



ANNUAL STATEMENT
 FOR THE YEAR ENDED DECEMBER 31, 2022
 OF THE CONDITION AND AFFAIRS OF THE
CZECH CATHOLIC UNION

NAIC Group Code.....0000,.... 0000..... NAIC Company Code..... 56324.... Employer's ID Number..... 34-0105780.....
(Current) (Prior)

Organized under the Laws of.....OH..... State of Domicile or Port of Entry.....OH.....
 Country of Domicile.....US.....

Licensed as business type:..... Fraternal Benefit Societies.....
 Incorporated/Organized.....01/01/1879..... Commenced Business.....01/01/1879.....

Statutory Home Office.....5349 Dolloff Road..... Cleveland, OH, US 44127.....
 Main Administrative Office.....5349 Dolloff Road..... Cleveland, OH, US 44127..... 216-341-0444.....
(Telephone) Cleveland, OH, US 44127.....

Mail Address.....5349 Dolloff Road.....
 Primary Location of Books and
 Records.....5349 Dolloff Road..... Cleveland, OH, US 44127..... 216-341-0444.....
(Telephone)

Internet Website Address.....WWW.CZECHCCU.ORG..... 216-341-0444.....
 Statutory Statement Contact.....Theresa Aveni.....
 theresa@czechccu.org.....
(E-Mail) 216-341-0711.....
(Fax)

OFFICERS

Theresa Aveni, President.....
 Jane M. Milczewski, Secretary.....

OTHER

Joseph Kocab, Past President..... Robert Cermak, Past President.....
 Maryann Langevin, Director..... Cindy Kveton, Director.....
 Allen Perk, Director..... Karla Mahoney, Director.....
 Audrey A. Schmidt, Vice-President..... Richard Prospal, Director.....

DIRECTORS OR TRUSTEES

State of
 County of SS

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.

x x x
 Theresa Aveni Jane M. Milczewski
 President Secretary

Subscribed and sworn to before me
 this _____ day of

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

x



DIRECT BUSINESS IN THE STATE OF ILLINOIS DURING THE YEAR 2022

LIFE INSURANCE

NAIC Group Code: 0000

NAIC Company Code: 56324

| | 1 Ordinary | 2 Credit Life (Group and Individual) | 3 Group | 4 Industrial | 5 Total |
|--|---------------|---|------------|-----------------|------------|
| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | | | | |
| 1. Life insurance..... | 3,220 | | | | 3,220 |
| 2. Annuity considerations..... | 21,550 | | | | 21,550 |
| 3. Deposit-type contract funds..... | | XXX | | XXX | |
| 4. Other considerations..... | | | | | |
| 5. Totals (Sum of Lines 1 to 4)..... | 24,770 | | | | 24,770 |
| DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS | | | | | |
| Life insurance: | | | | | |
| 6.1 Paid in cash or left on deposit | | | | | |
| 6.2 Applied to pay renewal premiums | | | | | |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period | | | | | |
| 6.4 Other | | | | | |
| 6.5 Totals (Sum of Lines 6.1 to 6.4)..... | | | | | |
| Annuites: | | | | | |
| 7.1 Paid in cash or left on deposit | | | | | |
| 7.2 Applied to provide paid-up annuities | | | | | |
| 7.3 Other | | | | | |
| 7.4 Totals (Sum of Lines 7.1 to 7.3)..... | | | | | |
| 8. Grand Totals (Lines 6.5 + 7.4)..... | | | | | |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | |
| 9. Death benefits..... | 44,808 | | | | 44,808 |
| 10. Matured endowments..... | | | | | |
| 11. Annuity benefits..... | 40 | | | | 40 |
| 12. Surrender values and withdrawals for life contracts..... | 8,460 | | | | 8,460 |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid..... | | | | | |
| 14. All other benefits, except accident and health..... | | | | | |
| 15. Totals..... | 53,308 | | | | 53,308 |
| Details of Write-Ins | | | | | |
| 1301..... | | | | | |
| 1302..... | | | | | |
| 1303..... | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page..... | | | | | |
| 1399. Totals (Lines 1301 through 1303 + 1398) (Line 13 above)..... | | | | | |

| | Ordinary | | Credit Life (Group and Individual) | | Group | | Industrial | | Total | |
|--|-------------------------------|-------------|--|-------------|----------------------|-------------|-------------------------------|-------------|-------------------------------|--------------|
| | 1 No. of Polis. & Certifs. | 2 Amount | 3 No. of Ind. Polis. & Gr. Certifs. | 4 Amount | 5 No. of Certifs. | 6 Amount | 7 No. of Polis. & Certifs. | 8 Amount | 9 No. of Polis. & Certifs. | 10 Amount |
| DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | | | | | | | | | | |
| 16. Unpaid December 31, prior year..... | 5 | 13,198 | | | | | | | 5 | 13,198 |
| 17. Incurred during current year..... | 1 | 2,027 | | | | | | | 1 | 2,027 |
| Settled during current year: | | | | | | | | | | |
| 18.1 By payment in full..... | 2 | 4,961 | | | | | | | 2 | 4,961 |
| 18.2 By payment on compromised claims..... | | | | | | | | | | |
| 18.3 Totals paid..... | 2 | 4,961 | | | | | | | 2 | 4,961 |
| 18.4 Reduction by compromise..... | | | | | | | | | | |
| 18.5 Amount rejected..... | | | | | | | | | | |
| 18.6 Total settlements..... | 2 | 4,961 | | | | | | | 2 | 4,961 |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)..... | 4 | 10,264 | | | | | | | 4 | 10,264 |
| POLICY EXHIBIT | | | | | | | | | | |
| 20. In force December 31, prior year..... | 643 | 3,419,127 | | (a)..... | | | | | 643 | 3,419,127 |
| 21. Issued during year..... | 3 | 25,000 | | | | | | | 3 | 25,000 |
| 22. Other changes to in force (Net)..... | (15) | (41,578) | | | | | | | (15) | (41,578) |
| 23. In force December 31 of current year..... | 631 | 3,402,549 | | (a)..... | | | | | 631 | 3,402,549 |

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

ACCIDENT AND HEALTH INSURANCE

| | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|--|----------------------|-----------------------------|---|-------------------------|-----------------------------|
| 24. Group policies (b)..... | | | | | |
| 24.1 Federal Employees Health Benefits Plan premium (b)..... | | | | | |
| 24.2 Credit (Group and Individual)..... | | | | | |
| 24.3 Collectively renewable policies/certificates (b)..... | | | | | |
| 24.4 Medicare Title XVIII exempt from state taxes or fees..... | | | | | |
| Other Individual Policies: | | | | | |
| 25.1 Non-cancelable (b)..... | | | | | |
| 25.2 Guaranteed renewable (b)..... | | | | | |
| 25.3 Non-renewable for stated reasons only (b)..... | | | | | |
| 25.4 Other accident only..... | | | | | |
| 25.5 All other (b)..... | | | | | |
| 25.6 Totals (sum of Lines 25.1 to 25.5)..... | | | | | |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)..... | | | | | |

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

NONE



DIRECT BUSINESS IN THE STATE OF IOWA DURING THE YEAR 2022

LIFE INSURANCE

NAIC Group Code: 0000

NAIC Company Code: 56324

| | 1 Ordinary | 2 Credit Life (Group and Individual) | 3 Group | 4 Industrial | 5 Total |
|--|---------------|---|------------|-----------------|------------|
| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | | | | |
| 1. Life insurance..... | 2,583 | | | | 2,583 |
| 2. Annuity considerations..... | 30,000 | | | | 30,000 |
| 3. Deposit-type contract funds..... | | XXX | | XXX | |
| 4. Other considerations..... | | | | | |
| 5. Totals (Sum of Lines 1 to 4)..... | 32,583 | | | | 32,583 |
| DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS | | | | | |
| Life insurance: | | | | | |
| 6.1 Paid in cash or left on deposit | | | | | |
| 6.2 Applied to pay renewal premiums | | | | | |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period | | | | | |
| 6.4 Other | | | | | |
| 6.5 Totals (Sum of Lines 6.1 to 6.4)..... | | | | | |
| Annuites: | | | | | |
| 7.1 Paid in cash or left on deposit | | | | | |
| 7.2 Applied to provide paid-up annuities | | | | | |
| 7.3 Other | | | | | |
| 7.4 Totals (Sum of Lines 7.1 to 7.3)..... | | | | | |
| 8. Grand Totals (Lines 6.5 + 7.4)..... | | | | | |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | |
| 9. Death benefits..... | 31,281 | | | | 31,281 |
| 10. Matured endowments..... | | | | | |
| 11. Annuity benefits..... | 92,296 | | | | 92,296 |
| 12. Surrender values and withdrawals for life contracts..... | 2,208 | | | | 2,208 |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid..... | | | | | |
| 14. All other benefits, except accident and health..... | | | | | |
| 15. Totals..... | 125,785 | | | | 125,785 |
| Details of Write-Ins | | | | | |
| 1301..... | | | | | |
| 1302..... | | | | | |
| 1303..... | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page..... | | | | | |
| 1399. Totals (Lines 1301 through 1303 + 1398) (Line 13 above)..... | | | | | |

| | Ordinary | | Credit Life (Group and Individual) | | Group | | Industrial | | Total | |
|--|-------------------------------|-------------|--|-------------|----------------------|-------------|-------------------------------|-------------|-------------------------------|--------------|
| | 1 No. of Polis. & Certifs. | 2 Amount | 3 No. of Ind. Polis. & Gr. Certifs. | 4 Amount | 5 No. of Certifs. | 6 Amount | 7 No. of Polis. & Certifs. | 8 Amount | 9 No. of Polis. & Certifs. | 10 Amount |
| DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | | | | | | | | | | |
| 16. Unpaid December 31, prior year..... | | | | | | | | | | |
| 17. Incurred during current year..... | 5 | 16,856 | | | | | | | 5 | 16,856 |
| Settled during current year: | | | | | | | | | | |
| 18.1 By payment in full..... | 2 | 4,058 | | | | | | | 2 | 4,058 |
| 18.2 By payment on compromised claims..... | | | | | | | | | | |
| 18.3 Totals paid..... | 2 | 4,058 | | | | | | | 2 | 4,058 |
| 18.4 Reduction by compromise..... | | | | | | | | | | |
| 18.5 Amount rejected..... | | | | | | | | | | |
| 18.6 Total settlements..... | 2 | 4,058 | | | | | | | 2 | 4,058 |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)..... | 3 | 12,798 | | | | | | | 3 | 12,798 |
| POLICY EXHIBIT | | | | | | | | | | |
| 20. In force December 31, prior year..... | 217 | 1,262,602 | | (a)..... | | | | | 217 | 1,262,602 |
| 21. Issued during year..... | | | | | | | | | | |
| 22. Other changes to in force (Net)..... | (14) | (37,599) | | | | | | | (14) | (37,599) |
| 23. In force December 31 of current year..... | 203 | 1,225,003 | | (a)..... | | | | | 203 | 1,225,003 |

