - |
| (e) Subtotal Net Admitted Deferred Tax Asset (1c - 1d) | \$ - | \$ - | \$ - | \$ 49,596 | \$ - | \$ 49,596 | \$ (49,596) | \$ - | \$ (49,596) |
| (f) Deferred Tax Liabilities | \$ - | \$ - | \$ - | \$ 2,724 | \$ - | \$ 2,724 | \$ (2,724) | \$ - | \$ (2,724) |
| (g) Net Admitted Deferred Tax Asset/(Net Deferred Tax Liability) (1e - 1f) | \$ - | \$ - | \$ - | \$ 46,872 | \$ - | \$ 46,872 | \$ (46,872) | \$ - | \$ (46,872) |

NOTES TO FINANCIAL STATEMENTS

2.

| | As of End of Current Period | | | 12/31/2020 | | | Change | | |
|---|-----------------------------|----------------|------------------------------|-----------------|----------------|------------------------------|---------------------------------|--------------------------------|------------------------------|
| | (1) Ordinary | (2) Capital | (3) (Col. 1 + 2) Total | (4) Ordinary | (5) Capital | (6) (Col. 4 + 5) Total | (7) (Col. 1 - 4) Ordinary | (8) (Col. 2 - 5) Capital | (9) (Col. 7 + 8) Total |
| Admission Calculation Components SSAP No. 101 | | | | | | | | | |
| (a) Federal Income Taxes Paid In Prior Years Recoverable Through Loss Carrybacks | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - |
| (b) Adjusted Gross Deferred Tax Assets Expected To Be Realized (Excluding The Amount Of Deferred Tax Assets From 2(a) above) After Application of the Threshold Limitation. (The Lesser of 2(b)1 and 2(b)2 Below) | \$ - | \$ - | \$ - | \$ 46,872 | \$ - | \$ 46,872 | \$ (46,872) | \$ - | \$ (46,872) |
| 1. Adjusted Gross Deferred Tax Assets Expected to be Realized Following the Balance Sheet Date. | \$ - | \$ - | \$ - | \$ 46,872 | \$ - | \$ 46,872 | \$ (46,872) | \$ - | \$ (46,872) |
| 2. Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold | XXX | XXX | \$ - | XXX | XXX | \$ - | XXX | XXX | \$ - |
| (c) Adjusted Gross Deferred Tax Assets (Excluding The Amount Of Deferred Tax Assets From 2(a) and 2(b) above) Offset by Gross Deferred Tax Liabilities. | \$ - | \$ - | \$ - | \$ 2,724 | \$ - | \$ 2,724 | \$ (2,724) | \$ - | \$ (2,724) |
| (d) Deferred Tax Assets Admitted as the result of application of SSAP No. 101. Total (2(a) + 2(b) + 2(c)) | \$ - | \$ - | \$ - | \$ 49,596 | \$ - | \$ 49,596 | \$ (49,596) | \$ - | \$ (49,596) |

3.

| | 2021 | 2020 |
|--|---------------|---------------|
| a. Ratio Percentage Used To Determine Recovery Period And Threshold Limitation Amount. | 403.759% | 491.700% |
| b. Amount Of Adjusted Capital And Surplus Used To Determine Recovery Period And Threshold Limitation In 2(b)2 Above. | \$ 33,258,987 | \$ 34,598,039 |

4.

| | As of End of Current Period | | 12/31/2020 | | Change | |
|---|-----------------------------|----------------|-----------------|----------------|---------------------------------|--------------------------------|
| | (1) Ordinary | (2) Capital | (3) Ordinary | (4) Capital | (5) (Col. 1 - 3) Ordinary | (6) (Col. 2 - 4) Capital |
| Impact of Tax Planning Strategies: | | | | | | |
| (a) Determination of adjusted gross deferred tax assets and net admitted deferred tax assets, by tax character as a percentage. | | | | | | |
| 1. Adjusted Gross DTAs amount from Note 9A1(c) | \$ - | \$ - | \$ 49,596 | \$ - | \$ (49,596) | \$ - |
| 2. Percentage of adjusted gross DTAs by tax character attributable to the impact of tax planning strategies | 0.000% | 0.000% | 0.000% | 0.000% | 0.000% | 0.000% |
| 3. Net Admitted Adjusted Gross DTAs amount from Note 9A1(e) | \$ - | \$ - | \$ 49,596 | \$ - | \$ (49,596) | \$ - |
| 4. Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of tax planning strategies | 0.000% | 0.000% | 0.000% | 0.000% | 0.000% | 0.000% |

b. Do the Company's tax-planning strategies include the use of reinsurance? Yes [] No [X]

B. There are no temporary differences for deferred tax liabilities that are not recognized at December 31, 2021 and 2020.

NOTES TO FINANCIAL STATEMENTS

C. Current income taxes incurred consist of the following major components:

| | (1) As of End of Current Period | (2) 12/31/2020 | (3) (Col. 1 - 2) Change |
|---|---------------------------------------|-------------------|-------------------------------|
| 1. Current Income Tax | | | |
| (a) Federal | \$ (2,845,857) | \$ (682,051) | \$ (2,163,806) |
| (b) Foreign | \$ - | \$ - | \$ - |
| (c) Subtotal | \$ (2,845,857) | \$ (682,051) | \$ (2,163,806) |
| (d) Federal income tax on net capital gains | \$ - | \$ 3,564 | \$ (3,564) |
| (e) Utilization of capital loss carry-forwards | \$ - | \$ - | \$ - |
| (f) Other | \$ 3,441 | \$ 864 | \$ 2,577 |
| (g) Federal and foreign income taxes incurred | \$ (2,842,416) | \$ (677,623) | \$ (2,164,793) |
| 2. Deferred Tax Assets: | | | |
| (a) Ordinary: | | | |
| (1) Discounting of unpaid losses | \$ - | \$ - | \$ - |
| (2) Unearned premium reserve | \$ 829 | \$ 342 | \$ 487 |
| (3) Policyholder reserves | \$ 1,268,917 | \$ 2,731 | \$ 1,266,186 |
| (4) Investments | \$ - | \$ - | \$ - |
| (5) Deferred acquisition costs | \$ 358,516 | \$ 408,658 | \$ (50,142) |
| (6) Policyholder dividends accrual | \$ - | \$ - | \$ - |
| (7) Fixed Assets | \$ - | \$ - | \$ - |
| (8) Compensation and benefits accrual | \$ - | \$ - | \$ - |
| (9) Pension accrual | \$ - | \$ - | \$ - |
| (10) Receivables - nonadmitted | \$ - | \$ - | \$ - |
| (11) Net operating loss carry-forward | \$ 439,944 | \$ 456,511 | \$ (16,567) |
| (12) Tax credit carry-forward | \$ - | \$ - | \$ - |
| (13) Other (including items <5% of total ordinary tax assets) | \$ 103,961 | \$ 107,856 | \$ (3,895) |
| (99) Subtotal | \$ 2,172,167 | \$ 976,098 | \$ 1,196,069 |
| (b) Statutory valuation allowance adjustment | \$ 2,172,167 | \$ 926,502 | \$ 1,245,665 |
| (c) Nonadmitted | \$ - | \$ - | \$ - |
| (d) Admitted ordinary deferred tax assets (2a99 - 2b - 2c) | \$ - | \$ 49,596 | \$ (49,596) |
| (e) Capital: | | | |
| (1) Investments | \$ - | \$ - | \$ - |
| (2) Net capital loss carry-forward | \$ - | \$ - | \$ - |
| (3) Real estate | \$ - | \$ - | \$ - |
| (4) Other (including items <5% of total ordinary tax assets) | \$ - | \$ - | \$ - |
| (99) Subtotal | \$ - | \$ - | \$ - |
| (f) Statutory valuation allowance adjustment | \$ - | \$ - | \$ - |
| (g) Nonadmitted | \$ - | \$ - | \$ - |
| (h) Admitted capital deferred tax assets (2e99 - 2f - 2g) | \$ - | \$ - | \$ - |
| (i) Admitted deferred tax assets (2d + 2h) | \$ - | \$ 49,596 | \$ (49,596) |
| 3. Deferred Tax Liabilities: | | | |
| (a) Ordinary: | | | |
| (1) Investments | \$ - | \$ - | \$ - |
| (2) Fixed Assets | \$ - | \$ - | \$ - |
| (3) Deferred and uncollected premium | \$ - | \$ - | \$ - |
| (4) Policyholder reserves | \$ - | \$ - | \$ - |
| (5) Other (including items <5% of total ordinary tax liabilities) | \$ - | \$ 2,724 | \$ (2,724) |
| (99) Subtotal | \$ - | \$ 2,724 | \$ (2,724) |
| (b) Capital: | | | |
| (1) Investments | \$ - | \$ - | \$ - |
| (2) Real estate | \$ - | \$ - | \$ - |
| (3) Other (including items <5% of total capital tax liabilities) | \$ - | \$ - | \$ - |
| (99) Subtotal | \$ - | \$ - | \$ - |
| (c) Deferred tax liabilities (3a99 + 3b99) | \$ - | \$ 2,724 | \$ (2,724) |
| 4. Net deferred tax assets/liabilities (2i - 3c) | \$ - | \$ 46,872 | \$ (46,872) |

NOTES TO FINANCIAL STATEMENTS

- D. The provision for federal income tax benefits is different from that which would be obtained by applying the statutory federal income tax rate to income before taxes. The significant items causing this difference are as follows:

| Description | December 31, 2021 | | | December 31, 2020 | | |
|--|------------------------|-----------------------|---------------|---------------------|-------------------|----------------|
| | Amount | Tax Effect | Effective Tax | Amount | Tax Effect | Effective Tax |
| (Loss) Income before taxes | \$ (19,181,000) | \$ (4,028,000) | 21.00% | 343,000 | 72,000 | 21.0% |
| Change in valuation allowance | 5,932,000 | 1,246,000 | -6.5% | 1,633,000 | 343,000 | 100.0% |
| Permanent items | (8,000) | (2,000) | 0.0% | 10,000 | 2,000 | 0.6% |
| Change in other reserves | (5,000) | (1,000) | 0.0% | (17,000) | (4,000) | -1.0% |
| Change in nonadmitted assets | (1,000) | - | 0.0% | 11,000 | 3,000 | 0.7% |
| Other | (47,000) | (10,000) | 0.1% | 76,000 | 16,000 | 4.6% |
| | \$ (13,310,000) | \$ (2,795,000) | 14.6% | \$ 2,056,000 | \$ 432,000 | 125.9% |
| Federal income taxes incurred | | (2,842,000) | 14.8% | | (682,000) | -198.8% |
| Federal income tax on net capital gain | | - | 0.0% | | 4,000 | 1.1% |
| Change in net deferred income taxes | | 47,000 | -0.2% | | 1,110,000 | 323.6% |
| Total statutory income taxes | | | | (2,795,000) | 14.6% | 432,000 |
| | | | | | | |

- E. At December 31, 2021, the Company had net operating loss carryforwards of approximately \$2,095,000 expiring through 2022, all of which are limited by Internal Revenue Code (IRC) Section 382. The Company has no capital loss carryforwards to utilize in future years at December 31, 2021.

F. Consolidated Federal Income Tax Return

The Company's federal income tax return is consolidated with the following entities:

Medical Mutual of Ohio
 MedMutual Life Insurance Company
 Medical Health Insuring Corporation of Ohio
 Superior Dental Care, Inc.

The Company is party to a written tax sharing agreement with its Parent and other affiliates. According to the agreement each member pays taxes or receives credits (to/from the Parent) as if the member had filed a separate tax return. The payment is finalized for the tax year after the return is filed and/or after an IRS audit is completed. A member generating a taxable loss, or whose net operating losses (NOLs) or other tax attributes are utilized in the current year, or whose tax attributes are utilized, is compensated for such loss or attributes utilized in the year absorbed.

- G. The Company does not have any tax loss contingencies for which it is reasonably possible that the total liability will significantly increase within twelve months of the reporting date.

H. Repatriation Transition Tax (RTT)

Not applicable.

I. Alternative Minimum Tax (AMT) Credit

Not Applicable.

NOTE 10 Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties

A-B; The Parent provides administrative services, including billing, claims adjudication, accounting, marketing, provider relations, and management information systems to D-F. the Company in connection with an administrative services agreement. Expense allocations are reviewed periodically to ensure expenses are being appropriately charged to each affiliate, and could vary from year-to-year. In 2021 and 2020, charges to the Company for these services totaled \$1,124,000 and \$707,000, respectively. These charges could vary if the administrative services were provided by an unaffiliated vendor. Amounts payable and receivable between the Company and the Parent are settled within three months.

During 2021 and 2020, the Company provided life, accidental death and dismemberment, and long-term disability coverage to employees of the Parent and its subsidiaries. Premiums paid by the Parent to MMLIC for such coverage totaled \$2,008,000 and \$1,883,000 for 2021 and 2020, respectively.