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

ACCIDENT AND HEALTH INSURANCE

| | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|--|----------------------|-----------------------------|---|-------------------------|-----------------------------|
| 24. Group policies (b)..... | | | | | |
| 24.1 Federal Employees Health Benefits Plan premium (b)..... | | | | | |
| 24.2 Credit (Group and Individual)..... | | | | | |
| 24.3 Collectively renewable policies/certificates (b)..... | | | | | |
| 24.4 Medicare Title XVIII exempt from state taxes or fees..... | | | | | |
| Other Individual Policies: | | | | | |
| 25.1 Non-cancelable (b)..... | | | | | |
| 25.2 Guaranteed renewable (b)..... | | | | | |
| 25.3 Non-renewable for stated reasons only (b)..... | | | | | |
| 25.4 Other accident only..... | | | | | |
| 25.5 All other (b)..... | | | | | |
| 25.6 Totals (sum of Lines 25.1 to 25.5)..... | | | | | |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)..... | | | | | |

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

NONE



DIRECT BUSINESS IN THE STATE OF MARYLAND DURING THE YEAR 2022

LIFE INSURANCE

NAIC Group Code: 0000

NAIC Company Code: 56324

| | 1 Ordinary | 2 Credit Life (Group and Individual) | 3 Group | 4 Industrial | 5 Total |
|---|---------------|--|------------|-----------------|------------|
| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | | | | |
| 1. Life insurance..... | | | | | |
| 2. Annuity considerations..... | | | | | |
| 3. Deposit-type contract funds..... | | XXX | | XXX | |
| 4. Other considerations..... | | | | | |
| 5. Totals (Sum of Lines 1 to 4)..... | | | | | |
| DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS | | | | | |
| Life insurance: | | | | | |
| 6.1 Paid in cash or left on deposit..... | | | | | |
| 6.2 Applied to pay renewal premiums..... | | | | | |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period..... | | | | | |
| 6.4 Other..... | | | | | |
| 6.5 Totals (Sum of Lines 6.1 to 6.4)..... | | | | | |
| Annuites: | | | | | |
| 7.1 Paid in cash or left on deposit..... | | | | | |
| 7.2 Applied to provide paid-up annuities..... | | | | | |
| 7.3 Other..... | | | | | |
| 7.4 Totals (Sum of Lines 7.1 to 7.3)..... | | | | | |
| 8. Grand Totals (Lines 6.5 + 7.4)..... | | | | | |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | |
| 9. Death benefits..... | | | | | |
| 10. Matured endowments..... | | | | | |
| 11. Annuity benefits..... | | | | | |
| 12. Surrender values and withdrawals for life contracts..... | | | | | |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid..... | | | | | |
| 14. All other benefits, except accident and health..... | | | | | |
| 15. Totals..... | | | | | |
| Details of Write-Ins | | | | | |
| 1301..... | | | | | |
| 1302..... | | | | | |
| 1303..... | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page..... | | | | | |
| 1399. Totals (Lines 1301 through 1303 + 1398) (Line 13 above)..... | | | | | |

| | Ordinary | | Credit Life (Group and Individual) | | Group | | Industrial | | Total | |
|--|-------------------------------|-------------|--|-----------------|----------------------|-------------|-------------------------------|-------------|-------------------------------|--------------|
| | 1 No. of Polis. & Certifs. | 2 Amount | 3 No. of Ind. Polis. & Gr. Certifs. | 4 Amount | 5 No. of Certifs. | 6 Amount | 7 No. of Polis. & Certifs. | 8 Amount | 9 No. of Polis. & Certifs. | 10 Amount |
| DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | | | | | | | | | | |
| 16. Unpaid December 31, prior year..... | | | | | | | | | | |
| 17. Incurred during current year..... | | | | | | | | | | |
| Settled during current year: | | | | | | | | | | |
| 18.1 By payment in full..... | | | | | | | | | | |
| 18.2 By payment on compromised claims..... | | | | | | | | | | |
| 18.3 Totals paid..... | | | | | | | | | | |
| 18.4 Reduction by compromise..... | | | | | | | | | | |
| 18.5 Amount rejected..... | | | | | | | | | | |
| 18.6 Total settlements..... | | | | | | | | | | |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)..... | | | | | | | | | | |
| POLICY EXHIBIT | | | | | | | | | | |
| 20. In force December 31, prior year..... | | | | No. of Policies | | | | | | |
| 21. Issued during year..... | | | (a)..... | | | | | | | |
| 22. Other changes to in force (Net)..... | | | | | | | | | | |
| 23. In force December 31 of current year..... | | | (a)..... | | | | | | | |

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

ACCIDENT AND HEALTH INSURANCE

| | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|--|----------------------|-----------------------------|--|-------------------------|--------------------------------|
| 24. Group policies (b)..... | | | | | |
| 24.1 Federal Employees Health Benefits Plan premium (b)..... | | | | | |
| 24.2 Credit (Group and Individual)..... | | | | | |
| 24.3 Collectively renewable policies/certificates (b)..... | | | | | |
| 24.4 Medicare Title XVIII exempt from state taxes or fees..... | | | | | |
| Other Individual Policies: | | | | | |
| 25.1 Non-cancelable (b)..... | | | | | |
| 25.2 Guaranteed renewable (b)..... | | | | | |
| 25.3 Non-renewable for stated reasons only (b)..... | | | | | |
| 25.4 Other accident only..... | | | | | |
| 25.5 All other (b)..... | | | | | |
| 25.6 Totals (sum of Lines 25.1 to 25.5)..... | | | | | |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)..... | | | | | |

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

NONE



DIRECT BUSINESS IN THE STATE OF MICHIGAN DURING THE YEAR 2022

LIFE INSURANCE

NAIC Group Code: 0000

NAIC Company Code: 56324

| | 1 Ordinary | 2 Credit Life (Group and Individual) | 3 Group | 4 Industrial | 5 Total |
|--|---------------|--|------------|-----------------|------------|
| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | | | | |
| 1. Life insurance..... | | | | | |
| 2. Annuity considerations..... | 10,000 | XXX | | | 10,000 |
| 3. Deposit-type contract funds..... | | | | | |
| 4. Other considerations..... | | | | | |
| 5. Totals (Sum of Lines 1 to 4)..... | 10,000 | | | | 10,000 |
| DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS | | | | | |
| Life insurance: | | | | | |
| 6.1 Paid in cash or left on deposit | | | | | |
| 6.2 Applied to pay renewal premiums | | | | | |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period | | | | | |
| 6.4 Other | | | | | |
| 6.5 Totals (Sum of Lines 6.1 to 6.4)..... | | | | | |
| Annuites: | | | | | |
| 7.1 Paid in cash or left on deposit | | | | | |
| 7.2 Applied to provide paid-up annuities | | | | | |
| 7.3 Other | | | | | |
| 7.4 Totals (Sum of Lines 7.1 to 7.3)..... | | | | | |
| 8. Grand Totals (Lines 6.5 + 7.4)..... | | | | | |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | |
| 9. Death benefits..... | 1,614 | | | | 1,614 |
| 10. Matured endowments..... | | | | | |
| 11. Annuity benefits..... | | | | | |
| 12. Surrender values and withdrawals for life contracts..... | 5,507 | | | | 5,507 |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid..... | | | | | |
| 14. All other benefits, except accident and health..... | | | | | |
| 15. Totals..... | 7,121 | | | | 7,121 |
| Details of Write-Ins | | | | | |
| 1301..... | | | | | |
| 1302..... | | | | | |
| 1303..... | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page..... | | | | | |
| 1399. Totals (Lines 1301 through 1303 + 1398) (Line 13 above)..... | | | | | |

| | Ordinary | | Credit Life (Group and Individual) | | Group | | Industrial | | Total | |
|--|-------------------------------|-------------|--|-------------|----------------------|-------------|-------------------------------|-------------|-------------------------------|--------------|
| | 1 No. of Polis. & Certifs. | 2 Amount | 3 No. of Ind. Polis. & Gr. Certifs. | 4 Amount | 5 No. of Certifs. | 6 Amount | 7 No. of Polis. & Certifs. | 8 Amount | 9 No. of Polis. & Certifs. | 10 Amount |
| DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | | | | | | | | | | |
| 16. Unpaid December 31, prior year..... | — | — | | | | | | | — | — |
| 17. Incurred during current year..... | 2 | 1,659 | | | | | | | 2 | 1,659 |
| Settled during current year: | | | | | | | | | | |
| 18.1 By payment in full..... | | | | | | | | | | |
| 18.2 By payment on compromised claims..... | | | | | | | | | | |
| 18.3 Totals paid..... | | | | | | | | | | |
| 18.4 Reduction by compromise..... | | | | | | | | | | |
| 18.5 Amount rejected..... | | | | | | | | | | |
| 18.6 Total settlements..... | | | | | | | | | | |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)..... | 2 | 1,659 | | | | | | | 2 | 1,659 |
| POLICY EXHIBIT | | | | | | | | | | |
| 20. In force December 31, prior year..... | 77 | 447,960 | (a) | | | | | | 77 | 447,960 |
| 21. Issued during year..... | (3) | (8,257) | | | | | | | (3) | (8,257) |
| 22. Other changes to in force (Net)..... | | | | | | | | | | |
| 23. In force December 31 of current year..... | 74 | 439,703 | (a) | | | | | | 74 | 439,703 |

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

ACCIDENT AND HEALTH INSURANCE

| | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|--|----------------------|-----------------------------|---|-------------------------|-----------------------------|
| 24. Group policies (b)..... | | | | | |
| 24.1 Federal Employees Health Benefits Plan premium (b)..... | | | | | |
| 24.2 Credit (Group and Individual)..... | | | | | |
| 24.3 Collectively renewable policies/certificates (b)..... | | | | | |
| 24.4 Medicare Title XVIII exempt from state taxes or fees..... | | | | | |
| Other Individual Policies: | | | | | |
| 25.1 Non-cancelable (b)..... | | | | | |
| 25.2 Guaranteed renewable (b)..... | | | | | |
| 25.3 Non-renewable for stated reasons only (b)..... | | | | | |
| 25.4 Other accident only..... | | | | | |
| 25.5 All other (b)..... | | | | | |
| 25.6 Totals (sum of Lines 25.1 to 25.5)..... | | | | | |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)..... | | | | | |

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

NONE



DIRECT BUSINESS IN THE STATE OF MINNESOTA DURING THE YEAR 2022

LIFE INSURANCE

NAIC Group Code: 0000

NAIC Company Code: 56324

| | 1 Ordinary | 2 Credit Life (Group and Individual) | 3 Group | 4 Industrial | 5 Total |
|--|---------------|--|------------|-----------------|------------|
| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | | | | |
| 1. Life insurance..... | 405 | | | | 405 |
| 2. Annuity considerations..... | | XXX | | XXX | |
| 3. Deposit-type contract funds..... | | | | | |
| 4. Other considerations..... | | | | | |
| 5. Totals (Sum of Lines 1 to 4)..... | 405 | | | | 405 |
| DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS | | | | | |
| Life insurance: | | | | | |
| 6.1 Paid in cash or left on deposit | | | | | |
| 6.2 Applied to pay renewal premiums | | | | | |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period | | | | | |
| 6.4 Other | | | | | |
| 6.5 Totals (Sum of Lines 6.1 to 6.4)..... | | | | | |
| Annuites: | | | | | |
| 7.1 Paid in cash or left on deposit | | | | | |
| 7.2 Applied to provide paid-up annuities | | | | | |
| 7.3 Other | | | | | |
| 7.4 Totals (Sum of Lines 7.1 to 7.3)..... | | | | | |
| 8. Grand Totals (Lines 6.5 + 7.4)..... | | | | | |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | |
| 9. Death benefits..... | | 11,164 | | | 11,164 |
| 10. Matured endowments..... | | | | | |
| 11. Annuity benefits..... | | | | | |
| 12. Surrender values and withdrawals for life contracts..... | | 1,866 | | | 1,866 |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid..... | | | | | |
| 14. All other benefits, except accident and health..... | | | | | |
| 15. Totals..... | | 13,030 | | | 13,030 |
| Details of Write-Ins | | | | | |
| 1301..... | | | | | |
| 1302..... | | | | | |
| 1303..... | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page..... | | | | | |
| 1399. Totals (Lines 1301 through 1303 + 1398) (Line 13 above)..... | | | | | |

| | Ordinary | | Credit Life (Group and Individual) | | Group | | Industrial | | Total | |
|--|-------------------------------|-------------|--|-------------|----------------------|-------------|-------------------------------|-------------|-------------------------------|--------------|
| | 1 No. of Polis. & Certifs. | 2 Amount | 3 No. of Ind. Polis. & Gr. Certifs. | 4 Amount | 5 No. of Certifs. | 6 Amount | 7 No. of Polis. & Certifs. | 8 Amount | 9 No. of Polis. & Certifs. | 10 Amount |
| DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | | | | | | | | | | |
| 16. Unpaid December 31, prior year..... | | | | | | | | | | |
| 17. Incurred during current year..... | 1 | 6,963 | | | | | | | 1 | 6,963 |
| Settled during current year: | | | | | | | | | | |
| 18.1 By payment in full..... | | | | | | | | | | |
| 18.2 By payment on compromised claims..... | | | | | | | | | | |
| 18.3 Totals paid..... | | | | | | | | | | |
| 18.4 Reduction by compromise..... | | | | | | | | | | |
| 18.5 Amount rejected..... | | | | | | | | | | |
| 18.6 Total settlements..... | | | | | | | | | | |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)..... | 1 | 6,963 | | | | | | | 1 | 6,963 |
| POLICY EXHIBIT | | | | | | | | | | |
| 20. In force December 31, prior year..... | 82 | 551,464 | | (a)..... | | | | | 82 | 551,464 |
| 21. Issued during year..... | (4) | (10,188) | | | | | | | (4) | (10,188) |
| 22. Other changes to in force (Net)..... | | | | | | | | | | |
| 23. In force December 31 of current year..... | 78 | 541,276 | | (a)..... | | | | | 78 | 541,276 |

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

ACCIDENT AND HEALTH INSURANCE

| | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|--|----------------------|-----------------------------|---|-------------------------|-----------------------------|
| 24. Group policies (b)..... | | | | | |
| 24.1 Federal Employees Health Benefits Plan premium (b)..... | | | | | |
| 24.2 Credit (Group and Individual)..... | | | | | |
| 24.3 Collectively renewable policies/certificates (b)..... | | | | | |
| 24.4 Medicare Title XVIII exempt from state taxes or fees..... | | | | | |
| Other Individual Policies: | | | | | |
| 25.1 Non-cancelable (b)..... | | | | | |
| 25.2 Guaranteed renewable (b)..... | | | | | |
| 25.3 Non-renewable for stated reasons only (b)..... | | | | | |
| 25.4 Other accident only..... | | | | | |
| 25.5 All other (b)..... | | | | | |
| 25.6 Totals (sum of Lines 25.1 to 25.5)..... | | | | | |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)..... | | | | | |

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

NONE



DIRECT BUSINESS IN THE STATE OF MISSOURI DURING THE YEAR 2022

LIFE INSURANCE

NAIC Group Code: 0000

NAIC Company Code: 56324

| | 1 Ordinary | 2 Credit Life (Group and Individual) | 3 Group | 4 Industrial | 5 Total |
|--|---------------|---|------------|-----------------|------------|
| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | | | | |
| 1. Life insurance | | | | | |
| 2. Annuity considerations | | | | | |
| 3. Deposit-type contract funds | | XXX | | XXX | |
| 4. Other considerations | | | | | |
| 5. Totals (Sum of Lines 1 to 4) | | | | | |
| DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS | | | | | |
| Life insurance: | | | | | |
| 6.1 Paid in cash or left on deposit | | | | | |
| 6.2 Applied to pay renewal premiums | | | | | |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period | | | | | |
| 6.4 Other | | | | | |
| 6.5 Totals (Sum of Lines 6.1 to 6.4) | | | | | |
| Annuites: | | | | | |
| 7.1 Paid in cash or left on deposit | | | | | |
| 7.2 Applied to provide paid-up annuities | | | | | |
| 7.3 Other | | | | | |
| 7.4 Totals (Sum of Lines 7.1 to 7.3) | | | | | |
| 8. Grand Totals (Lines 6.5 + 7.4) | | | | | |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | |
| 9. Death benefits | | 12,499 | | | 12,499 |
| 10. Matured endowments | | | | | |
| 11. Annuity benefits | | | | | |
| 12. Surrender values and withdrawals for life contracts | | 2,559 | | | 2,559 |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid | | | | | |
| 14. All other benefits, except accident and health | | | | | |
| 15. Totals | | 15,058 | | | 15,058 |
| Details of Write-Ins | | | | | |
| 1301. | | | | | |
| 1302. | | | | | |
| 1303. | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page | | | | | |
| 1399. Totals (Lines 1301 through 1303 + 1398) (Line 13 above) | | | | | |

| | Ordinary | | Credit Life (Group and Individual) | | Group | | Industrial | | Total | |
|--|-------------------------------|-------------|--|-------------|----------------------|-------------|-------------------------------|-------------|-------------------------------|--------------|
| | 1 No. of Polis. & Certifs. | 2 Amount | 3 No. of Ind. Polis. & Gr. Certifs. | 4 Amount | 5 No. of Certifs. | 6 Amount | 7 No. of Polis. & Certifs. | 8 Amount | 9 No. of Polis. & Certifs. | 10 Amount |
| DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | | | | | | | | | | |
| 16. Unpaid December 31, prior year | 1 | 1,540 | | | | | | | 1 | 1,540 |
| 17. Incurred during current year | | | | | | | | | | |
| Settled during current year: | | | | | | | | | | |
| 18.1 By payment in full | | | | | | | | | | |
| 18.2 By payment on compromised claims | | | | | | | | | | |
| 18.3 Totals paid | | | | | | | | | | |
| 18.4 Reduction by compromise | | | | | | | | | | |
| 18.5 Amount rejected | | | | | | | | | | |
| 18.6 Total settlements | | | | | | | | | | |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6) | 1 | 1,540 | | | | | | | 1 | 1,540 |
| POLICY EXHIBIT | | | | | | | | | | |
| 20. In force December 31, prior year | 206 | 1,019,722 | (a) | | | | | | 206 | 1,019,722 |
| 21. Issued during year | | | | | | | | | | |
| 22. Other changes to in force (Net) | (4) | (15,584) | | | | | | | (4) | (15,584) |
| 23. In force December 31 of current year | 202 | 1,004,138 | (a) | | | | | | 202 | 1,004,138 |

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

ACCIDENT AND HEALTH INSURANCE

| | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|---|----------------------|-----------------------------|---|-------------------------|-----------------------------|
| 24. Group policies (b) | | | | | |
| 24.1 Federal Employees Health Benefits Plan premium (b) | | | | | |
| 24.2 Credit (Group and Individual) | | | | | |
| 24.3 Collectively renewable policies/certificates (b) | | | | | |
| 24.4 Medicare Title XVIII exempt from state taxes or fees | | | | | |
| Other Individual Policies: | | | | | |
| 25.1 Non-cancelable (b) | | | | | |
| 25.2 Guaranteed renewable (b) | | | | | |
| 25.3 Non-renewable for stated reasons only (b) | | | | | |
| 25.4 Other accident only | | | | | |
| 25.5 All other (b) | | | | | |
| 25.6 Totals (sum of Lines 25.1 to 25.5) | | | | | |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) | | | | | |