The Parent has guaranteed that the Company will maintain the minimum capital and surplus as required by Ohio law.

The Company received a capital contribution of \$15,000,000 from the Parent in 2021. No capital contributions were received in 2020.

C: G Not Applicable.

-O.

NOTE 11 Debt

Not Applicable.

NOTE 12 Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans

Not Applicable.

NOTES TO FINANCIAL STATEMENTS

NOTE 13 Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations

- A. The Company had 50,000 shares of common stock authorized; 16,000 shares issued and outstanding. All shares have a par value of \$100.
- B. The Company has no preferred stock authorized or outstanding.
- C. The payment of dividends by the Company to MMO is limited and can only be made from earned profits unless prior approval is received from the Ohio Insurance Commissioner. The maximum amount of dividends that may be paid without prior approval of the Ohio Insurance Commissioner is also subject to restrictions relating to statutory capital and surplus and net income. There were no dividends paid by the Company in 2021 or 2020.
- D. Not Applicable.
- E. Within the limitations of (C) above, there were no restrictions placed on the portion of the Company's profits that may be paid as ordinary dividends to stockholders.
- F. There were no restrictions placed on the Company's surplus, including for whom the surplus is being held.
- G. There were no advances to surplus not repaid.
- H. Not Applicable.
- I. There were no changes in special surplus funds from the prior year end.
- J. The portion of unassigned funds (surplus) represented or reduced by cumulative unrealized gains and losses is \$ - Not Applicable.
- K. The Company issued the following surplus debentures or similar obligations: Not Applicable.
- L. The impact of any restatement due to prior quasi-reorganizations is as follows: Not Applicable.
- M. Not Applicable.

NOTE 14 Liabilities, Contingencies and Assessments

- A. Contingent Commitments
 - Not Applicable.
- B. Assessments
 - The Company is subject to regulations that may result in assessments under state insurance guaranty association laws. The Company is not
 - (1) anticipating any significant assessments as of December 31, 2021.
 - (2) Not Applicable.
 - (3) Not Applicable.
- C. Gain Contingencies
 - Not Applicable.
- D. Claims related extra contractual obligations and bad faith losses stemming from lawsuits
 - Not Applicable.
- E. Joint and Several Liabilities
 - Not Applicable.
- F. All Other Contingencies
 - Various lawsuits against the Company have arisen in the ordinary course of business. While the outcome of these matters cannot be predicted with certainty at this time, management believes they will not have a material adverse effect on the Company's financial position or results of operations.

NOTE 15 Leases

Not Applicable.

NOTE 16 Information About Financial Instruments With Off-Balance Sheet Risk and Financial Instruments With Concentrations of Credit Risk

Not Applicable.

NOTE 17 Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

Not Applicable.

NOTE 18 Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans

- A. ASO Plans:
 - The gain from operations from Administrative Services Only (ASO) uninsured plans and the uninsured portion of partially insured plans was as follows during 2021:

| | ASO Uninsured Plans | Uninsured Portion of Partially Insured Plans | Total ASO |
|---|---------------------------|---|--------------|
| a. Net reimbursement for administrative expenses (including administrative fees) in excess of actual expenses | \$ 135,066 | | \$ 135,066 |
| b. Total net other income or expenses (including interest paid to or received from plans) | | | \$ - |
| c. Net gain or (loss) from operations | \$ 135,066 | \$ - | \$ 135,066 |
| d. Total claim payment volume | \$ 1,198,513 | | \$ 1,198,513 |

- B. ASC Plans:
 - Not Applicable.

- C. Medicare or Similarly Structured Cost Based Reimbursement Contract
 - Not Applicable.

NOTE 19 Direct Premium Written/Produced by Managing General Agents/Third Party Administrators

Not Applicable.

NOTE 20 Fair Value Measurements

- A. The Company has no assets or liabilities that are reported at fair value as of December 31, 2021.
- B. Not Applicable.

NOTES TO FINANCIAL STATEMENTS

- C. Aggregate fair value for all financial instruments and the level within the fair value hierarchy in which the fair value measurements in their entirety fall.

| Type of Financial Instrument | Aggregate Fair Value | Admitted Assets | (Level 1) | (Level 2) | (Level 3) | Net Asset Value (NAV) | Not Practicable (Carrying Value) |
|------------------------------|----------------------|-----------------|-----------|---------------|-----------|-----------------------|----------------------------------|
| BONDS | \$ 28,684,808 | \$ 28,845,593 | | \$ 28,684,808 | | | |

- D. Not Practicable to Estimate Fair Value
Not Applicable.

- E. Not Applicable.

NOTE 21 Other Items

- A. Unusual or Infrequent Items
Not Applicable.

- B. Troubled Debt Restructuring: Debtors
Not Applicable.

- C. Other Disclosures

The Company is subject to certain Risk-Based Capital (RBC) requirements specified by the NAIC and required by the ODI. Under those requirements, the amount of capital and surplus maintained by the Company is determined based on various risk factors. At December 31, 2021 and 2020, the Company met the minimum RBC requirements.

- D. Business Interruption Insurance Recoveries
Not Applicable.

- E. State Transferable and Non-transferable Tax Credits
Not Applicable.

- F. Subprime Mortgage Related Risk Exposure
Not Applicable.

- G. Retained Assets
Not Applicable.

- H. Insurance-Linked Securities (ILS) Contracts
Not Applicable.

- I. The Amount That Could Be Realized on Life Insurance Where the Reporting Entity is Owner and Beneficiary or Has Otherwise Obtained Rights to Control the Policy
Not Applicable.

NOTE 22 Events Subsequent

The Company has evaluated subsequent events from the end of the most recent fiscal year through February 28, 2022, the date the statutory financial statements were available to be issued, and determined that there have been no events that have occurred that would require adjustments to our disclosures in the financial statements.

NOTE 23 Reinsurance

- A. Ceded Reinsurance Report

Certain premiums and benefits are ceded to other insurance companies under various reinsurance agreements. The ceded reinsurance agreements provide the Company with increased capacity to write larger risks and maintain its exposure to loss within its capital resources. The Company remains obligated for amounts ceded in the event that the reinsurers do not meet their obligations.

The effects of reinsurance on earned life premiums are as follows:

| | Year Ended December 31 | |
|--------------------------------|------------------------|---------------------|
| | 2021 | 2020 |
| Direct life insurance premiums | \$38,352,000 | \$29,659,000 |
| Ceded life insurance premiums | 5,614,000 | 3,164,000 |
| Net life insurance premiums | <u>\$32,738,000</u> | <u>\$26,495,000</u> |

The effects of reinsurance on earned accident and health premiums are as follows:

| | Year Ended December 31 | |
|---|------------------------|--------------------|
| | 2021 | 2020 |
| Direct accident and health insurance premiums | \$10,461,000 | \$8,055,000 |
| Ceded accident and health insurance premiums | 3,314,000 | 3,363,000 |
| Net accident and health insurance premiums | <u>\$7,147,000</u> | <u>\$4,692,000</u> |

Differences between written and earned premiums subject to reinsurance are not significant.

The Company's ceded reinsurance arrangements reduced certain other items in the accompanying statutory financial statements by the following amounts:

| | Year Ended December 31 | |
|--|------------------------|-------------|
| | 2021 | 2020 |
| Benefit expenses | \$6,583,000 | \$3,755,000 |
| Aggregate reserves and contract claim reserves | 11,501,000 | \$9,980,000 |

- B. Uncollectible Reinsurance
Not Applicable.

- C. Commutation of Reinsurance Reflected in Income and Expenses.
Not Applicable.

NOTES TO FINANCIAL STATEMENTS

- D. Certified Reinsurer Rating Downgraded or Status Subject to Revocation
Not Applicable.
- E. Not Applicable.
- F. Not Applicable.
- G. Ceding Entities That Utilize Captive Reinsurers to Assume Reserves Subject to the XXX/ AXXX Captive Framework
Not Applicable.
- H. Reinsurance Credit
The Company cedes life claims in accordance with an excess of loss reinsurance contract, which has an aggregate limit. In addition, the Company cedes all of the risk for accidental death and dismemberment and long-term disability coverage.

NOTE 24 Retrospectively Rated Contracts & Contracts Subject to Redetermination

- A. Not Applicable.
- B. Not Applicable.
- C. Not Applicable.
- D. Medical loss ratio rebates required pursuant to the Public Health Service Act.
At December 31, 2021 and 2020, no liability was recognized on the accompanying statutory statements of admitted assets, liabilities, and capital and surplus as the calculated amounts exceeded the applicable thresholds.
- E. Risk Sharing Provisions of the Affordable Care Act
Not Applicable.

NOTE 25 Change in Incurred Losses and Loss Adjustment Expenses

A \$155,000 redundancy in the December 31, 2020, reserves emerged in 2021 and a \$1,051,000 redundancy in the December 31, 2019, reserves emerged in 2020. The deviations in the year end reserves that emerged in 2021 and 2020 were due in part to the ultimate reserves developing differently as a result of lower than estimated claims.

NOTE 26 Intercompany Pooling Arrangements

Not Applicable.

NOTE 27 Structured Settlements

Not Applicable.

NOTE 28 Health Care Receivables

Not Applicable.

NOTE 29 Participating Policies

Not Applicable.

NOTE 30 Premium Deficiency Reserves

Aggregate health policy reserves include premium deficiency reserves. Premium deficiency reserves related to life policies at December 31, 2021 total \$5,383,000. There were no premium deficiency reserves related to Life policies at December 31, 2020. Premium deficiency reserves related to Disability policies at December 31, 2021 total \$640,000. There were no premium deficiency reserves related to disability policies at December 31, 2020.

| | |
|---|----------------|
| 1. Liability carried for premium deficiency reserves | \$ 6,023,000 |
| 2. Date of the most recent evaluation of this liability | 12/31/2021 |
| 3. Was anticipated investment income utilized in the calculation? | Yes [X] No [] |

NOTE 31 Reserves for Life Contracts and Annuity Contracts

(1) Aggregate reserves include future policy benefit reserves for disability policies which are required on claims involving continuing losses. The reserve is a measure of the present value of future benefits or amount not yet due as of the statement date.

Aggregate reserves also include active life reserves for accident and health insurance policies. Active life reserves are based on the net level premium method, and estimates of future premium, claims, and lapses using the Company's experience and actuarial judgment.

The liabilities for contract claims represent management's best estimate of the ultimate net cost of all reported and unreported accident and health and life claims, less the estimated amount recoverable from claim overpayments and subrogation. The liabilities are actuarially estimated based on a review of historical claim payment patterns and claim trends. The estimates are subject to the effects of trends in claim severity and frequency, and a reasonable provision for adverse development has been incorporated in management's best estimate. Although considerable variability is inherent in such estimates, management believes that the amounts reported are adequate. The estimates are continually reviewed and adjusted as necessary as experience develops or new information becomes known; such adjustments are included in current operations.

- (2) Not Applicable.
- (3) Not Applicable.
- (4) Not Applicable.
- (5) Not Applicable.
- (6) The details for other changes:
Not Applicable.

NOTE 32 Analysis of Annuity Actuarial Reserves and Deposit Type Contract Liabilities by Withdrawal Characteristics

Not Applicable.