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

NONE



DIRECT BUSINESS IN THE STATE OF NEBRASKA DURING THE YEAR 2022

LIFE INSURANCE

NAIC Group Code: 0000

NAIC Company Code: 56324

| | 1 Ordinary | 2 Credit Life (Group and Individual) | 3 Group | 4 Industrial | 5 Total |
|--|---------------|---|------------|-----------------|------------|
| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | | | | |
| 1. Life insurance..... | 797 | | | | 797 |
| 2. Annuity considerations..... | | XXX | | XXX | |
| 3. Deposit-type contract funds..... | | | | | |
| 4. Other considerations..... | | | | | |
| 5. Totals (Sum of Lines 1 to 4)..... | 797 | | | | 797 |
| DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS | | | | | |
| Life insurance: | | | | | |
| 6.1 Paid in cash or left on deposit | | | | | |
| 6.2 Applied to pay renewal premiums | | | | | |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period | | | | | |
| 6.4 Other | | | | | |
| 6.5 Totals (Sum of Lines 6.1 to 6.4)..... | | | | | |
| Annuites: | | | | | |
| 7.1 Paid in cash or left on deposit | | | | | |
| 7.2 Applied to provide paid-up annuities | | | | | |
| 7.3 Other | | | | | |
| 7.4 Totals (Sum of Lines 7.1 to 7.3)..... | | | | | |
| 8. Grand Totals (Lines 6.5 + 7.4)..... | | | | | |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | |
| 9. Death benefits..... | | | | | |
| 10. Matured endowments..... | | | | | |
| 11. Annuity benefits..... | 26,017 | | | | 26,017 |
| 12. Surrender values and withdrawals for life contracts..... | 10,417 | | | | 10,417 |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid..... | | | | | |
| 14. All other benefits, except accident and health..... | | | | | |
| 15. Totals..... | 36,434 | | | | 36,434 |
| Details of Write-Ins | | | | | |
| 1301..... | | | | | |
| 1302..... | | | | | |
| 1303..... | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page..... | | | | | |
| 1399. Totals (Lines 1301 through 1303 + 1398) (Line 13 above)..... | | | | | |

| | Ordinary | | Credit Life (Group and Individual) | | Group | | Industrial | | Total | |
|--|-------------------------------|-------------|--|-------------|----------------------|-------------|-------------------------------|-------------|-------------------------------|--------------|
| | 1 No. of Polis. & Certifs. | 2 Amount | 3 No. of Ind. Polis. & Gr. Certifs. | 4 Amount | 5 No. of Certifs. | 6 Amount | 7 No. of Polis. & Certifs. | 8 Amount | 9 No. of Polis. & Certifs. | 10 Amount |
| DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | | | | | | | | | | |
| 16. Unpaid December 31, prior year..... | | | | | | | | | | |
| 17. Incurred during current year..... | | | | | | | | | | |
| Settled during current year: | | | | | | | | | | |
| 18.1 By payment in full..... | | | | | | | | | | |
| 18.2 By payment on compromised claims..... | | | | | | | | | | |
| 18.3 Totals paid..... | | | | | | | | | | |
| 18.4 Reduction by compromise..... | | | | | | | | | | |
| 18.5 Amount rejected..... | | | | | | | | | | |
| 18.6 Total settlements..... | | | | | | | | | | |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)..... | | | | | | | | | | |
| POLICY EXHIBIT | | | | | | | | | | |
| 20. In force December 31, prior year..... | 125 | 956,058 | (a)..... | | | | | | 125 | 956,058 |
| 21. Issued during year..... | (5) | (9,548) | | | | | | | (5) | (9,548) |
| 22. Other changes to in force (Net)..... | | | | | | | | | | |
| 23. In force December 31 of current year..... | 120 | 946,510 | (a)..... | | | | | | 120 | 946,510 |

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

ACCIDENT AND HEALTH INSURANCE

| | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|--|----------------------|-----------------------------|---|-------------------------|-----------------------------|
| 24. Group policies (b)..... | | | | | |
| 24.1 Federal Employees Health Benefits Plan premium (b)..... | | | | | |
| 24.2 Credit (Group and Individual)..... | | | | | |
| 24.3 Collectively renewable policies/certificates (b)..... | | | | | |
| 24.4 Medicare Title XVIII exempt from state taxes or fees..... | | | | | |
| Other Individual Policies: | | | | | |
| 25.1 Non-cancelable (b)..... | | | | | |
| 25.2 Guaranteed renewable (b)..... | | | | | |
| 25.3 Non-renewable for stated reasons only (b)..... | | | | | |
| 25.4 Other accident only..... | | | | | |
| 25.5 All other (b)..... | | | | | |
| 25.6 Totals (sum of Lines 25.1 to 25.5)..... | | | | | |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)..... | | | | | |

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

NONE



DIRECT BUSINESS IN THE STATE OF NEW YORK DURING THE YEAR 2022

LIFE INSURANCE

NAIC Group Code: 0000

NAIC Company Code: 56324

| | | 1 Ordinary | 2 Credit Life (Group and Individual) | 3 Group | 4 Industrial | 5 Total |
|---|--|---------------|--|------------|-----------------|------------|
| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | | | | | |
| 1. Life insurance..... | | 377 | | | | 377 |
| 2. Annuity considerations..... | | | XXX | | XXX | |
| 3. Deposit-type contract funds..... | | | | | | |
| 4. Other considerations..... | | | | | | |
| 5. Totals (Sum of Lines 1 to 4)..... | | 377 | | | | 377 |
| DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS | | | | | | |
| Life insurance: | | | | | | |
| 6.1 Paid in cash or left on deposit..... | | | | | | |
| 6.2 Applied to pay renewal premiums..... | | | | | | |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period..... | | | | | | |
| 6.4 Other..... | | | | | | |
| 6.5 Totals (Sum of Lines 6.1 to 6.4)..... | | | | | | |
| Annuites: | | | | | | |
| 7.1 Paid in cash or left on deposit..... | | | | | | |
| 7.2 Applied to provide paid-up annuities..... | | | | | | |
| 7.3 Other..... | | | | | | |
| 7.4 Totals (Sum of Lines 7.1 to 7.3)..... | | | | | | |
| 8. Grand Totals (Lines 6.5 + 7.4)..... | | | | | | |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | | |
| 9. Death benefits..... | | | | | | |
| 10. Matured endowments..... | | | | | | |
| 11. Annuity benefits..... | | | 62,278 | | | 62,278 |
| 12. Surrender values and withdrawals for life contracts..... | | | | | | |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid..... | | | | | | |
| 14. All other benefits, except accident and health..... | | | | | | |
| 15. Totals..... | | 62,278 | | | | 62,278 |
| Details of Write-Ins | | | | | | |
| 1301..... | | | | | | |
| 1302..... | | | | | | |
| 1303..... | | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page..... | | | | | | |
| 1399. Totals (Lines 1301 through 1303 + 1398) (Line 13 above)..... | | | | | | |

| | Ordinary | | Credit Life (Group and Individual) | | Group | | Industrial | | Total | |
|--|-------------------------------|-------------|--|-------------|----------------------|-------------|-------------------------------|-------------|-------------------------------|--------------|
| | 1 No. of Polis. & Certifs. | 2 Amount | 3 No. of Ind. Polis. & Gr. Certifs. | 4 Amount | 5 No. of Certifs. | 6 Amount | 7 No. of Polis. & Certifs. | 8 Amount | 9 No. of Polis. & Certifs. | 10 Amount |
| DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | | | | | | | | | | |
| 16. Unpaid December 31, prior year..... | | | | | | | | | | |
| 17. Incurred during current year..... | | | | | | | | | | |
| Settled during current year: | | | | | | | | | | |
| 18.1 By payment in full..... | | | | | | | | | | |
| 18.2 By payment on compromised claims..... | | | | | | | | | | |
| 18.3 Totals paid..... | | | | | | | | | | |
| 18.4 Reduction by compromise..... | | | | | | | | | | |
| 18.5 Amount rejected..... | | | | | | | | | | |
| 18.6 Total settlements..... | | | | | | | | | | |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)..... | | | | | | | | | | |
| POLICY EXHIBIT | | | | | | | | | | |
| 20. In force December 31, prior year..... | 87 | 361,667 | | (a)..... | | | | | 87 | 361,667 |
| 21. Issued during year..... | | | | | | | | | | |
| 22. Other changes to in force (Net)..... | | 2,478 | | | | | | | | 2,478 |
| 23. In force December 31 of current year..... | 87 | 364,145 | | (a)..... | | | | | 87 | 364,145 |

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

ACCIDENT AND HEALTH INSURANCE

| | | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|--|--|----------------------|-----------------------------|--|-------------------------|--------------------------------|
| 24. Group policies (b)..... | | | | | | |
| 24.1 Federal Employees Health Benefits Plan premium (b)..... | | | | | | |
| 24.2 Credit (Group and Individual)..... | | | | | | |
| 24.3 Collectively renewable policies/certificates (b)..... | | | | | | |
| 24.4 Medicare Title XVIII exempt from state taxes or fees..... | | | | | | |
| 25.1 Non-cancelable (b)..... | | | | | | |
| 25.2 Guaranteed renewable (b)..... | | | | | | |
| 25.3 Non-renewable for stated reasons only (b)..... | | | | | | |
| 25.4 Other accident only..... | | | | | | |
| 25.5 All other (b)..... | | | | | | |
| 25.6 Totals (sum of Lines 25.1 to 25.5)..... | | | | | | |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)..... | | | | | | |

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

NONE



DIRECT BUSINESS IN THE STATE OF OHIO DURING THE YEAR 2022

LIFE INSURANCE

NAIC Group Code: 0000

NAIC Company Code: 56324

| | 1 Ordinary | 2 Credit Life (Group and Individual) | 3 Group | 4 Industrial | 5 Total |
|--|---------------|---|------------|-----------------|------------|
| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | | | | |
| 1. Life insurance..... | 29,860 | | | | 29,860 |
| 2. Annuity considerations..... | 1,949,654 | | | | 1,949,654 |
| 3. Deposit-type contract funds..... | | XXX | | XXX | |
| 4. Other considerations..... | | | | | |
| 5. Totals (Sum of Lines 1 to 4)..... | 1,979,514 | | | | 1,979,514 |
| DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS | | | | | |
| Life insurance: | | | | | |
| 6.1 Paid in cash or left on deposit | | | | | |
| 6.2 Applied to pay renewal premiums | | | | | |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period | | | | | |
| 6.4 Other | | | | | |
| 6.5 Totals (Sum of Lines 6.1 to 6.4)..... | | | | | |
| Annuites: | | | | | |
| 7.1 Paid in cash or left on deposit | | | | | |
| 7.2 Applied to provide paid-up annuities | | | | | |
| 7.3 Other | | | | | |
| 7.4 Totals (Sum of Lines 7.1 to 7.3)..... | | | | | |
| 8. Grand Totals (Lines 6.5 + 7.4)..... | | | | | |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | |
| 9. Death benefits..... | 161,943 | | | | 161,943 |
| 10. Matured endowments..... | | | | | |
| 11. Annuity benefits..... | 608,987 | | | | 608,987 |
| 12. Surrender values and withdrawals for life contracts..... | 20,961 | | | | 20,961 |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid..... | | | | | |
| 14. All other benefits, except accident and health..... | | | | | |
| 15. Totals..... | 791,891 | | | | 791,891 |
| Details of Write-Ins | | | | | |
| 1301..... | | | | | |
| 1302..... | | | | | |
| 1303..... | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page..... | | | | | |
| 1399. Totals (Lines 1301 through 1303 + 1398) (Line 13 above)..... | | | | | |

| | Ordinary | | Credit Life (Group and Individual) | | Group | | Industrial | | Total | |
|--|-------------------------------|-------------|--|-------------|----------------------|-------------|-------------------------------|-------------|-------------------------------|--------------|
| | 1 No. of Polis. & Certifs. | 2 Amount | 3 No. of Ind. Polis. & Gr. Certifs. | 4 Amount | 5 No. of Certifs. | 6 Amount | 7 No. of Polis. & Certifs. | 8 Amount | 9 No. of Polis. & Certifs. | 10 Amount |
| DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | | | | | | | | | | |
| 16. Unpaid December 31, prior year..... | 7 | 15,526 | | | | | | | 7 | 15,526 |
| 17. Incurred during current year..... | 20 | 77,883 | | | | | | | 20 | 77,883 |
| Settled during current year: | | | | | | | | | | |
| 18.1 By payment in full..... | 8 | 24,317 | | | | | | | 8 | 24,317 |
| 18.2 By payment on compromised claims..... | | | | | | | | | | |
| 18.3 Totals paid..... | 8 | 24,317 | | | | | | | 8 | 24,317 |
| 18.4 Reduction by compromise..... | | | | | | | | | | |
| 18.5 Amount rejected..... | | | | | | | | | | |
| 18.6 Total settlements..... | 8 | 24,317 | | | | | | | 8 | 24,317 |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)..... | 19 | 69,092 | | | | | | | 19 | 69,092 |
| POLICY EXHIBIT | | | | | | | | | | |
| 20. In force December 31, prior year..... | 1,827 | 9,588,631 | | (a)..... | | | | | 1,827 | 9,588,631 |
| 21. Issued during year..... | 13 | 49,000 | | | | | | | 13 | 49,000 |
| 22. Other changes to in force (Net)..... | (53) | (178,885) | | | | | | | (53) | (178,885) |
| 23. In force December 31 of current year..... | 1,787 | 9,458,746 | | (a)..... | | | | | 1,787 | 9,458,746 |

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

ACCIDENT AND HEALTH INSURANCE

| | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|--|----------------------|-----------------------------|---|-------------------------|-----------------------------|
| 24. Group policies (b)..... | | | | | |
| 24.1 Federal Employees Health Benefits Plan premium (b)..... | | | | | |
| 24.2 Credit (Group and Individual)..... | | | | | |
| 24.3 Collectively renewable policies/certificates (b)..... | | | | | |
| 24.4 Medicare Title XVIII exempt from state taxes or fees..... | | | | | |
| Other Individual Policies: | | | | | |
| 25.1 Non-cancelable (b)..... | | | | | |
| 25.2 Guaranteed renewable (b)..... | | | | | |
| 25.3 Non-renewable for stated reasons only (b)..... | | | | | |
| 25.4 Other accident only..... | | | | | |
| 25.5 All other (b)..... | | | | | |
| 25.6 Totals (sum of Lines 25.1 to 25.5)..... | | | | | |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)..... | | | | | |

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

NONE



DIRECT BUSINESS IN THE STATE OF PENNSYLVANIA DURING THE YEAR 2022

LIFE INSURANCE

NAIC Group Code: 0000

NAIC Company Code: 56324

| | 1 Ordinary | 2 Credit Life (Group and Individual) | 3 Group | 4 Industrial | 5 Total |
|--|---------------|--|------------|-----------------|------------|
| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | | | | |
| 1. Life insurance..... | | | | | |
| 2. Annuity considerations..... | | | | | |
| 3. Deposit-type contract funds..... | | XXX | | XXX | |
| 4. Other considerations..... | | | | | |
| 5. Totals (Sum of Lines 1 to 4)..... | | | | | |
| DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS | | | | | |
| Life insurance: | | | | | |
| 6.1 Paid in cash or left on deposit | | | | | |
| 6.2 Applied to pay renewal premiums | | | | | |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period | | | | | |
| 6.4 Other | | | | | |
| 6.5 Totals (Sum of Lines 6.1 to 6.4)..... | | | | | |
| Annuites: | | | | | |
| 7.1 Paid in cash or left on deposit | | | | | |
| 7.2 Applied to provide paid-up annuities | | | | | |
| 7.3 Other | | | | | |
| 7.4 Totals (Sum of Lines 7.1 to 7.3)..... | | | | | |
| 8. Grand Totals (Lines 6.5 + 7.4)..... | | | | | |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | |
| 9. Death benefits..... | 1,602 | | | | 1,602 |
| 10. Matured endowments..... | | | | | |
| 11. Annuity benefits..... | | | | | |
| 12. Surrender values and withdrawals for life contracts..... | | | | | |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid..... | | | | | |
| 14. All other benefits, except accident and health..... | | | | | |
| 15. Totals..... | 1,602 | | | | 1,602 |
| Details of Write-Ins | | | | | |
| 1301..... | | | | | |
| 1302..... | | | | | |
| 1303..... | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page..... | | | | | |
| 1399. Totals (Lines 1301 through 1303 + 1398) (Line 13 above)..... | | | | | |

| | Ordinary | | Credit Life (Group and Individual) | | Group | | Industrial | | Total | |
|--|-------------------------------|-------------|--|-------------|----------------------|-------------|-------------------------------|-------------|-------------------------------|--------------|
| | 1 No. of Polis. & Certifs. | 2 Amount | 3 No. of Ind. Polis. & Gr. Certifs. | 4 Amount | 5 No. of Certifs. | 6 Amount | 7 No. of Polis. & Certifs. | 8 Amount | 9 No. of Polis. & Certifs. | 10 Amount |
| DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | | | | | | | | | | |
| 16. Unpaid December 31, prior year..... | | | | | | | | | | |
| 17. Incurred during current year..... | 1 | 1,602 | | | | | | | | 1 |
| Settled during current year: | | | | | | | | | | 1,602 |
| 18.1 By payment in full..... | | | | | | | | | | |
| 18.2 By payment on compromised claims..... | | | | | | | | | | |
| 18.3 Totals paid..... | | | | | | | | | | |
| 18.4 Reduction by compromise..... | | | | | | | | | | |
| 18.5 Amount rejected..... | | | | | | | | | | |
| 18.6 Total settlements..... | | | | | | | | | | |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)..... | 1 | 1,602 | | | | | | | | 1,602 |
| POLICY EXHIBIT | | | | | | | | | | |
| 20. In force December 31, prior year..... | 103 | 466,789 | (a) | | | | | | 103 | 466,789 |
| 21. Issued during year..... | (1) | 1,049 | | | | | | | (1) | 1,049 |
| 22. Other changes to in force (Net)..... | | | | | | | | | | |
| 23. In force December 31 of current year..... | 102 | 467,838 | (a) | | | | | | 102 | 467,838 |

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

ACCIDENT AND HEALTH INSURANCE

| | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|--|----------------------|-----------------------------|--|-------------------------|--------------------------------|
| 24. Group policies (b)..... | | | | | |
| 24.1 Federal Employees Health Benefits Plan premium (b)..... | | | | | |
| 24.2 Credit (Group and Individual)..... | | | | | |
| 24.3 Collectively renewable policies/certificates (b)..... | | | | | |
| 24.4 Medicare Title XVIII exempt from state taxes or fees..... | | | | | |
| Other Individual Policies: | | | | | |
| 25.1 Non-cancelable (b)..... | | | | | |
| 25.2 Guaranteed renewable (b)..... | | | | | |
| 25.3 Non-renewable for stated reasons only (b)..... | | | | | |
| 25.4 Other accident only..... | | | | | |
| 25.5 All other (b)..... | | | | | |
| 25.6 Totals (sum of Lines 25.1 to 25.5)..... | | | | | |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)..... | | | | | |