NOTES TO FINANCIAL STATEMENTS

NOTE 33 Analysis of Life Actuarial Reserves by Withdrawal Characteristics

The Company has reserves on its life insurance policies of \$201,000 and \$809,000 for life insurance and disability, respectively, at December 31, 2021 and on its life insurance policies of \$173,000 and \$806,000 for life insurance and disability, respectively, at December 31, 2020 included in aggregate reserves in the statutory statements of admitted assets, liabilities, and capital and surplus. See below for the breakout by applicable life insurance categories.

| | Account Value | Cash Value | Reserve |
|--|---------------|------------|--------------|
| A. General Account | | | |
| (1) Subject to discretionary withdrawal, surrender values or policy loans: | | | |
| a. Term Policies with Cash Value | \$ - | \$ - | \$ - |
| b. Universal Life | \$ - | \$ - | \$ - |
| c. Universal Life with Secondary Guarantees | \$ - | \$ - | \$ - |
| d. Indexed Universal Life | \$ - | \$ - | \$ - |
| e. Indexed Universal Life with Secondary Guarantees | \$ - | \$ - | \$ - |
| f. Indexed Life | \$ - | \$ - | \$ - |
| g. Other Permanent Cash Value Life Insurance | \$ - | \$ 146,000 | \$ 178,000 |
| h. Variable Life | \$ - | \$ - | \$ - |
| i. Variable Universal Life | \$ - | \$ - | \$ - |
| j. Miscellaneous Reserves | \$ - | \$ - | \$ - |
| (2) Not subject to discretionary withdrawal or no cash values: | | | |
| a. Term Policies without Cash Value | XXX | XXX | \$ 23,000 |
| b. Accidental Death Benefits | XXX | XXX | \$ - |
| c. Disability - Active Lives | XXX | XXX | \$ - |
| d. Disability - Disabled Lives | XXX | XXX | \$ 839,000 |
| e. Miscellaneous Reserves | XXX | XXX | \$ - |
| (3) Total (gross: direct + assumed) | \$ - | \$ 146,000 | \$ 1,040,000 |
| (4) Reinsurance ceded | \$ - | \$ - | \$ 30,000 |
| (5) Total (net) (3) - (4) | \$ - | \$ 146,000 | \$ 1,010,000 |
| B. Separate Account with Guarantees | | | |
| Not Applicable. | | | |
| C. Separate Account Nonguaranteed | | | |
| Not Applicable. | | | |
| D. Life & Accident & Health Annual Statement: | | Amount | |
| (1) Exhibit 5, Life Insurance Section, Total (net) | \$ 200,500 | | |
| (2) Exhibit 5, Accidental Death Benefits Section, Total (net) | \$ - | | |
| (3) Exhibit 5, Disability - Active Lives Section, Total (net) | \$ - | | |
| (4) Exhibit 5, Disability - Disabled Lives Section, Total (net) | \$ 809,000 | | |
| (5) Exhibit 5, Miscellaneous reserves Section, Total (net) | \$ 5,383,000 | | |
| (6) Subtotal | \$ 6,392,500 | | |
| Separate Accounts Statement | | | |
| (7) Exhibit 3, Line 0199999, Column 2 | \$ - | | |
| (8) Exhibit 3, Line 0499999, Column 2 | \$ - | | |
| (9) Exhibit 3, Line 0599999, Column 2 | \$ - | | |
| (10) Subtotal (Lines 7) through (9)) | \$ - | | |
| (11) Combined Total (6) and (10)) | \$ 6,392,500 | | |

NOTE 34 Premium & Annuity Considerations Deferred and Uncollected

A. Deferred and uncollected life insurance premiums and annuity considerations as of the end of current period, were as follows:

| | Type | Gross | Net of Loading |
|---------------------------|------------|------------|----------------|
| (1) Industrial | | | |
| (2) Ordinary new business | | | |
| (3) Ordinary renewal | \$ 205 | \$ 161 | |
| (4) Credit Life | | | |
| (5) Group Life | \$ 609,985 | \$ 480,058 | |
| (6) Group Annuity | | | |
| (7) Totals | \$ 610,190 | \$ 480,219 | |

NOTES TO FINANCIAL STATEMENTS

NOTE 35 Separate Accounts

Not Applicable.

NOTE 36 Loss/Claim Adjustment Expenses

The following table provides a reconciliation of the beginning and ending balances for reserves for contract claims and claims adjustment expenses (CAE), net of recoveries, reinsurance and health care receivables.

| | Years Ended December 31 | |
|---|-------------------------|--------------------|
| | 2021 | 2020 |
| Unpaid claims and CAE | \$7,301,000 | \$5,356,000 |
| Reinsurance recoverable, net | (292,000) | (102,000) |
| Healthcare receivables | (3,000) | 0 |
| Reserve for contract claims and CAE at beginning of year, net of recoveries and reinsurance | 7,006,000 | 5,254,000 |
| Add provision for benefits and CAE, net of reinsurance, occurring in: | | |
| Current year | 46,171,000 | 26,473,000 |
| Prior years | (155,000) | (1,051,000) |
| Net benefit expenses and CAE during the current year | <u>46,016,000</u> | <u>25,422,000</u> |
| Deduct payments for benefits and CAE, net of reinsurance, occurring in: | | |
| Current year | 33,662,000 | 20,405,000 |
| Prior years | 5,174,000 | 3,265,000 |
| Net benefits and CAE payments during the current year | <u>38,836,000</u> | <u>23,670,000</u> |
| Reserve for contract claims and CAE at end of year, net of recoverables and reinsurance | \$14,186,000 | \$7,006,000 |
| Reinsurance recoverable, net | 710,000 | 292,000 |
| Healthcare receivables | 8,000 | 3,000 |
| Contract claims and CAE | <u>\$14,904,000</u> | <u>\$7,301,000</u> |

At December 31, 2021 and 2020, health care receivables include \$8,000 and \$3,000, respectively, that are nonadmitted in accordance with SSAAP No. 84, Certain Health Care Receivables and Receivables Under Government Insured Plans.

The reserves for contract claims and CAE at December 31, 2020, has been reduced by \$4,000 related to anticipated subrogation claims recoverable. There was no anticipated subrogation claims recoverable at December 2021.

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MedMutual Life Insurance Company
GENERAL INTERROGATORIES

**PART 1 - COMMON INTERROGATORIES
 GENERAL**

| 1.1 | Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? | Yes [<input checked="" type="checkbox"/>] No [<input type="checkbox"/>] | | | | | | | | | |
|--|--|--|---------------------|------------------------|------------------------|-------|-------|-------|-------|-------|-------|
| | If yes, complete Schedule Y, Parts 1, 1A, 2 and 3. | | | | | | | | | | |
| 1.2 | If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent, or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations? | Yes [<input checked="" type="checkbox"/>] No [<input type="checkbox"/>] N/A [<input type="checkbox"/>] | | | | | | | | | |
| 1.3 | State Regulating? | Ohio | | | | | | | | | |
| 1.4 | Is the reporting entity publicly traded or a member of a publicly traded group? | Yes [<input type="checkbox"/>] No [<input checked="" type="checkbox"/>] | | | | | | | | | |
| 1.5 | If the response to 1.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group. | | | | | | | | | | |
| 2.1 | Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? | Yes [<input type="checkbox"/>] No [<input checked="" type="checkbox"/>] | | | | | | | | | |
| 2.2 | If yes, date of change: | | | | | | | | | | |
| 3.1 | State as of what date the latest financial examination of the reporting entity was made or is being made. | 12/31/2019 | | | | | | | | | |
| 3.2 | State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. | 12/31/2019 | | | | | | | | | |
| 3.3 | State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). | 10/27/2020 | | | | | | | | | |
| 3.4 | By what department or departments? | | | | | | | | | | |
| | Ohio Department of Insurance | | | | | | | | | | |
| 3.5 | Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? | Yes [<input type="checkbox"/>] No [<input type="checkbox"/>] N/A [<input checked="" type="checkbox"/>] | | | | | | | | | |
| 3.6 | Have all of the recommendations within the latest financial examination report been complied with? | Yes [<input type="checkbox"/>] No [<input type="checkbox"/>] N/A [<input checked="" type="checkbox"/>] | | | | | | | | | |
| 4.1 | During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity), receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of: | | | | | | | | | | |
| | 4.11 sales of new business? | Yes [<input checked="" type="checkbox"/>] No [<input type="checkbox"/>] | | | | | | | | | |
| | 4.12 renewals? | Yes [<input checked="" type="checkbox"/>] No [<input type="checkbox"/>] | | | | | | | | | |
| 4.2 | During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of: | | | | | | | | | | |
| | 4.21 sales of new business? | Yes [<input type="checkbox"/>] No [<input checked="" type="checkbox"/>] | | | | | | | | | |
| | 4.22 renewals? | Yes [<input type="checkbox"/>] No [<input checked="" type="checkbox"/>] | | | | | | | | | |
| 5.1 | Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? | Yes [<input type="checkbox"/>] No [<input checked="" type="checkbox"/>] | | | | | | | | | |
| | If yes, complete and file the merger history data file with the NAIC. | | | | | | | | | | |
| 5.2 | If yes, provide the name of the entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation. | | | | | | | | | | |
| <table border="1"> <thead> <tr> <th>1 Name of Entity</th> <th>2 NAIC Company Code</th> <th>3 State of Domicile</th> </tr> </thead> <tbody> <tr> <td>.....</td> <td>.....</td> <td>.....</td> </tr> <tr> <td>.....</td> <td>.....</td> <td>.....</td> </tr> </tbody> </table> | | | 1 Name of Entity | 2 NAIC Company Code | 3 State of Domicile | | | | | | |
| 1 Name of Entity | 2 NAIC Company Code | 3 State of Domicile | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| 6.1 | Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? | Yes [<input type="checkbox"/>] No [<input checked="" type="checkbox"/>] | | | | | | | | | |
| 6.2 | If yes, give full information: | | | | | | | | | | |
| 7.1 | Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity? | Yes [<input type="checkbox"/>] No [<input checked="" type="checkbox"/>] | | | | | | | | | |
| 7.2 | If yes, | | | | | | | | | | |
| | 7.21 State the percentage of foreign control: | % | | | | | | | | | |
| | 7.22 State the nationality(s) of the foreign person(s) or entity(s) or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact; and identify the type of entity(s) (e.g., individual, corporation or government, manager or attorney in fact). | | | | | | | | | | |
| <table border="1"> <thead> <tr> <th>1 Nationality</th> <th>2 Type of Entity</th> </tr> </thead> <tbody> <tr> <td>.....</td> <td>.....</td> </tr> <tr> <td>.....</td> <td>.....</td> </tr> </tbody> </table> | | | 1 Nationality | 2 Type of Entity | | | | | | | |
| 1 Nationality | 2 Type of Entity | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MedMutual Life Insurance Company
GENERAL INTERROGATORIES

8.1 Is the company a subsidiary of a depository institution holding company (DIHC) or a DIHC itself, regulated by the Federal Reserve Board? Yes [] No [X]

8.2 If the response to 8.1 is yes, please identify the name of the DIHC.

8.3 Is the company affiliated with one or more banks, thrifts or securities firms? Yes [] No [X]

8.4 If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.

| 1 Affiliate Name | 2 Location (City, State) | 3 FRB | 4 OCC | 5 FDIC | 6 SEC |
|---------------------|-----------------------------|----------|----------|-----------|----------|
| | | | | | |
| | | | | | |
| | | | | | |

8.5 Is the reporting entity a depository institution holding company with significant insurance operations as defined by the Board of Governors of Federal Reserve System or a subsidiary of the reporting entity? Yes [] No [X]

8.6 If response to 8.5 is no, is the reporting entity a company or subsidiary of a company that has otherwise been made subject to the Federal Reserve Board's capital rule? Yes [] No [X] N/A []

9. What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?

PricewaterhouseCoopers, LLC, 200 Public Square, 18th Floor, Cleveland, OH 44114

10.1 Has the insurer been granted any exemptions to the prohibited non-audit services provided by the certified independent public accountant requirements as allowed in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Rule), or substantially similar state law or regulation? Yes [] No [X]

10.2 If the response to 10.1 is yes, provide information related to this exemption:

10.3 Has the insurer been granted any exemptions related to the other requirements of the Annual Financial Reporting Model Regulation as allowed for in Section 18A of the Model Regulation, or substantially similar state law or regulation? Yes [] No [X]

10.4 If the response to 10.3 is yes, provide information related to this exemption:

10.5 Has the reporting entity established an Audit Committee in compliance with the domiciliary state insurance laws? Yes [X] No [] N/A []

10.6 If the response to 10.5 is no or n/a, please explain

11. What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification?

Mr. Derek Skoog, FSA, MAAA, PricewaterhouseCoopers, LLC, One North Wacker Drive, Chicago, IL 60606

12.1 Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly? Yes [] No [X]

12.11 Name of real estate holding company

12.12 Number of parcels involved

12.13 Total book/adjusted carrying value

\$

12.2 If, yes provide explanation:

13. FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:

13.1 What changes have been made during the year in the United States manager or the United States trustees of the reporting entity?

13.2 Does this statement contain all business transacted for the reporting entity through its United States Branch on risks wherever located? Yes [] No []

Yes [] No []

13.3 Have there been any changes made to any of the trust indentures during the year? Yes [] No []

Yes [] No []

13.4 If answer to (13.3) is yes, has the domiciliary or entry state approved the changes? Yes [] No [] N/A []

Yes [X] No []

14.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? Yes [] No [] N/A []

Yes [X] No []

a. Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;

b. Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;

c. Compliance with applicable governmental laws, rules and regulations;

d. The prompt internal reporting of violations to an appropriate person or persons identified in the code; and

e. Accountability for adherence to the code.