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

NONE



DIRECT BUSINESS IN THE STATE OF WISCONSIN DURING THE YEAR 2022

LIFE INSURANCE

NAIC Group Code: 0000

NAIC Company Code: 56324

| | 1 Ordinary | 2 Credit Life (Group and Individual) | 3 Group | 4 Industrial | 5 Total |
|---|---------------|--|------------|-----------------|------------|
| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | | | | |
| 1. Life insurance..... | | | | | |
| 2. Annuity considerations..... | | | | | |
| 3. Deposit-type contract funds..... | | XXX | | XXX | |
| 4. Other considerations..... | | | | | |
| 5. Totals (Sum of Lines 1 to 4)..... | | | | | |
| DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS | | | | | |
| Life insurance: | | | | | |
| 6.1 Paid in cash or left on deposit..... | | | | | |
| 6.2 Applied to pay renewal premiums..... | | | | | |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period..... | | | | | |
| 6.4 Other..... | | | | | |
| 6.5 Totals (Sum of Lines 6.1 to 6.4)..... | | | | | |
| Annuites: | | | | | |
| 7.1 Paid in cash or left on deposit..... | | | | | |
| 7.2 Applied to provide paid-up annuities..... | | | | | |
| 7.3 Other..... | | | | | |
| 7.4 Totals (Sum of Lines 7.1 to 7.3)..... | | | | | |
| 8. Grand Totals (Lines 6.5 + 7.4)..... | | | | | |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | |
| 9. Death benefits..... | | 2,073 | | | 2,073 |
| 10. Matured endowments..... | | | | | |
| 11. Annuity benefits..... | | | | | |
| 12. Surrender values and withdrawals for life contracts..... | | 1,332 | | | 1,332 |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid..... | | | | | |
| 14. All other benefits, except accident and health..... | | | | | |
| 15. Totals..... | | 3,405 | | | 3,405 |
| Details of Write-Ins | | | | | |
| 1301..... | | | | | |
| 1302..... | | | | | |
| 1303..... | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page..... | | | | | |
| 1399. Totals (Lines 1301 through 1303 + 1398) (Line 13 above)..... | | | | | |

| | Ordinary | | Credit Life (Group and Individual) | | Group | | Industrial | | Total | |
|--|-------------------------------|-------------|--|-------------|----------------------|-------------|-------------------------------|-------------|-------------------------------|--------------|
| | 1 No. of Polis. & Certifs. | 2 Amount | 3 No. of Ind. Polis. & Gr. Certifs. | 4 Amount | 5 No. of Certifs. | 6 Amount | 7 No. of Polis. & Certifs. | 8 Amount | 9 No. of Polis. & Certifs. | 10 Amount |
| DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | | | | | | | | | | |
| 16. Unpaid December 31, prior year..... | | | | | | | | | | |
| 17. Incurred during current year..... | | | | | | | | | | |
| Settled during current year: | | | | | | | | | | |
| 18.1 By payment in full..... | | | | | | | | | | |
| 18.2 By payment on compromised claims..... | | | | | | | | | | |
| 18.3 Totals paid..... | | | | | | | | | | |
| 18.4 Reduction by compromise..... | | | | | | | | | | |
| 18.5 Amount rejected..... | | | | | | | | | | |
| 18.6 Total settlements..... | | | | | | | | | | |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)..... | | | | | | | | | | |
| POLICY EXHIBIT | | | | | | | | | | |
| 20. In force December 31, prior year..... | 27 | 219,868 | (a)..... | | | | | | 27 | 219,868 |
| 21. Issued during year..... | (2) | (9,676) | | | | | | | (2) | (9,676) |
| 22. Other changes to in force (Net)..... | | | | | | | | | | |
| 23. In force December 31 of current year..... | 25 | 210,192 | (a)..... | | | | | | 25 | 210,192 |

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

ACCIDENT AND HEALTH INSURANCE

| | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|--|----------------------|-----------------------------|--|-------------------------|--------------------------------|
| 24. Group policies (b)..... | | | | | |
| 24.1 Federal Employees Health Benefits Plan premium (b)..... | | | | | |
| 24.2 Credit (Group and Individual)..... | | | | | |
| 24.3 Collectively renewable policies/certificates (b)..... | | | | | |
| 24.4 Medicare Title XVIII exempt from state taxes or fees..... | | | | | |
| Other Individual Policies: | | | | | |
| 25.1 Non-cancelable (b)..... | | | | | |
| 25.2 Guaranteed renewable (b)..... | | | | | |
| 25.3 Non-renewable for stated reasons only (b)..... | | | | | |
| 25.4 Other accident only..... | | | | | |
| 25.5 All other (b)..... | | | | | |
| 25.6 Totals (sum of Lines 25.1 to 25.5)..... | | | | | |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)..... | | | | | |

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

NONE



GRAND TOTAL DURING THE YEAR 2022

LIFE INSURANCE

NAIC Group Code: 0000

NAIC Company Code: 56324

| | 1 Ordinary | 2 Credit Life (Group and Individual) | 3 Group | 4 Industrial | 5 Total |
|--|---------------|--|------------|-----------------|------------|
| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | | | | |
| 1. Life insurance..... | 37,242 | | | | 37,242 |
| 2. Annuity considerations..... | 2,011,204 | | | | 2,011,204 |
| 3. Deposit-type contract funds..... | | XXX | | XXX | |
| 4. Other considerations..... | | | | | |
| 5. Totals (Sum of Lines 1 to 4)..... | 2,048,446 | | | | 2,048,446 |
| DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS | | | | | |
| Life insurance: | | | | | |
| 6.1 Paid in cash or left on deposit | | | | | |
| 6.2 Applied to pay renewal premiums | | | | | |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period | | | | | |
| 6.4 Other | | | | | |
| 6.5 Totals (Sum of Lines 6.1 to 6.4)..... | | | | | |
| Annuites: | | | | | |
| 7.1 Paid in cash or left on deposit | | | | | |
| 7.2 Applied to provide paid-up annuities | | | | | |
| 7.3 Other | | | | | |
| 7.4 Totals (Sum of Lines 7.1 to 7.3)..... | | | | | |
| 8. Grand Totals (Lines 6.5 + 7.4)..... | | | | | |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | |
| 9. Death benefits..... | 266,984 | | | | 266,984 |
| 10. Matured endowments..... | | | | | |
| 11. Annuity benefits..... | 789,618 | | | | 789,618 |
| 12. Surrender values and withdrawals for life contracts..... | 53,310 | | | | 53,310 |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid..... | | | | | |
| 14. All other benefits, except accident and health..... | | | | | |
| 15. Totals..... | 1,109,912 | | | | 1,109,912 |
| Details of Write-Ins | | | | | |
| 1301..... | | | | | |
| 1302..... | | | | | |
| 1303..... | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page..... | | | | | |
| 1399. Totals (Lines 1301 through 1303 + 1398) (Line 13 above)..... | | | | | |

| | Ordinary | | Credit Life (Group and Individual) | | Group | | Industrial | | Total | |
|--|-------------------------------|-------------|--|-------------|----------------------|-------------|-------------------------------|-------------|-------------------------------|--------------|
| | 1 No. of Polis. & Certifs. | 2 Amount | 3 No. of Ind. Polis. & Gr. Certifs. | 4 Amount | 5 No. of Certifs. | 6 Amount | 7 No. of Polis. & Certifs. | 8 Amount | 9 No. of Polis. & Certifs. | 10 Amount |
| DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | | | | | | | | | | |
| 16. Unpaid December 31, prior year..... | 13 | 30,264 | | | | | | | 13 | 30,264 |
| 17. Incurred during current year..... | 30 | 106,990 | | | | | | | 30 | 106,990 |
| Settled during current year: | | | | | | | | | | |
| 18.1 By payment in full..... | 12 | 33,336 | | | | | | | 12 | 33,336 |
| 18.2 By payment on compromised claims..... | | | | | | | | | | |
| 18.3 Totals paid..... | 12 | 33,336 | | | | | | | 12 | 33,336 |
| 18.4 Reduction by compromise..... | | | | | | | | | | |
| 18.5 Amount rejected..... | | | | | | | | | | |
| 18.6 Total settlements..... | 12 | 33,336 | | | | | | | 12 | 33,336 |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)..... | 31 | 103,918 | | | | | | | 31 | 103,918 |
| POLICY EXHIBIT | | | | | | | | | | |
| 20. In force December 31, prior year..... | 3,394 | 18,293,888 | | (a)..... | | | | | 3,394 | 18,293,888 |
| 21. Issued during year..... | 16 | 74,000 | | | | | | | 16 | 74,000 |
| 22. Other changes to in force (Net)..... | (101) | (307,788) | | | | | | | (101) | (307,788) |
| 23. In force December 31 of current year..... | 3,309 | 18,060,100 | | (a)..... | | | | | 3,309 | 18,060,100 |

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

ACCIDENT AND HEALTH INSURANCE

| | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|--|----------------------|-----------------------------|---|-------------------------|-----------------------------|
| 24. Group policies (b)..... | | | | | |
| 24.1 Federal Employees Health Benefits Plan premium (b)..... | | | | | |
| 24.2 Credit (Group and Individual)..... | | | | | |
| 24.3 Collectively renewable policies/certificates (b)..... | | | | | |
| 24.4 Medicare Title XVIII exempt from state taxes or fees..... | | | | | |
| Other Individual Policies: | | | | | |
| 25.1 Non-cancelable (b)..... | | | | | |
| 25.2 Guaranteed renewable (b)..... | | | | | |
| 25.3 Non-renewable for stated reasons only (b)..... | | | | | |
| 25.4 Other accident only..... | | | | | |
| 25.5 All other (b)..... | | | | | |
| 25.6 Totals (sum of Lines 25.1 to 25.5)..... | | | | | |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)..... | | | | | |

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

NONE

FORM FOR CALCULATING THE INTEREST MAINTENANCE RESERVE

INTEREST MAINTENANCE RESERVE

| | 1 Amount |
|---|-------------|
| 1. Reserve as of December 31, prior year..... | 21,855 |
| 2. Current year's realized pre-tax capital gains/(losses) of \$ transferred into the reserve net of taxes of \$ | 4,642 |
| 3. Adjustment for current year's liability gains/(losses) released from the reserve..... | ..... |
| 4. Balance before reduction for amount transferred to Summary of Operations (Line 1 + Line 2 + Line 3)..... | 26,497 |
| 5. Current year's amortization released to Summary of Operations (Amortization, Line 1, Column 4)..... | 1,819 |
| 6. Reserve as of December 31, current year (Line 4 minus Line 5)..... | 24,678 |