14.11 If the response to 14.1 is No, please explain:

14.2 Has the code of ethics for senior managers been amended? Yes [] No [X]

14.21 If the response to 14.2 is yes, provide information related to amendment(s).

14.3 Have any provisions of the code of ethics been waived for any of the specified officers? Yes [] No [X]

14.31 If the response to 14.3 is yes, provide the nature of any waiver(s).

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MedMutual Life Insurance Company
GENERAL INTERROGATORIES

- 15.1 Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance where the issuing or confirming bank is not on the SVO Bank List? Yes [] No [X]
- 15.2 If the response to 15.1 is yes, indicate the American Bankers Association (ABA) Routing Number and the name of the issuing or confirming bank of the Letter of Credit and describe the circumstances in which the Letter of Credit is triggered.

| 1 American Bankers Association (ABA) Routing Number | 2 Issuing or Confirming Bank Name | 3 Circumstances That Can Trigger the Letter of Credit | 4 Amount |
|--|--------------------------------------|--|-------------|
| | | | |
| | | | |

BOARD OF DIRECTORS

16. Is the purchase or sale of all investments of the reporting entity passed upon either by the board of directors or a subordinate committee thereof? Yes [X] No []
17. Does the reporting entity keep a complete permanent record of the proceedings of its board of directors and all subordinate committees thereof? Yes [X] No []
18. Has the reporting entity an established procedure for disclosure to its board of directors or trustees of any material interest or affiliation on the part of any of its officers, directors, trustees or responsible employees that is in conflict with the official duties of such person? Yes [X] No []

FINANCIAL

19. Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g., Generally Accepted Accounting Principles)? Yes [] No [X]
- 20.1 Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans):
- | | |
|---|----------|
| 20.11 To directors or other officers..... | \$ |
| 20.12 To stockholders not officers..... | \$ |
| 20.13 Trustees, supreme or grand (Fraternal Only)..... | \$ |
- 20.2 Total amount of loans outstanding at the end of year (inclusive of Separate Accounts, exclusive of policy loans):
- | | |
|---|----------|
| 20.21 To directors or other officers..... | \$ |
| 20.22 To stockholders not officers..... | \$ |
| 20.23 Trustees, supreme or grand (Fraternal Only)..... | \$ |
- 21.1 Were any assets reported in this statement subject to a contractual obligation to transfer to another party without the liability for such obligation being reported in the statement? Yes [] No [X]
- 21.2 If yes, state the amount thereof at December 31 of the current year:
- | | |
|---------------------------------|----------|
| 21.21 Rented from others..... | \$ |
| 21.22 Borrowed from others..... | \$ |
| 21.23 Leased from others..... | \$ |
| 21.24 Other | \$ |
- 22.1 Does this statement include payments for assessments as described in the Annual Statement Instructions other than guaranty fund or guaranty association assessments? Yes [] No [X]
- 22.2 If answer is yes:
- | | |
|---|----------|
| 22.21 Amount paid as losses or risk adjustment \$ | |
| 22.22 Amount paid as expenses | \$ |
| 22.23 Other amounts paid | \$ |
- 23.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? Yes [X] No []
- 23.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: \$ 4,021,292
- 24.1 Does the insurer utilize third parties to pay agent commissions in which the amounts advanced by the third parties are not settled in full within 90 days? Yes [] No [X]
- 24.2 If the response to 24.1 is yes, identify the third-party that pays the agents and whether they are a related party.

| Name of Third-Party | Is the Third-Party Agent a Related Party (Yes/No) |
|---------------------|--|
| | |
| | |

INVESTMENT

- 25.01 Were all the stocks, bonds and other securities owned December 31 of current year, over which the reporting entity has exclusive control, in the actual possession of the reporting entity on said date? (other than securities lending programs addressed in 25.03)..... Yes [X] No []

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MedMutual Life Insurance Company
GENERAL INTERROGATORIES

25.02 If no, give full and complete information relating thereto

.....
 25.03 For securities lending programs, provide a description of the program including value for collateral and amount of loaned securities, and whether collateral is carried on or off-balance sheet. (an alternative is to reference Note 17 where this information is also provided)

.....
 25.04 For the reporting entity's securities lending program, report amount of collateral for conforming programs as outlined in the Risk-Based Capital Instructions. \$ 0

.....
 25.05 For the reporting entity's securities lending program, report amount of collateral for other programs. \$ 0

.....
 25.06 Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract? Yes [] No [] N/A [X]

.....
 25.07 Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%? Yes [] No [] N/A [X]

.....
 25.08 Does the reporting entity or the reporting entity's securities lending agent utilize the Master Securities lending Agreement (MSLA) to conduct securities lending? Yes [] No [] N/A [X]

.....
 25.09 For the reporting entity's securities lending program state the amount of the following as of December 31 of the current year:

.....
 25.091 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2. \$ 0
 25.092 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2. \$ 0
 25.093 Total payable for securities lending reported on the liability page. \$ 0

.....
 26.1 Were any of the stocks, bonds or other assets of the reporting entity owned at December 31 of the current year not exclusively under the control of the reporting entity, or has the reporting entity sold or transferred any assets subject to a put option contract that is currently in force? (Exclude securities subject to Interrogatory 21.1 and 25.03). Yes [X] No []

.....
 26.2 If yes, state the amount thereof at December 31 of the current year:

 26.21 Subject to repurchase agreements \$
 26.22 Subject to reverse repurchase agreements \$
 26.23 Subject to dollar repurchase agreements \$
 26.24 Subject to reverse dollar repurchase agreements \$
 26.25 Placed under option agreements \$
 26.26 Letter stock or securities restricted as to sale - excluding FHLB Capital Stock \$
 26.27 FHLB Capital Stock \$
 26.28 On deposit with states \$ 2,344,823
 26.29 On deposit with other regulatory bodies \$
 26.30 Pledged as collateral - excluding collateral pledged to an FHLB \$
 26.31 Pledged as collateral to FHLB - including assets backing funding agreements \$
 26.32 Other \$

.....
 26.3 For category (26.26) provide the following:

| 1 Nature of Restriction | 2 Description | 3 Amount |
|----------------------------|------------------|-------------|
| | | |
| | | |

.....
 27.1 Does the reporting entity have any hedging transactions reported on Schedule DB? Yes [] No [X]

.....
 27.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes [] No [] N/A [X]
 If no, attach a description with this statement.

LINES 27.3 through 27.5: FOR LIFE/FRATERNAL REPORTING ENTITIES ONLY:

.....
 27.3 Does the reporting entity utilize derivatives to hedge variable annuity guarantees subject to fluctuations as a result of interest rate sensitivity? Yes [] No [X]

.....
 27.4 If the response to 27.3 is YES, does the reporting entity utilize:

 27.41 Special accounting provision of SSAP No. 108 Yes [] No []
 27.42 Permitted accounting practice Yes [] No []
 27.43 Other accounting guidance Yes [] No []

.....
 27.5 By responding YES to 27.41 regarding utilizing the special accounting provisions of SSAP No. 108, the reporting entity attests to the following: Yes [] No []

- The reporting entity has obtained explicit approval from the domiciliary state.
- Hedging strategy subject to the special accounting provisions is consistent with the requirements of VM-21.
- Actuarial certification has been obtained which indicates that the hedging strategy is incorporated within the establishment of VM-21 reserves and provides the impact of the hedging strategy within the Actuarial Guideline Conditional Tail Expectation Amount.
- Financial Officer Certification has been obtained which indicates that the hedging strategy meets the definition of a Clearly Defined Hedging Strategy within VM-21 and that the Clearly Defined Hedging Strategy is the hedging strategy being used by the company in its actual day-to-day risk mitigation efforts.

.....
 28.1 Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into equity, or, at the option of the issuer, convertible into equity? Yes [] No [X]

.....
 28.2 If yes, state the amount thereof at December 31 of the current year. \$

.....
 29. Excluding items in Schedule E - Part 3 - Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook? Yes [X] No []

.....
 29.01 For agreements that comply with the requirements of the NAIC Financial Condition Examiners Handbook, complete the following:

| 1 Name of Custodian(s) | 2 Custodian's Address |
|---------------------------|---|
| FIFTH THIRD BANK | 5050 KINGSLEY DRIVE, CINCINNATI, OHIO 45263 |

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MedMutual Life Insurance Company
GENERAL INTERROGATORIES

- 29.02 For all agreements that do not comply with the requirements of the NAIC Financial Condition Examiners Handbook, provide the name, location and a complete explanation:

| 1 Name(s) | 2 Location(s) | 3 Complete Explanation(s) |
|--------------|------------------|------------------------------|
| | | |
| | | |

- 29.03 Have there been any changes, including name changes, in the custodian(s) identified in 29.01 during the current year?..... Yes [] No [X]

- 29.04 If yes, give full and complete information relating thereto:

| 1 Old Custodian | 2 New Custodian | 3 Date of Change | 4 Reason |
|--------------------|--------------------|---------------------|-------------|
| | | | |
| | | | |

- 29.05 Investment management – Identify all investment advisors, investment managers, broker/dealers, including individuals that have the authority to make investment decisions on behalf of the reporting entity. For assets that are managed internally by employees of the reporting entity, note as such. ["...that have access to the investment accounts"; "...handle securities"]

| 1 Name of Firm or Individual | 2 Affiliation |
|---------------------------------|------------------|
| JAMES CELLURA | I..... |
| | |

29.0597 For those firms/individuals listed in the table for Question 29.05, do any firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") manage more than 10% of the reporting entity's invested assets?..... Yes [] No [X]

29.0598 For firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") listed in the table for Question 29.05, does the total assets under management aggregate to more than 50% of the reporting entity's invested assets?..... Yes [] No [X]

- 29.06 For those firms or individuals listed in the table for 29.05 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table below.

| 1 Central Registration Depository Number | 2 Name of Firm or Individual | 3 Legal Entity Identifier (LEI) | 4 Registered With | 5 Investment Management Agreement (IMA) Filed |
|--|---------------------------------|------------------------------------|----------------------|---|
| | | | | |
| | | | | |

- 30.1 Does the reporting entity have any diversified mutual funds reported in Schedule D, Part 2 (diversified according to the Securities and Exchange Commission (SEC) in the Investment Company Act of 1940 [Section 5(b)(1)])?..... Yes [] No [X]

- 30.2 If yes, complete the following schedule:

| 1 CUSIP # | 2 Name of Mutual Fund | 3 Book/Adjusted Carrying Value |
|-----------------|--------------------------|--------------------------------------|
| | | |
| 30.2999 - Total | | 0 |

- 30.3 For each mutual fund listed in the table above, complete the following schedule:

| 1 Name of Mutual Fund (from above table) | 2 Name of Significant Holding of the Mutual Fund | 3 Amount of Mutual Fund's Book/Adjusted Carrying Value Attributable to the Holding | 4 Date of Valuation |
|---|--|---|---------------------------|
| | | | |
| | | | |

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MedMutual Life Insurance Company
GENERAL INTERROGATORIES

31. Provide the following information for all short-term and long-term bonds and all preferred stocks. Do not substitute amortized value or statement value for fair value.

| | 1 Statement (Admitted) Value | 2 Fair Value | 3 Excess of Statement over Fair Value (-), or Fair Value over Statement (+) |
|-----------------------------|------------------------------------|-----------------|---|
| 31.1 Bonds | 28,845,593 | 28,684,808 | (160,785) |
| 31.2 Preferred stocks | 0 | 0 | 0 |
| 31.3 Totals | 28,845,593 | 28,684,808 | (160,785) |

- 31.4 Describe the sources or methods utilized in determining the fair values:

The fair value of our securities was determined by utilizing prices obtained from our custodian, Fifth Third Bank. Fifth Third utilizes ICE Data Services for their pricing.

- 32.1 Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D? Yes [X] No []

- 32.2 If the answer to 32.1 is yes, does the reporting entity have a copy of the broker's or custodian's pricing policy (hard copy or electronic copy) for all brokers or custodians used as a pricing source? Yes [X] No []

- 32.3 If the answer to 32.2 is no, describe the reporting entity's process for determining a reliable pricing source for purposes of disclosure of fair value for Schedule D:
.....

- 33.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed? Yes [X] No []

- 33.2 If no, list exceptions:
.....

34. By self-designating 5GI securities, the reporting entity is certifying the following elements of each self-designated 5GI security:

- a. Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available.
- b. Issuer or obligor is current on all contracted interest and principal payments.
- c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal.

Has the reporting entity self-designated 5GI securities? Yes [] No [X]

35. By self-designating PLGI securities, the reporting entity is certifying the following elements of each self-designated PLGI security:

- a. The security was purchased prior to January 1, 2018.
- b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
- c. The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as a NRSRO which is shown on a current private letter rating held by the insurer and available for examination by state insurance regulators.
- d. The reporting entity is not permitted to share this credit rating of the PL security with the SVO.

Has the reporting entity self-designated PLGI securities? Yes [] No [X]

36. By assigning FE to a Schedule BA non-registered private fund, the reporting entity is certifying the following elements of each self-designated FE fund:

- a. The shares were purchased prior to January 1, 2019.
- b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
- c. The security had a public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO prior to January 1, 2019.
- d. The fund only or predominantly holds bonds in its portfolio.
- e. The current reported NAIC Designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO.
- f. The public credit rating(s) with annual surveillance assigned by an NAIC CRP has not lapsed.

Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria? Yes [] No [X]

37. By rolling/renewing short-term or cash equivalent investments with continued reporting on Schedule DA, Part 1 or Schedule E Part 2 (identified through a code (%) in those investment schedules), the reporting entity is certifying to the following:

- a. The investment is a liquid asset that can be terminated by the reporting entity on the current maturity date.
- b. If the investment is with a nonrelated party or nonaffiliate, then it reflects an arms-length transaction with renewal completed at the discretion of all involved parties.
- c. If the investment is with a related party or affiliate, then the reporting entity has completed robust re-underwriting of the transaction for which documentation is available for regulator review.
- d. Short-term and cash equivalent investments that have been renewed/rolled from the prior period that do not meet the criteria in 37.a - 37.c are reported as long-term investments.

Has the reporting entity rolled/renewed short-term or cash equivalent investments in accordance with these criteria? Yes [] No [] N/A [X]

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MedMutual Life Insurance Company
GENERAL INTERROGATORIES

OTHER

38.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any?\$4,840

38.2 List the name of the organization and the amount paid if any such payment represented 25% or more of the total payments to trade associations, service organizations and statistical or rating bureaus during the period covered by this statement.

| 1 Name | 2 Amount Paid |
|----------------------|------------------|
| LL GLOBAL, INC. |4,310 |
| | |

39.1 Amount of payments for legal expenses, if any?\$

39.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payments for legal expenses during the period covered by this statement.

| 1 Name | 2 Amount Paid |
|-----------|------------------|
| | |
| | |

40.1 Amount of payments for expenditures in connection with matters before legislative bodies, officers or departments of government, if any?\$

40.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payment expenditures in connection with matters before legislative bodies, officers or departments of government during the period covered by this statement.

| 1 Name | 2 Amount Paid |
|-----------|------------------|
| | |
| | |

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MedMutual Life Insurance Company
GENERAL INTERROGATORIES

PART 2 - LIFE, ACCIDENT AND HEALTH COMPANIES/FRATERNAL BENEFIT SOCIETIES INTERROGATORIES

Life, Accident and Health Companies/Fraternal Benefit Societies:

- 1.1 Does the reporting entity have any direct Medicare Supplement Insurance in force? Yes [] No []
- 1.2 If yes, indicate premium earned on U.S. business only \$ 590,126
- 1.3 What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit? \$
 1.31 Reason for excluding:

 1.4 Indicate amount of earned premium attributable to Canadian and/or Other Alien not included in Item (1.2) above. \$
- 1.5 Indicate total incurred claims on all Medicare Supplement insurance. \$ 404,878
- 1.6 Individual policies:
 Most current three years:
 1.61 Total premium earned \$ 0
 1.62 Total incurred claims \$ 0
 1.63 Number of covered lives 0
- All years prior to most current three years
 1.64 Total premium earned \$ 590,126
 1.65 Total incurred claims \$ 404,878
 1.66 Number of covered lives 171
- 1.7 Group policies:
 Most current three years:
 1.71 Total premium earned \$ 0
 1.72 Total incurred claims \$ 0
 1.73 Number of covered lives 0
- All years prior to most current three years
 1.74 Total premium earned \$ 0
 1.75 Total incurred claims \$ 0
 1.76 Number of covered lives 0
2. Health Test:
- | | 1 | 2 |
|-----------------------------|--------------|------------|
| | Current Year | Prior Year |
| 2.1 Premium Numerator | 590,129 | 573,943 |
| 2.2 Premium Denominator | 39,885,342 | 31,187,044 |
| 2.3 Premium Ratio (2.1/2.2) | 0.015 | 0.018 |
| 2.4 Reserve Numerator | 40,000 | 36,250 |
| 2.5 Reserve Denominator | 16,981,835 | 8,888,190 |
| 2.6 Reserve Ratio (2.4/2.5) | 0.002 | 0.004 |
- 3.1 Does this reporting entity have Separate Accounts? Yes [] No []
- 3.2 If yes, has a Separate Accounts Statement been filed with this Department? Yes [] No [] N/A []
- 3.3 What portion of capital and surplus funds of the reporting entity covered by assets in the Separate Accounts statement, is not currently distributable from the Separate Accounts to the general account for use by the general account? \$
- 3.4 State the authority under which Separate Accounts are maintained:

 3.5 Was any of the reporting entity's Separate Accounts business reinsured as of December 31? Yes [] No []
- 3.6 Has the reporting entity assumed by reinsurance any Separate Accounts business as of December 31? Yes [] No []
- 3.7 If the reporting entity has assumed Separate Accounts business, how much, if any, reinsurance assumed receivable for reinsurance of Separate Accounts reserve expense allowances is included as a negative amount in the liability for "Transfers to Separate Accounts due or accrued (net)"? \$
4. For reporting entities having sold annuities to another insurer where the insurer purchasing the annuities has obtained a release of liability from the claimant (payee) as the result of the purchase of an annuity from the reporting entity only:
- 4.1 Amount of loss reserves established by these annuities during the current year: \$
- 4.2 List the name and location of the insurance company purchasing the annuities and the statement value on the purchase date of the annuities.

| 1 | 2 |
|------------------------------------|--|
| P&C Insurance Company And Location | Statement Value on Purchase Date of Annuities (i.e., Present Value) |
| | |
| | |

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MedMutual Life Insurance Company
GENERAL INTERROGATORIES

PART 2 - LIFE, ACCIDENT AND HEALTH COMPANIES/FRATERNAL BENEFIT SOCIETIES INTERROGATORIES

- 5.1 Do you act as a custodian for health savings accounts? Yes [] No [X]
- 5.2 If yes, please provide the amount of custodial funds held as of the reporting date. \$
- 5.3 Do you act as an administrator for health savings accounts? Yes [] No [X]
- 5.4 If yes, please provide the balance of funds administered as of the reporting date. \$
- 6.1 Are any of the captive affiliates reported on Schedule S, Part 3, authorized reinsurers? Yes [] No [] N/A [X]
- 6.2 If the answer to 6.1 is yes, please provide the following:

| 1 Company Name | 2 NAIC Company Code | 3 Domiciliary Jurisdiction | 4 Reserve Credit | Assets Supporting Reserve Credit | | |
|-------------------|------------------------------|----------------------------------|------------------------|----------------------------------|--------------------------|------------|
| | | | | 5 Letters of Credit | 6 Trust Agreements | 7 Other |
| | | | | | | |
| | | | | | | |

7. Provide the following for individual ordinary life insurance* policies (U.S. business only) for the current year (prior to reinsurance assumed or ceded):
- | | |
|-----------------------------------|----------|
| 7.1 Direct Premium Written | \$ |
| 7.2 Total Incurred Claims | \$ |
| 7.3 Number of Covered Lives | |

| |
|---|
| *Ordinary Life Insurance Includes |
| Term (whether full underwriting, limited underwriting, jet issue, "short form app") |
| Whole Life (whether full underwriting, limited underwriting, jet issue, "short form app") |
| Variable Life (with or without secondary guarantee) |
| Universal Life (with or without secondary guarantee) |
| Variable Universal Life (with or without secondary guarantee) |

8. Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states? Yes [X] No []
- 8.1 If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity? Yes [] No []

Life, Accident and Health Companies Only:

- 9.1 Are personnel or facilities of this reporting entity used by another entity or entities or are personnel or facilities of another entity or entities used by this reporting entity (except for activities such as administration of jointly underwritten group contracts and joint mortality or morbidity studies)? Yes [X] No []
- 9.2 Net reimbursement of such expenses between reporting entities:
- | | |
|---------------------|--------------------|
| 9.21 Paid | \$ 1,209,249 |
| 9.22 Received | \$ 2,092,939 |
- 10.1 Does the reporting entity write any guaranteed interest contracts? Yes [] No [X]
- 10.2 If yes, what amount pertaining to these lines is included in:
- | | |
|----------------------------|----------|
| 10.21 Page 3, Line 1 | \$ |
| 10.22 Page 4, Line 1 | \$ |
11. For stock reporting entities only:
- 11.1 Total amount paid in by stockholders as surplus funds since organization of the reporting entity: \$
12. Total dividends paid stockholders since organization of the reporting entity:
- | | |
|-------------------|----------|
| 12.11 Cash | \$ |
| 12.12 Stock | \$ |
- 13.1 Does the reporting entity reinsurance any Workers' Compensation Carve-Out business defined as: Yes [] No [X]
- Reinsurance (including retrocessional reinsurance) assumed by life and health insurers of medical, wage loss and death benefits of the occupational illness and accident exposures, but not the employers liability exposures, of business originally written as workers' compensation insurance.
- 13.2 If yes, has the reporting entity completed the Workers' Compensation Carve-Out Supplement to the Annual Statement? Yes [] No []
- 13.3 If 13.1 is yes, the amounts of earned premiums and claims incurred in this statement are:
- | 1
Reinsurance
Assumed | 2
Reinsurance
Ceded | 3
Net
Retained |
|---|---------------------------|----------------------|
| 13.31 Earned premium | | 0 |
| 13.32 Paid claims | | 0 |
| 13.33 Claim liability and reserve (beginning of year) | 0 | 0 |
| 13.34 Claim liability and reserve (end of year) | 0 | 0 |
| 13.35 Incurred claims | 0 | 0 |

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MedMutual Life Insurance Company
GENERAL INTERROGATORIES

PART 2 - LIFE, ACCIDENT AND HEALTH COMPANIES/FRATERNAL BENEFIT SOCIETIES INTERROGATORIES

- 13.4 If reinsurance assumed included amounts with attachment points below \$1,000,000, the distribution of the amounts reported in Lines 13.31 and 13.34 for Column (1) are:

| | Attachment Point | 1 Earned Premium | 2 Claim Liability and Reserve |
|-------|---------------------|------------------------|-------------------------------------|
| 13.41 | <\$25,000 | | |
| 13.42 | \$25,000 - 99,999 | | |
| 13.43 | \$100,000 - 249,999 | | |
| 13.44 | \$250,000 - 999,999 | | |
| 13.45 | \$1,000,000 or more | | |

- 13.5 What portion of earned premium reported in 13.31, Column 1 was assumed from pools?\$

Fraternal Benefit Societies Only:

14. Is the reporting entity organized and conducted on the lodge system, with ritualistic form of work and representative form of government? Yes [] No [X]
15. How often are meetings of the subordinate branches required to be held?
16. How are the subordinate branches represented in the supreme or governing body?
17. What is the basis of representation in the governing body?
- 18.1 How often are regular meetings of the governing body held?
- 18.2 When was the last regular meeting of the governing body held?
- 18.3 When and where will the next regular or special meeting of the governing body be held?
- 18.4 How many members of the governing body attended the last regular meeting?
- 18.5 How many of the same were delegates of the subordinate branches?
19. How are the expenses of the governing body defrayed?
20. When and by whom are the officers and directors elected?
21. What are the qualifications for membership?
22. What are the limiting ages for admission?
23. What is the minimum and maximum insurance that may be issued on any one life?
24. Is a medical examination required before issuing a benefit certificate to applicants? Yes [] No []
25. Are applicants admitted to membership without filing an application with and becoming a member of a local branch by ballot and initiation? Yes [] No []
- 26.1 Are notices of the payments required sent to the members? Yes [] No [] N/A []
- 26.2 If yes, do the notices state the purpose for which the money is to be used? Yes [] No []
27. What proportion of first and subsequent year's payments may be used for management expenses?
 27.11 First Year%
 27.12 Subsequent Years%
- 28.1 Is any part of the mortuary, disability, emergency or reserve fund, or the accretions from or payments for the same, used for expenses? Yes [] No []
- 28.2 If so, what amount and for what purpose?\$
- 29.1 Does the reporting entity pay an old age disability benefit? Yes [] No []
- 29.2 If yes, at what age does the benefit commence?
- 30.1 Has the constitution or have the laws of the reporting entity been amended during the year? Yes [] No []
- 30.2 If yes, when?
31. Have you filed with this Department all forms of benefit certificates issued, a copy of the constitution and all of the laws, rules and regulations in force at the present time? Yes [] No []
- 32.1 State whether all or a portion of the regular insurance contributions were waived during the current year under premium-paying certificates on account of meeting attained age or membership requirements? Yes [] No []
- 32.2 If so, was an additional reserve included in Exhibit 5? Yes [] No [] N/A []
- 32.3 If yes, explain
- 33.1 Has the reporting entity reinsured, amalgamated with, or absorbed any company, order, society, or association during the year? Yes [] No []
- 33.2 If yes, was there any contract agreement, or understanding, written or oral, expressed or implied, by means of which any officer, director, trustee, or any other person, or firm, corporation, society or association, received or is to receive any fee, commission, emolument, or compensation of any nature whatsoever in connection with, on an account of such reinsurance, amalgamation, absorption, or transfer of membership or funds? Yes [] No [] N/A []
34. Has any present or former officer, director, trustee, incorporator, or any other persons, or any firm, corporation, society or association, any claims of any nature whatsoever against this reporting entity, which is not included in the liabilities on Page 3 of this statement? Yes [] No []
- 35.1 Does the reporting entity have outstanding assessments in the form of liens against policy benefits that have increased surplus? Yes [] No []
- 35.2 If yes, what is the date of the original lien and the total outstanding balance of liens that remain in surplus?

| Date | Outstanding Lien Amount |
|-------|----------------------------|
| | |
| | |

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MedMutual Life Insurance Company

FIVE-YEAR HISTORICAL DATA

Show amounts in whole dollars only, no cents; show percentages to one decimal place, i.e. 17.6.

\$000 omitted for amounts of life insurance

| | 1 2021 | 2 2020 | 3 2019 | 4 2018 | 5 2017 |
|--|-------------|-------------|------------|------------|------------|
| Life Insurance in Force | | | | | |
| (Exhibit of Life Insurance) | | | | | |
| 1. Ordinary - whole life and endowment (Line 34, Col. 4) | | 0 | 0 | 0 | 0 |
| 2. Ordinary - term (Line 21, Col. 4, less Line 34, Col. 4) | 8,466 | 9,231 | 9,490 | 10,965 | 12,689 |
| 3. Credit life (Line 21, Col. 6) | 0 | 0 | 0 | 0 | 0 |
| 4. Group, excluding FEGLI/SGLI (Line 21, Col. 9 less Lines 43 & 44, Col. 4) | 22,798,229 | 15,852,670 | 14,902,289 | 12,431,397 | 12,037,754 |
| 5. Industrial (Line 21, Col. 2) | 0 | 0 | 0 | 0 | 0 |
| 6. FEGLI/SGLI (Lines 43 & 44, Col. 4) | 0 | 0 | 0 | 0 | 0 |
| 7. Total (Line 21, Col. 10) | 22,806,695 | 15,861,901 | 14,911,779 | 12,442,362 | 12,050,443 |
| 7.1 Total in force for which VM-20 deterministic/stochastic reserves are calculated | | | | | |
| New Business Issued | | | | | |
| (Exhibit of Life Insurance) | | | | | |
| 8. Ordinary - whole life and endowment (Line 34, Col. 2) | | 0 | 0 | 0 | 0 |
| 9. Ordinary - term (Line 2, Col. 4, less Line 34, Col. 2) | 625 | 791 | 310 | 815 | 700 |
| 10. Credit life (Line 2, Col. 6) | 0 | 0 | 0 | 0 | 0 |
| 11. Group (Line 2, Col. 9) | 5,820,537 | 1,556,910 | 2,142,687 | 192,952 | 183,478 |
| 12. Industrial (Line 2, Col. 2) | 0 | 0 | 0 | 0 | 0 |
| 13. Total (Line 2, Col. 10) | 5,821,162 | 1,557,701 | 2,142,997 | 193,767 | 184,178 |
| Premium Income - Lines of Business | | | | | |
| (Exhibit 1 - Part 1) | | | | | |
| 14. Industrial life (Line 20.4, Col. 2) | 0 | 0 | 0 | 0 | 0 |
| 15.1 Ordinary-life insurance (Line 20.4, Col. 3) | 219,865 | 216,566 | 178,601 | 189,866 | 195,015 |
| 15.2 Ordinary-individual annuities (Line 20.4, Col. 4) | 0 | 0 | 0 | 0 | 0 |
| 16 Credit life (group and individual) (Line 20.4, Col. 5) | 0 | 0 | 0 | 0 | 0 |
| 17.1 Group life insurance (Line 20.4, Col. 6) | 32,518,346 | 26,278,691 | 22,933,882 | 22,752,090 | 24,226,891 |
| 17.2 Group annuities (Line 20.4, Col. 7) | 0 | 0 | 0 | 0 | 0 |
| 18.1 A & H-group (Line 20.4, Col. 8) | 6,180,271 | 3,807,447 | 3,312,935 | 2,783,041 | 4,972,114 |
| 18.2 A & H-credit (group and individual) (Line 20.4, Col. 9) | 0 | 0 | 0 | 0 | 0 |
| 18.3 A & H-other (Line 20.4, Col. 10) | 966,860 | 884,340 | 789,215 | 1,479,842 | 17,875,709 |
| 19. Aggregate of all other lines of business (Line 20.4, Col. 11) | 0 | 0 | 0 | 0 | 0 |
| 20. Total | 39,885,342 | 31,187,044 | 27,214,633 | 27,204,839 | 47,269,729 |
| Balance Sheet (Pages 2 & 3) | | | | | |
| 21. Total admitted assets excluding Separate Accounts business (Page 2, Line 26, Col. 3) | 60,018,911 | 45,942,851 | 48,054,706 | 44,864,887 | 44,942,863 |
| 22. Total liabilities excluding Separate Accounts business (Page 3, Line 26) | 26,814,723 | 11,351,264 | 13,381,690 | 13,094,300 | 17,303,192 |
| 23. Aggregate life reserves (Page 3, Line 1) | 6,392,500 | 979,000 | 950,000 | 981,000 | 1,009,000 |
| 23.1 Excess VM-20 deterministic/stochastic reserve over NPR related to Line 7.1 | | | | | |
| 24. Aggregate A & H reserves (Page 3, Line 2) | 1,980,772 | 834,092 | 585,153 | 470,000 | 3,117,000 |
| 25. Deposit-type contract funds (Page 3, Line 3) | | 0 | 0 | 0 | 0 |
| 26. Asset valuation reserve (Page 3, Line 24.01) | 54,799 | 53,324 | 50,327 | 49,105 | 47,253 |
| 27. Capital (Page 3, Lines 29 and 30) | 1,600,000 | 1,600,000 | 1,600,000 | 1,600,000 | 1,600,000 |
| 28. Surplus (Page 3, Line 37) | 31,604,188 | 32,991,587 | 33,073,016 | 30,170,587 | 26,039,671 |
| Cash Flow (Page 5) | | | | | |
| 29. Net Cash from Operations (Line 11) | (4,441,237) | (1,294,606) | 3,697,936 | 2,842,801 | 6,004,795 |
| Risk-Based Capital Analysis | | | | | |
| 30. Total adjusted capital | 33,258,987 | 34,644,911 | 34,723,343 | 31,819,692 | 27,686,924 |
| 31. Authorized control level risk - based capital | 8,237,339 | 7,036,263 | 5,914,844 | 5,087,617 | 4,959,812 |
| Percentage Distribution of Cash, Cash Equivalents and Invested Assets | | | | | |
| (Page 2, Col. 3) (Line No. /Page 2, Line 12, Col. 3) x 100.0 | | | | | |
| 32. Bonds (Line 1) | 57.4 | 77.9 | 68.6 | 67.3 | 57.6 |
| 33. Stocks (Lines 2.1 and 2.2) | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| 34. Mortgage loans on real estate(Lines 3.1 and 3.2) | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| 35. Real estate (Lines 4.1, 4.2 and 4.3) | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| 36. Cash, cash equivalents and short-term investments (Line 5) | 42.6 | 22.1 | 31.4 | 32.7 | 42.4 |
| 37. Contract loans (Line 6) | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| 38. Derivatives (Page 2, Line 7) | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| 39. Other invested assets (Line 8) | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| 40. Receivables for securities (Line 9) | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| 41. Securities lending reinvested collateral assets (Line 10) | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| 42. Aggregate write-ins for invested assets (Line 11) | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| 43. Cash, cash equivalents and invested assets (Line 12) | 100.0 | 100.0 | 100.0 | 100.0 | 100.0 |

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MedMutual Life Insurance Company

FIVE-YEAR HISTORICAL DATA

(Continued)

| | 1 2021 | 2 2020 | 3 2019 | 4 2018 | 5 2017 |
|--|--------------|-------------|------------|------------|-------------|
| Investments in Parent, Subsidiaries and Affiliates | | | | | |
| 44. Affiliated bonds (Schedule D Summary, Line 12, Col. 1) | | 0 | 0 | 0 | 0 |
| 45. Affiliated preferred stocks (Schedule D Summary, Line 18, Col. 1) | 0 | 0 | 0 | 0 | 0 |
| 46. Affiliated common stocks (Schedule D Summary Line 24, Col. 1), | 0 | 0 | 0 | 0 | 0 |
| 47. Affiliated short-term investments (subtotal included in Schedule DA Verification, Col. 5, Line 10) | | 0 | 0 | 0 | 0 |
| 48. Affiliated mortgage loans on real estate | | | | | |
| 49. All other affiliated | | | | | |
| 50. Total of above Lines 44 to 49 | 0 | 0 | 0 | 0 | 0 |
| 51. Total Investment in Parent included in Lines 44 to 49 above | | | | | |
| Total Nonadmitted and Admitted Assets | | | | | |
| 52. Total nonadmitted assets (Page 2, Line 28, Col. 2) | 52,992 | 52,000 | 63,150 | 46,811 | 252,661 |
| 53. Total admitted assets (Page 2, Line 28, Col. 3) | 60,018,911 | 45,942,851 | 48,054,706 | 44,864,887 | 44,942,863 |
| Investment Data | | | | | |
| 54. Net investment income (Exhibit of Net Investment Income) | 339,363 | 474,330 | 722,520 | 619,541 | 365,115 |
| 55. Realized capital gains (losses) (Page 4, Line 34, Column 1) | | (3,564) | 0 | 0 | 0 |
| 56. Unrealized capital gains (losses) (Page 4, Line 38, Column 1) | | 0 | 0 | 0 | 0 |
| 57. Total of above Lines 54, 55 and 56 | 339,363 | 470,766 | 722,520 | 619,541 | 365,115 |
| Benefits and Reserve Increases (Page 6) | | | | | |
| 58. Total contract/certificate benefits - life (Lines 10, 11, 12, 13, 14 and 15, Col. 1 minus Lines 10, 11, 12, 13, 14 and 15, Cols. 6, 7 and 8) | 39,026,025 | 21,798,580 | 15,306,962 | 16,209,424 | 16,038,695 |
| 59. Total contract/certificate benefits - A & H (Lines 13 & 14, Col. 6) | 5,599,671 | 2,504,929 | 2,715,677 | 2,532,499 | 19,081,711 |
| 60. Increase in life reserves - other than group and annuities (Line 19, Col. 2) | 27,500 | 32,000 | 16,000 | 17,000 | 19,000 |
| 61. Increase in A & H reserves (Line 19, Col. 6) | 1,146,680 | 248,939 | 115,153 | (332,000) | (1,116,000) |
| 62. Dividends to policyholders and refunds to members (Line 30, Col. 1) | 0 | 0 | 0 | 0 | 0 |
| Operating Percentages | | | | | |
| 63. Insurance expense percent (Page 6, Col. 1, Lines 21, 22 & 23, less Line 6)/(Page 6, Col. 1, Line 1 plus Exhibit 7, Col. 2, Line 2) x 100.0 | 18.5 | .19.0 | 19.9 | 14.7 | 14.6 |
| 64. Lapse percent (ordinary only) [(Exhibit of Life Insurance, Col. 4, Lines 14 & 15) / 1/2 (Exhibit of Life Insurance, Col. 4, Lines 1 & 21)] x 100.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| 65. A & H loss percent (Schedule H, Part 1, Lines 5 and 6, Col. 2) | 94.5 | 58.9 | 69.2 | 52.2 | 80.9 |
| 66. A & H cost containment percent (Schedule H, Pt. 1, Line 4, Col. 2) | 0.1 | 0.2 | 0.2 | 0.6 | 2.3 |
| 67. A & H expense percent excluding cost containment expenses (Schedule H, Pt. 1, Line 10, Col. 2) | 25.5 | .31.6 | 34.7 | 26.0 | 17.7 |
| A & H Claim Reserve Adequacy | | | | | |
| 68. Incurred losses on prior years' claims - group health (Schedule H, Part 3, Line 3.1 Col. 2) | 0 | 0 | (882) | (1,048) | (24,876) |
| 69. Prior years' claim liability and reserve - group health (Schedule H, Part 3, Line 3.2 Col. 2) | 821,294 | 575,405 | 470,000 | 802,000 | 844,000 |
| 70. Incurred losses on prior years' claims-health other than group (Schedule H, Part 3, Line 3.1 Col. 1 less Col. 2) | (13,034) | 38,119 | 593,566 | 1,911,076 | 268,014 |
| 71. Prior years' claim liability and reserve-health other than group (Schedule H, Part 3, Line 3.2 Col. 1 less Col. 2) | 49,048 | 544,748 | 580,000 | 2,066,736 | 351,928 |
| Net Gains From Operations After Dividends to Policyholders/Members' Refunds and Federal Income Taxes by Lines of Business (Page 6.x, Line 33) | | | | | |
| 72. Industrial life (Page 6.1, Col. 2) | 0 | 0 | 0 | 0 | 0 |
| 73. Ordinary - life (Page 6.1, Col. 1 less Cols. 2, 10 and 12) | (224,291) | (1,323,764) | 72,315 | (128,913) | 43,086 |
| 74. Ordinary - individual annuities (Page 6, Col. 4) | 0 | 0 | 0 | 0 | 0 |
| 75. Ordinary-supplementary contracts | XXX | XXX | XXX | | |
| 76. Credit life (Page 6.1, Col. 10 plus Page 6.2, Col. 7) | 0 | 0 | 0 | 0 | 0 |
| 77. Group life (Page 6.2, Col. 1 Less Cols. 7 and 9) | (14,948,517) | 571,045 | 2,926,124 | 3,301,798 | 3,622,479 |
| 78. Group annuities (Page 6, Col. 5) | 0 | 0 | 0 | 0 | 0 |
| 79. A & H-group (Page 6.5, Col. 3) | 0 | 0 | 0 | (6,004) | 235,921 |
| 80. A & H-credit (Page 6.5, Col. 10) | 0 | 0 | 0 | 0 | 0 |
| 81. A & H-other (Page 6.5, Col. 1 less Cols. 3 and 10) | (1,165,252) | 1,777,074 | (97,601) | 755,919 | 966,252 |
| 82. Aggregate of all other lines of business (Page 6, Col. 8) | 0 | 0 | 0 | 0 | 0 |
| 83. Fraternal (Page 6, Col. 7) | 0 | 0 | 0 | 0 | 0 |
| 84. Total (Page 6, Col. 1) | (16,338,060) | 1,024,355 | 2,900,838 | 3,922,800 | 4,867,738 |