AMORTIZATION

| Year of Amortization | 1 Reserve as of December 31, Prior Year | 2 Current Year's Realized Capital Gains/(Losses) Transferred into the Reserve Net of Taxes | 3 Adjustment for Current Year's Liability Gains/ (Losses) Released From the Reserve | 4 Balance Before Reduction for Current Year's Amortization (Cols. 1+2+3) |
|--------------------------------|--|---|--|--|
| 1. 2022..... | 1,231 | 588 | ..... | 1,819 |
| 2. 2023..... | (1,252) | 1,163 | ..... | (89) |
| 3. 2024..... | (3,219) | 1,059 | ..... | (2,160) |
| 4. 2025..... | (5,613) | 796 | ..... | (4,817) |
| 5. 2026..... | (6,997) | 527 | ..... | (6,470) |
| 6. 2027..... | (6,511) | 246 | ..... | (6,265) |
| 7. 2028..... | (4,614) | 92 | ..... | (4,522) |
| 8. 2029..... | (1,219) | 73 | ..... | (1,146) |
| 9. 2030..... | 2,952 | 53 | ..... | 3,005 |
| 10. 2031..... | 6,063 | 33 | ..... | 6,096 |
| 11. 2032..... | 7,043 | 11 | ..... | 7,054 |
| 12. 2033..... | 6,961 | ..... | ..... | 6,961 |
| 13. 2034..... | 6,335 | ..... | ..... | 6,335 |
| 14. 2035..... | 5,314 | ..... | ..... | 5,314 |
| 15. 2036..... | 4,304 | ..... | ..... | 4,304 |
| 16. 2037..... | 3,300 | ..... | ..... | 3,300 |
| 17. 2038..... | 2,349 | ..... | ..... | 2,349 |
| 18. 2039..... | 1,533 | ..... | ..... | 1,533 |
| 19. 2040..... | 905 | ..... | ..... | 905 |
| 20. 2041..... | 542 | ..... | ..... | 542 |
| 21. 2042..... | 407 | ..... | ..... | 407 |
| 22. 2043..... | 406 | ..... | ..... | 406 |
| 23. 2044..... | 426 | ..... | ..... | 426 |
| 24. 2045..... | 381 | ..... | ..... | 381 |
| 25. 2046..... | 292 | ..... | ..... | 292 |
| 26. 2047..... | 232 | ..... | ..... | 232 |
| 27. 2048..... | 166 | ..... | ..... | 166 |
| 28. 2049..... | 106 | ..... | ..... | 106 |
| 29. 2050..... | 32 | ..... | ..... | 32 |
| 30. 2051..... | ..... | ..... | ..... | ..... |
| 31. 2052 and Later..... | ..... | ..... | ..... | ..... |
| 32. Total (Lines 1 to 31)..... | 21,855 | 4,642 | ..... | 26,497 |

ASSET VALUATION RESERVE

| | Default Component | | | Equity Component | | | 7 Total Amount (Cols. 3 + 6) |
|--|-----------------------------------|---------------------|--------------------------|------------------|--|--------------------------|------------------------------------|
| | 1 Other Than Mortgage Loans | 2 Mortgage Loans | 3 Total (Cols. 1 + 2) | 4 | 5 Real Estate and Other Invested Assets | 6 Total (Cols. 4 + 5) | |
| 1. Reserve as of December 31, prior year..... | 198,894 | | 198,894 | 92,708 | 12,322 | 105,030 | 303,924 |
| 2. Realized capital gains/(losses) net of taxes-General Account | (3,768) | | (3,768) | | (3,681) | (3,681) | (7,449) |
| 3. Realized capital gains/(losses) net of taxes-Separate Accounts | | | | | | | |
| 4. Unrealized capital gains/(losses) net of deferred taxes-General Account | (254,113) | | (254,113) | (25,195) | | (25,195) | (279,308) |
| 5. Unrealized capital gains/(losses) net of deferred taxes-Separate Accounts | | | | | | | |
| 6. Capital gains credited/(losses charged) to contract benefits, payments or reserves..... | | | | | | | |
| 7. Basic contribution..... | 63,768 | | 63,768 | — | — | — | 63,768 |
| 8. Accumulated balances (Lines 1 through 5 - 6 + 7)..... | 4,781 | | 4,781 | 67,513 | 8,641 | 76,154 | 80,935 |
| 9. Maximum reserve..... | 295,767 | | 295,767 | 97,892 | 12,191 | 110,083 | 405,850 |
| 10. Reserve objective..... | 183,945 | | 183,945 | 97,892 | 12,191 | 110,083 | 294,028 |
| 11. 20% of (Line 10 - Line 8)..... | 35,833 | | 35,833 | 6,076 | 710 | 6,786 | 42,619 |
| 12. Balance before transfers (Lines 8 + 11)..... | 40,614 | | 40,614 | 73,589 | 9,351 | 82,939 | 123,554 |
| 13. Transfers..... | | | | | | | |
| 14. Voluntary contribution..... | | | | | | | |
| 15. Adjustment down to maximum/up to zero..... | 255,153 | | 255,153 | 24,303 | 2,840 | 27,143 | 282,296 |
| 16. Reserve as of December 31, current year (Lines 12 + 13 + 14 + 15)..... | 295,767 | | 295,767 | 97,892 | 12,191 | 110,082 | 405,850 |

ASSET VALUATION RESERVE
BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS
DEFAULT COMPONENT

| Line Number | NAIC Designation | Description | 1 Book / Adjusted Carrying Value | 2 Reclassify Related Party Encumbrances | 3 Add Third Party Encumbrances | 4 Balance for AVR Reserve Calculations (Cols. 1+2+3) | Basic Contribution | | Reserve Objective | | Maximum Reserve | |
|-------------------------|------------------|--|-------------------------------------|--|-----------------------------------|---|--------------------|-------------------------|-------------------|-------------------------|-----------------|--------------------------|
| | | | | | | | 5 Factor | 6 Amount (Cols. 4x5) | 7 Factor | 8 Amount (Cols. 4x7) | 9 Factor | 10 Amount (Cols. 4x9) |
| LONG-TERM BONDS | | | | | | | | | | | | |
| 1 | | Exempt Obligations | | XXX | XXX | | — | — | — | — | — | |
| 2.1 | 1 | NAIC Designation Category 1.A | 312,679 | XXX | XXX | 312,679 | 0.0002 | 63 | 0.0007 | 219 | 0.0013 | |
| 2.2 | 1 | NAIC Designation Category 1.B | 300,083 | XXX | XXX | 300,083 | 0.0004 | 120 | 0.0011 | 330 | 0.0023 | |
| 2.3 | 1 | NAIC Designation Category 1.C | 208,839 | XXX | XXX | 208,839 | 0.0006 | 125 | 0.0018 | 376 | 0.0035 | |
| 2.4 | 1 | NAIC Designation Category 1.D | 156,143 | XXX | XXX | 156,143 | 0.0007 | 109 | 0.0022 | 344 | 0.0044 | |
| 2.5 | 1 | NAIC Designation Category 1.E | 915,996 | XXX | XXX | 915,996 | 0.0009 | 824 | 0.0027 | 2,473 | 0.0055 | |
| 2.6 | 1 | NAIC Designation Category 1.F | 764,726 | XXX | XXX | 764,726 | 0.0011 | 841 | 0.0034 | 2,600 | 0.0068 | |
| 2.7 | 1 | NAIC Designation Category 1.G | 2,311,879 | XXX | XXX | 2,311,879 | 0.0014 | 3,237 | 0.0042 | 9,710 | 0.0085 | |
| 2.8 | | Subtotal NAIC 1 (2.1 + 2.2 + 2.3 + 2.4 + 2.5 + 2.6 + 2.7) | 4,970,345 | XXX | XXX | 4,970,345 | XXX | 5,319 | XXX | 16,052 | XXX | |
| 3.1 | 2 | NAIC Designation Category 2.A | 3,733,663 | XXX | XXX | 3,733,663 | 0.0021 | 7,841 | 0.0063 | 23,522 | 0.0105 | |
| 3.2 | 2 | NAIC Designation Category 2.B | 5,745,504 | XXX | XXX | 5,745,504 | 0.0025 | 14,364 | 0.0076 | 43,666 | 0.0127 | |
| 3.3 | 2 | NAIC Designation Category 2.C | 2,852,493 | XXX | XXX | 2,852,493 | 0.0036 | 10,269 | 0.0108 | 30,807 | 0.0180 | |
| 3.4 | 2 | Subtotal NAIC 2 (3.1 + 3.2 + 3.3) | 12,331,660 | XXX | XXX | 12,331,660 | XXX | 32,473 | XXX | 97,995 | XXX | |
| 4.1 | 3 | NAIC Designation Category 3.A | 230,477 | XXX | XXX | 230,477 | 0.0069 | 1,590 | 0.0183 | 4,218 | 0.0262 | |
| 4.2 | 3 | NAIC Designation Category 3.B | 793,856 | XXX | XXX | 793,856 | 0.0099 | 7,859 | 0.0264 | 20,958 | 0.0377 | |
| 4.3 | 3 | NAIC Designation Category 3.C | 364,731 | XXX | XXX | 364,731 | 0.0131 | 4,778 | 0.0350 | 12,766 | 0.0500 | |
| 4.4 | | Subtotal NAIC 3 (4.1 + 4.2 + 4.3) | 1,389,064 | XXX | XXX | 1,389,064 | XXX | 14,227 | XXX | 37,941 | XXX | |
| 5.1 | 4 | NAIC Designation Category 4.A | | XXX | XXX | | 0.0184 | | 0.0430 | | 0.0615 | |
| 5.2 | 4 | NAIC Designation Category 4.B | | XXX | XXX | | 0.0238 | | 0.0555 | | 0.0793 | |
| 5.3 | 4 | NAIC Designation Category 4.C | | XXX | XXX | | 0.0310 | | 0.0724 | | 0.1034 | |
| 5.4 | | Subtotal NAIC 4 (5.1 + 5.2 + 5.3) | | XXX | XXX | | XXX | | XXX | | XXX | |
| 6.1 | 5 | NAIC Designation Category 5.A | | XXX | XXX | | 0.0472 | | 0.0846 | | 0.1410 | |
| 6.2 | 5 | NAIC Designation Category 5.B | | XXX | XXX | | 0.0663 | | 0.1188 | | 0.1980 | |
| 6.3 | 5 | NAIC Designation Category 5.C | | XXX | XXX | | 0.0836 | | 0.1498 | | 0.2496 | |
| 6.4 | | Subtotal NAIC 5 (6.1 + 6.2 + 6.3) | | XXX | XXX | | XXX | | XXX | | XXX | |
| 7 | 6 | NAIC 6 | 2,631 | XXX | XXX | 2,631 | 0.0000 | — | 0.2370 | 624 | 0.2370 | |
| 8 | | Total Unrated Multi-Class Securities Acquired by Conversion | | XXX | XXX | | XXX | | XXX | | XXX | |
| 9 | | Total Long-Term Bonds (Sum of Lines 1+2.8+3.4+4.4+5.4+6.4+7+8) | 18,693,700 | XXX | XXX | 18,693,700 | XXX | 52,020 | XXX | 152,611 | XXX | |
| PREFERRED STOCKS | | | | | | | | | | | | |
| 10 | 1 | Highest Quality | | XXX | XXX | | 0.0005 | | 0.0016 | | 0.0033 | |
| 11 | 2 | High Quality | 153,484 | XXX | XXX | 153,484 | 0.0021 | 322 | 0.0064 | 982 | 0.0106 | |
| 12 | 3 | Medium Quality | 1,154,072 | XXX | XXX | 1,154,072 | 0.0099 | 11,425 | 0.0263 | 30,352 | 0.0376 | |
| 13 | 4 | Low Quality | | XXX | XXX | | 0.0245 | | 0.0572 | | 0.0817 | |
| 14 | 5 | Lower Quality | | XXX | XXX | | 0.0630 | | 0.1128 | | 0.1880 | |
| 15 | 6 | In or Near Default | | XXX | XXX | | 0.0000 | | 0.2370 | | 0.2370 | |
| 16 | | Affiliated Life with AVR | | XXX | XXX | | 0.0000 | | 0.0000 | | 0.0000 | |
| 17 | | Total Preferred Stocks (Sum of Lines 10 through 16) | 1,307,556 | XXX | XXX | 1,307,556 | XXX | 11,748 | XXX | 31,334 | XXX | |