NOTE: If a party to a merger, have the two most recent years of this exhibit been restated due to a merger in compliance with the disclosure requirements of SSAP No. 3, Accounting Changes and Correction of Errors?

Yes [] No []

If no, please explain:

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MedMutual Life Insurance Company

EXHIBIT OF LIFE INSURANCE

(\$000 Omitted for Amounts of Life Insurance)

| | Industrial | | Ordinary | | Credit Life (Group and Individual) | | Group | | 10 Total Amount of Insurance | | |
|---|-------------------------|--------------------------|-------------------------|--------------------------|---|--------------------------|---------------|-------------------|------------------------------------|------------|---------|
| | 1 Number of Policies | 2 Amount of Insurance | 3 Number of Policies | 4 Amount of Insurance | 5 Number of Individual Policies and Group Certificates | 6 Amount of Insurance | Number of | | | | |
| | | | | | | | 7 Policies | 8 Certificates | | | |
| 1. In force end of prior year | .0 | 0 | 362 | 9,231 | 0 | 0 | 4,670 | 212,167 | 15,852,670 | 15,861,901 | |
| 2. Issued during year | | 0 | 25 | 625 | | 0 | 224 | 33,777 | 5,820,537 | 5,821,162 | |
| 3. Reinsurance assumed | | | | | | | | | 0 | 0 | |
| 4. Revived during year | | | | | | | | | 0 | 0 | |
| 5. Increased during year (net) | | | | | | | | 8,596 | 1,503,260 | 1,503,260 | |
| 6. Subtotals, Lines 2 to 5 | .0 | 0 | 25 | 625 | 0 | 0 | 224 | 42,373 | 7,323,797 | 7,324,422 | |
| 7. Additions by dividends during year | XXX | | XXX | | XXX | | XXX | XXX | 0 | 0 | |
| 8. Aggregate write-ins for increases | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| 9. Totals (Lines 1 and 6 to 8) | .0 | 0 | 387 | 9,856 | 0 | 0 | 4,894 | 254,540 | 23,176,467 | 23,186,323 | |
| Deductions during year: | | | | | | | | | | | |
| 10. Death | | | | .13 | 391 | | XXX | 650 | 30,641 | 31,032 | |
| 11. Maturity | | | | | | | XXX | | 0 | 0 | |
| 12. Disability | | | | | | | XXX | | 0 | 0 | |
| 13. Expiry | | | | .46 | .999 | | | 500 | 9,882 | .347,597 | 348,597 |
| 14. Surrender | | | | | | | | | 0 | 0 | |
| 15. Lapse | | | | | | | | | 0 | 0 | |
| 16. Conversion | | | | | | | XXX | XXX | XXX | 0 | |
| 17. Decreased (net) | | | | | | | | | 0 | 0 | |
| 18. Reinsurance | | | | | | | | | 0 | 0 | |
| 19. Aggregate write-ins for decreases | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| 20. Totals (Lines 10 to 19) | .0 | 0 | .59 | 1,390 | 0 | 0 | .500 | 10,532 | .378,238 | 379,628 | |
| 21. In force end of year (b) (Line 9 minus Line 20) | 0 | 0 | 328 | 8,466 | 0 | 0 | 4,394 | 244,008 | 22,798,229 | 22,806,695 | |
| 22. Reinsurance ceded end of year | XXX | | XXX | | XXX | | XXX | XXX | 5,080,713 | 5,080,713 | |
| 23. Line 21 minus Line 22 | XXX | 0 | XXX | 8,466 | XXX | (a) | 0 | XXX | 17,717,516 | 17,725,982 | |
| DETAILS OF WRITE-INS | | | | | | | | | | | |
| 0801. | | | | | | | | | | | |
| 0802. | | | | | | | | | | | |
| 0803. | | | | | | | | | | | |
| 0898. Summary of remaining write-ins for Line 8 from overflow page | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| 0899. TOTALS (Lines 0801 thru 0803 plus 0898) (Line 8 above) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| 1901. | | | | | | | | | | | |
| 1902. | | | | | | | | | | | |
| 1903. | | | | | | | | | | | |
| 1998. Summary of remaining write-ins for Line 19 from overflow page | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| 1999. TOTALS (Lines 1901 thru 1903 plus 1998) (Line 19 above) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |

Life, Accident and Health Companies Only:

(a) Group \$; Individual \$

Fraternal Benefit Societies Only:

(b) Paid-up insurance included in the final totals of Line 21 (including additions to certificates) number of certificates , Amount \$

Additional accidental death benefits included in life certificates were in amount \$, Does the society collect any contributions from members for general expenses of the society under fully paid-up certificates? Yes [] No [X]

If not, how are such expenses met?

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MedMutual Life Insurance Company

EXHIBIT OF LIFE INSURANCE

(\$000 Omitted for Amounts of Life Insurance) (Continued)

ADDITIONAL INFORMATION ON INSURANCE IN FORCE END OF YEAR

| | Industrial | | Ordinary | |
|------------------------------------|-------------------------|--------------------------|-------------------------|--------------------------|
| | 1 Number of Policies | 2 Amount of Insurance | 3 Number of Policies | 4 Amount of Insurance |
| 24. Additions by dividends | XXX | | XXX | |
| 25. Other paid-up insurance | XXX | | | |
| 26. Debit ordinary insurance | XXX | | | |

NONE**ADDITIONAL INFORMATION ON ORDINARY INSURANCE**

| Term Insurance Excluding Extended Term Insurance | Issued During Year (Included in Line 2) | | In Force End of Year (Included in Line 21) | |
|--|--|--------------------------|---|--------------------------|
| | 1 Number of Policies | 2 Amount of Insurance | 3 Number of Policies | 4 Amount of Insurance |
| 27. Term policies - decreasing | | | | |
| 28. Term policies - other | .25 | .625 | .328 | .8,466 |
| 29. Other term insurance - decreasing | XXX | | XXX | |
| 30. Other term insurance | XXX | | XXX | |
| 31. Totals (Lines 27 to 30) | .25 | .625 | .328 | .8,466 |
| Reconciliation to Lines 2 and 21: | | | | |
| 32. Term additions | XXX | | XXX | |
| 33. Totals, extended term insurance | XXX | XXX | | |
| 34. Totals, whole life and endowment | | | | |
| 35. Totals (Lines 31 to 34) | 25 | 625 | 328 | 8,466 |

CLASSIFICATION OF AMOUNT OF INSURANCE BY PARTICIPATING STATUS

| | Issued During Year (Included in Line 2) | | In Force End of Year (Included in Line 21) | |
|--|--|--------------------|---|--------------------|
| | 1 Non-Participating | 2 Participating | 3 Non-Participating | 4 Participating |
| 36. Industrial | | | | |
| 37. Ordinary | .625 | | | .8,466 |
| 38. Credit Life (Group and Individual) | | | | |
| 39. Group | 5,820,537 | | | 22,798,230 |
| 40. Totals (Lines 36 to 39) | 5,821,162 | | 0 | 22,806,695 |
| | | | | 0 |

ADDITIONAL INFORMATION ON CREDIT LIFE AND GROUP INSURANCE

| | Credit Life | | Group | |
|--|---|--------------------------|-----------------------------|--------------------------|
| | 1 Number of Individual Policies and Group Certificates | 2 Amount of Insurance | 3 Number of Certificates | 4 Amount of Insurance |
| 41. Amount of insurance included in Line 2 ceded to other companies | XXX | | XXX | .778,701 |
| 42. Number in force end of year if the number under shared groups is counted on a pro-rata basis | | XXX | | XXX |
| 43. Federal Employees' Group Life Insurance included in Line 21 | | | | |
| 44. Servicemen's Group Life Insurance included in Line 21 | | | | |
| 45. Group Permanent Insurance included in Line 21 | | | 100 | 2,096 |

NONE

| 46. Amount of additional accidental death benefits included in force end of year under ordinary policies |
|--|
|--|

NONE**POLICIES WITH DISABILITY PROVISIONS**

| Disability Provisions | Industrial | | Ordinary | | Credit | | Group | |
|-----------------------------|-------------------------|--------------------------|-------------------------|--------------------------|-------------------------|--------------------------|-----------------------------|--------------------------|
| | 1 Number of Policies | 2 Amount of Insurance | 3 Number of Policies | 4 Amount of Insurance | 5 Number of Policies | 6 Amount of Insurance | 7 Number of Certificates | 8 Amount of Insurance |
| 48. Waiver of Premium | | | | | | | | |
| 49. Disability Income | | | | | | | 148,360 | 12,470,768 |
| 50. Extended Benefits | | | XXX | XXX | | | | |
| 51. Other | | | | | | | | |
| 52. Total | 0 | (a) | 0 | 0 | (a) | 0 | 148,360 | (a) |
| | | | | | | | | 12,470,768 |

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

EXHIBIT OF NUMBER OF POLICIES, CONTRACTS, CERTIFICATES, INCOME PAYABLE AND ACCOUNT VALUES IN FORCE FOR SUPPLEMENTARY CONTRACTS, ANNUITIES, ACCIDENT & HEALTH AND OTHER POLICIES

SUPPLEMENTARY CONTRACTS

| | Ordinary | | Group | |
|---|--------------------------------------|--|--------------------------------------|--|
| | 1 Involving Life Contingencies | 2 Not Involving Life Contingencies | 3 Involving Life Contingencies | 4 Not Involving Life Contingencies |
| 1. In force end of prior year | | | | |
| 2. Issued during year | | | | |
| 3. Reinsurance assumed | | | | |
| 4. Increased during year (net) | | | | |
| 5. Total (Lines 1 to 4) | | | | |
| Deductions during year: | | | | |
| 6. Decreased (net) | | | | |
| 7. Reinsurance ceded | | | | |
| 8. Totals (Lines 6 and 7) | | | | |
| 9. In force end of year (line 5 minus line 8) | | | | |
| 10. Amount on deposit | | | (a) | |
| 11. Income now payable | | | | (a) |
| 12. Amount of income payable | (a) | (a) | (a) | (a) |

NONE

ANNUITIES

| | Ordinary | | Group | |
|---|----------------|---------------|----------------|-------------------|
| | 1 Immediate | 2 Deferred | 3 Contracts | 4 Certificates |
| 1. In force end of prior year | | | | |
| 2. Issued during year | | | | |
| 3. Reinsurance assumed | | | | |
| 4. Increased during year (net) | | | | |
| 5. Totals (Lines 1 to 4) | | | | |
| Deductions during year: | | | | |
| 6. Decreased (net) | | | | |
| 7. Reinsurance ceded | | | | |
| 8. Totals (Lines 6 and 7) | | | | |
| 9. In force end of year (line 5 minus line 8) | | | | |
| Income now payable: | | | | |
| 10. Amount of income payable | | | (a) | |
| Deferred fully paid: | | | | |
| 11. Account balance | | | XXX | |
| Deferred not fully paid: | | | | |
| 12. Account balance | | | XXX | |

ACCIDENT AND HEALTH INSURANCE

| | Group | | Credit | | Other | |
|--|-------------------|------------------------|---------------|------------------------|---------------|------------------------|
| | 1 Certificates | 2 Premiums in Force | 3 Policies | 4 Premiums in Force | 5 Policies | 6 Premiums in Force |
| 1. In force end of prior year | 39,373 | 3,871,118 | 0 | 0 | 1,436 | 976,412 |
| 2. Issued during year | 4,156 | 3,244,269 | | | 72 | (14,978) |
| 3. Reinsurance assumed | | | | | | |
| 4. Increased during year (net) | | XXX | | XXX | | XXX |
| 5. Totals (Lines 1 to 4) | 43,529 | XXX | 0 | XXX | 1,508 | XXX |
| Deductions during year: | | | | | | |
| 6. Conversions | | XXX | | XXX | XXX | XXX |
| 7. Decreased (net) | 3,527 | XXX | | XXX | 18 | XXX |
| 8. Reinsurance ceded | | XXX | | XXX | | XXX |
| 9. Totals (Lines 6 to 8) | 3,527 | XXX | 0 | XXX | 18 | XXX |
| 10. In force end of year (line 5 minus line 9) | 40,002 | (a) | 7,115,387 | 0 (a) | 1,490 | (a) |

DEPOSIT FUNDS AND DIVIDEND ACCUMULATIONS

| | | | | | 1 Deposit Funds | 2 Dividend Accumulations |
|---|--|--|--|--|--------------------|--------------------------------|
| | | | | | Contracts | Contracts |
| 1. In force end of prior year | | | | | | |
| 2. Issued during year | | | | | | |
| 3. Reinsurance assumed | | | | | | |
| 4. Increased during year (net) | | | | | | |
| 5. Totals (Lines 1 to 4) | | | | | | |
| Deductions During Year: | | | | | | |
| 6. Decreased (net) | | | | | | |
| 7. Reinsurance ceded | | | | | | |
| 8. Totals (Lines 6 and 7) | | | | | | |
| 9. In force end of year (line 5 minus line 8) | | | | | | |
| 10. Amount of account balance | | | | | (a) | (a) |

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

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MedMutual Life Insurance Company
SCHEDULE T - PREMIUMS AND ANNUITY CONSIDERATIONS ^(b)

Allocated by States and Territories

| States, Etc. | Active Status (a) | Life Contracts | | | Direct Business Only | | Total Columns 2 through 5 (b) | Deposit-Type Contracts |
|--|---|----------------------------|---------------------------|---|-------------------------|---|-------------------------------------|---------------------------|
| | | 2 | | 3 | 4 | 5 | | |
| | | Life Insurance Premiums | Annuity Considerations | Accident and Health Insurance Premiums, Including Policy, Membership and Other Fees | Other Considerations | | | |
| 1. Alabama | AL | N | | | | | 0 | |
| 2. Alaska | AK | N | | | | | 0 | |
| 3. Arizona | AZ | L | | | | | 0 | |
| 4. Arkansas | AR | L | | | | | 0 | |
| 5. California | CA | N | | | | | 0 | |
| 6. Colorado | CO | L | | | | | 0 | |
| 7. Connecticut | CT | N | | | | | 0 | |
| 8. Delaware | DE | L | | | | | 0 | |
| 9. District of Columbia | DC | L | | | | | 0 | |
| 10. Florida | FL | N | | | | | 0 | |
| 11. Georgia | GA | L | 20,697 | | 4,225 | | 24,921 | |
| 12. Hawaii | HI | N | | | | | 0 | |
| 13. Idaho | ID | N | | | | | 0 | |
| 14. Illinois | IL | L | | | | | 0 | |
| 15. Indiana | IN | L | 19,117 | | 9,300 | | 28,418 | |
| 16. Iowa | IA | L | | | | | 0 | |
| 17. Kansas | KS | L | | | | | 0 | |
| 18. Kentucky | KY | L | | | | | 0 | |
| 19. Louisiana | LA | L | | | | | 0 | |
| 20. Maine | ME | N | | | | | 0 | |
| 21. Maryland | MD | L | | | | | 0 | |
| 22. Massachusetts | MA | N | | | | | 0 | |
| 23. Michigan | MI | L | 385,028 | | 42,933 | | 427,961 | |
| 24. Minnesota | MN | L | | | | | 0 | |
| 25. Mississippi | MS | L | | | | | 0 | |
| 26. Missouri | MO | L | | | | | 0 | |
| 27. Montana | MT | L | | | | | 0 | |
| 28. Nebraska | NE | L | | | | | 0 | |
| 29. Nevada | NV | L | | | | | 0 | |
| 30. New Hampshire | NH | N | | | | | 0 | |
| 31. New Jersey | NJ | L | | | | | 0 | |
| 32. New Mexico | NM | L | | | | | 0 | |
| 33. New York | NY | N | | | | | 0 | |
| 34. North Carolina | NC | N | | | | | 0 | |
| 35. North Dakota | ND | L | | | | | 0 | |
| 36. Ohio | OH | L | 37,896,653 | | 10,404,588 | | 48,301,241 | |
| 37. Oklahoma | OK | L | | | | | 0 | |
| 38. Oregon | OR | L | | | | | 0 | |
| 39. Pennsylvania | PA | L | 96 | | .93 | | 189 | |
| 40. Rhode Island | RI | N | | | | | 0 | |
| 41. South Carolina | SC | L | 29,280 | | | | 29,280 | |
| 42. South Dakota | SD | L | | | | | 0 | |
| 43. Tennessee | TN | N | | | | | 0 | |
| 44. Texas | TX | L | | | | | 0 | |
| 45. Utah | UT | L | | | | | 0 | |
| 46. Vermont | VT | N | | | | | 0 | |
| 47. Virginia | VA | L | | | | | 0 | |
| 48. Washington | WA | N | | | | | 0 | |
| 49. West Virginia | WV | L | 985 | | | | 985 | |
| 50. Wisconsin | WI | L | | | | | 0 | |
| 51. Wyoming | WY | L | | | | | 0 | |
| 52. American Samoa | AS | N | | | | | 0 | |
| 53. Guam | GU | N | | | | | 0 | |
| 54. Puerto Rico | PR | N | | | | | 0 | |
| 55. U.S. Virgin Islands | VI | N | | | | | 0 | |
| 56. Northern Mariana Islands | MP | N | | | | | 0 | |
| 57. Canada | CAN | N | | | | | 0 | |
| 58. Aggregate Other Alien | OT | XXX | 0 | 0 | 0 | 0 | 0 | 0 |
| 59. Subtotal | | XXX | 38,351,856 | 0 | 10,461,138 | 0 | 48,812,994 | 0 |
| 90. Reporting entity contributions for employee benefits plans | | XXX | | | | | 0 | |
| 91. Dividends or refunds applied to purchase paid-up additions and annuities | | XXX | | | | | 0 | |
| 92. Dividends or refunds applied to shorten endowment or premium paying period | | XXX | | | | | 0 | |
| 93. Premium or annuity considerations waived under disability or other contract provisions | | XXX | | | | | 0 | |
| 94. Aggregate or other amounts not allocable by State | | XXX | 0 | 0 | 0 | 0 | 0 | 0 |
| 95. Totals (Direct Business) | | XXX | 38,351,856 | 0 | 10,461,138 | 0 | 48,812,994 | 0 |
| 96. Plus reinsurance assumed | | XXX | | | | | 0 | |
| 97. Totals (All Business) | | XXX | 38,351,856 | 0 | 10,461,138 | 0 | 48,812,994 | 0 |
| 98. Less reinsurance ceded | | XXX | 5,613,645 | | .3,314,008 | | 8,927,652 | |
| 99. Totals (All Business) less Reinsurance Ceded | | XXX | 32,738,211 | 0 | (c) 7,147,131 | 0 | 39,885,342 | 0 |
| DETAILS OF WRITE-INS | | | | | | | | |
| 58001. | | XXX | | | | | | |
| 58002. | | XXX | | | | | | |
| 58003. | | XXX | | | | | | |
| 58998. | Summary of remaining write-ins for Line 58 from overflow page | | 0 | 0 | 0 | 0 | 0 | 0 |
| 58999. | Totals (Lines 58001 through 58003 plus 58998)(Line 58 above) | XXX | 0 | 0 | 0 | 0 | 0 | 0 |
| 9401. | | XXX | | | | | | |
| 9402. | | XXX | | | | | | |
| 9403. | | XXX | | | | | | |
| 9498. | Summary of remaining write-ins for Line 94 from overflow page | | 0 | 0 | 0 | 0 | 0 | 0 |
| 9499. | Totals (Lines 9401 through 9403 plus 9498)(Line 94 above) | XXX | 0 | 0 | 0 | 0 | 0 | 0 |

(a) Active Status Counts:

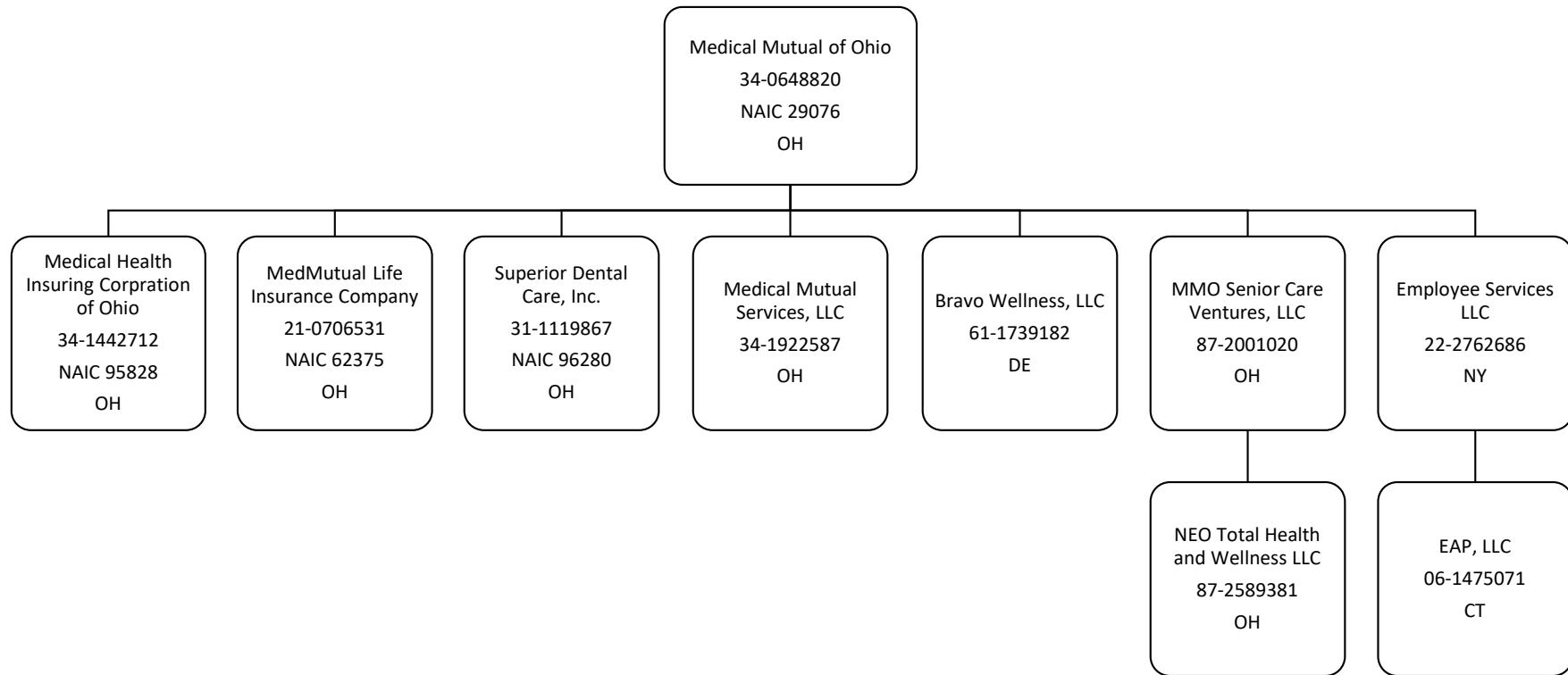
L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG..... 35 R - Registered - Non-domiciled RRGs..... 0
 E - Eligible - Reporting entities eligible or approved to write surplus lines in the state..... 0 Q - Qualified - Qualified or accredited reinsurer..... 0
 N - None of the above - Not allowed to write business in the state..... 22

(b) Explanation of basis of allocation by states, etc., of premiums and annuity considerations

(c) Column 4 should balance with Exhibit 1, Lines 6.4, 10.4, and 16.4, Cols. 8, 9, 10, or with Schedule H, Part 1, Line 1, indicate which:

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MedMutual Life Insurance Company

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 - ORGANIZATIONAL CHART



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