ASSET VALUATION RESERVE (CONTINUED)
BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS
DEFAULT COMPONENT

| Line Number | NAIC Designation | Description | 1 Book / Adjusted Carrying Value | 2 Reclassify Related Party Encumbrances | 3 Add Third Party Encumbrances | 4 Balance for AVR Reserve Calculations (Cols. 1+2+3) | Basic Contribution | | Reserve Objective | | Maximum Reserve | |
|-------------------------------|------------------|---|-------------------------------------|--|-----------------------------------|---|--------------------|-------------------------|-------------------|-------------------------|-----------------|--------------------------|
| | | | | | | | 5 Factor | 6 Amount (Cols. 4x5) | 7 Factor | 8 Amount (Cols. 4x7) | 9 Factor | 10 Amount (Cols. 4x9) |
| SHORT-TERM BONDS | | | | | | | | | | | | |
| 18 | | Exempt Obligations | | XXX | XXX | | — | | — | | — | |
| 19.1 | 1 | NAIC Designation Category 1.A | | XXX | XXX | | 0.0002 | | 0.0007 | | 0.0013 | |
| 19.2 | 1 | NAIC Designation Category 1.B | | XXX | XXX | | 0.0004 | | 0.0011 | | 0.0023 | |
| 19.3 | 1 | NAIC Designation Category 1.C | | XXX | XXX | | 0.0006 | | 0.0018 | | 0.0035 | |
| 19.4 | 1 | NAIC Designation Category 1.D | | XXX | XXX | | 0.0007 | | 0.0022 | | 0.0044 | |
| 19.5 | 1 | NAIC Designation Category 1.E | | XXX | XXX | | 0.0009 | | 0.0027 | | 0.0055 | |
| 19.6 | 1 | NAIC Designation Category 1.F | | XXX | XXX | | 0.0011 | | 0.0034 | | 0.0068 | |
| 19.7 | 1 | NAIC Designation Category 1.G | | XXX | XXX | | 0.0014 | | 0.0042 | | 0.0085 | |
| 19.8 | | Subtotal NAIC 1 (19.1 + 19.2 + 19.3 + 19.4 + 19.5 + 19.6 + 19.7) | | XXX | XXX | | XXX | | XXX | | XXX | |
| 20.1 | 2 | NAIC Designation Category 2.A | | XXX | XXX | | 0.0021 | | 0.0063 | | 0.0105 | |
| 20.2 | 2 | NAIC Designation Category 2.B | | XXX | XXX | | 0.0025 | | 0.0076 | | 0.0127 | |
| 20.3 | 2 | NAIC Designation Category 2.C | | XXX | XXX | | 0.0036 | | 0.0108 | | 0.0180 | |
| 20.4 | | Subtotal NAIC 2 (20.1 + 20.2 + 20.3) | | XXX | XXX | | XXX | | XXX | | XXX | |
| 21.1 | 3 | NAIC Designation Category 3.A | | XXX | XXX | | 0.0069 | | 0.0183 | | 0.0262 | |
| 21.2 | 3 | NAIC Designation Category 3.B | | XXX | XXX | | 0.0099 | | 0.0264 | | 0.0377 | |
| 21.3 | 3 | NAIC Designation Category 3.C | | XXX | XXX | | 0.0131 | | 0.0350 | | 0.0500 | |
| 21.4 | | Subtotal NAIC 3 (21.1 + 21.2 + 21.3) | | XXX | XXX | | XXX | | XXX | | XXX | |
| 22.1 | 4 | NAIC Designation Category 4.A | | XXX | XXX | | 0.0184 | | 0.0430 | | 0.0615 | |
| 22.2 | 4 | NAIC Designation Category 4.B | | XXX | XXX | | 0.0238 | | 0.0555 | | 0.0793 | |
| 22.3 | 4 | NAIC Designation Category 4.C | | XXX | XXX | | 0.0310 | | 0.0724 | | 0.1034 | |
| 22.4 | | Subtotal NAIC 4 (22.1 + 22.2 + 22.3) | | XXX | XXX | | XXX | | XXX | | XXX | |
| 23.1 | 5 | NAIC Designation Category 5.A | | XXX | XXX | | 0.0472 | | 0.0846 | | 0.1410 | |
| 23.2 | 5 | NAIC Designation Category 5.B | | XXX | XXX | | 0.0663 | | 0.1188 | | 0.1980 | |
| 23.3 | 5 | NAIC Designation Category 5.C | | XXX | XXX | | 0.0836 | | 0.1498 | | 0.2496 | |
| 23.4 | | Subtotal NAIC 5 (23.1 + 23.2 + 23.3) | | XXX | XXX | | XXX | | XXX | | XXX | |
| 24 | 6 | NAIC 6 | | XXX | XXX | | — | | 0.2370 | | 0.2370 | |
| 25 | | Total Short-Term Bonds (18 + 19.8 + 20.4 + 21.4 + 22.4 + 23.4 + 24) | | XXX | XXX | | XXX | | XXX | | XXX | |
| DERIVATIVE INSTRUMENTS | | | | | | | | | | | | |
| 26 | | Exchange Traded | | XXX | XXX | | 0.0005 | | 0.0016 | | 0.0033 | |
| 27 | 1 | Highest Quality | | XXX | XXX | | 0.0005 | | 0.0016 | | 0.0033 | |
| 28 | 2 | High Quality | | XXX | XXX | | 0.0021 | | 0.0064 | | 0.0106 | |
| 29 | 3 | Medium Quality | | XXX | XXX | | 0.0099 | | 0.0263 | | 0.0376 | |
| 30 | 4 | Low Quality | | XXX | XXX | | 0.0245 | | 0.0572 | | 0.0817 | |
| 31 | 5 | Lower Quality | | XXX | XXX | | 0.0630 | | 0.1128 | | 0.1880 | |
| 32 | 6 | In or Near Default | | XXX | XXX | | — | | 0.2370 | | 0.2370 | |
| 33 | | Total Derivative Instruments | | XXX | XXX | | XXX | | XXX | | XXX | |
| 34 | | Total (Lines 9+ 17 + 25 + 33) | 20,001,256 | XXX | XXX | 20,001,256 | XXX | 63,768 | XXX | 183,945 | XXX | |
| | | | | | | | | | | | 295,767 | |

ASSET VALUATION RESERVE (CONTINUED)
BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS
DEFAULT COMPONENT

| Line Number | NAIC Designation | Description | 1 Book / Adjusted Carrying Value | 2 Reclassify Related Party Encumbrances | 3 Add Third Party Encumbrances | 4 Balance for AVR Reserve Calculations (Cols. 1+2+3) | Basic Contribution | | Reserve Objective | | Maximum Reserve | |
|-------------|------------------|---|-------------------------------------|--|-----------------------------------|---|--------------------|-------------------------|-------------------|-------------------------|-----------------|--------------------------|
| | | | | | | | 5 Factor | 6 Amount (Cols. 4x5) | 7 Factor | 8 Amount (Cols. 4x7) | 9 Factor | 10 Amount (Cols. 4x9) |
| | | MORTGAGE LOANS | | | | | | | | | | |
| | | In Good Standing: | | | | | | | | | | |
| 35 | | Farm Mortgages – CM1 – Highest Quality | | | XXX | | 0.0011 | | 0.0057 | | 0.0074 | |
| 36 | | Farm Mortgages – CM2 – High Quality | | | XXX | | 0.0040 | | 0.0114 | | 0.0149 | |
| 37 | | Farm Mortgages – CM3 – Medium Quality | | | XXX | | 0.0069 | | 0.0200 | | 0.0257 | |
| 38 | | Farm Mortgages – CM4 – Low Medium Quality | | | XXX | | 0.0120 | | 0.0343 | | 0.0428 | |
| 39 | | Farm Mortgages – CM5 – Low Quality | | | XXX | | 0.0183 | | 0.0486 | | 0.0628 | |
| 40 | | Residential Mortgages – Insured or Guaranteed | | | XXX | | 0.0003 | | 0.0007 | | 0.0011 | |
| 41 | | Residential Mortgages – All Other | | | XXX | | 0.0015 | | 0.0034 | | 0.0046 | |
| 42 | | Commercial Mortgages – Insured or Guaranteed | | | XXX | | 0.0003 | | 0.0007 | | 0.0011 | |
| 43 | | Commercial Mortgages – All Other – CM1 – Highest Quality | | | XXX | | 0.0011 | | 0.0057 | | 0.0074 | |
| 44 | | Commercial Mortgages – All Other – CM2 – High Quality | | | XXX | | 0.0040 | | 0.0114 | | 0.0149 | |
| 45 | | Commercial Mortgages – All Other – CM3 – Medium Quality | | | XXX | | 0.0069 | | 0.0200 | | 0.0257 | |
| 46 | | Commercial Mortgages – All Other – CM4 – Low Medium Quality | | | XXX | | 0.0120 | | 0.0343 | | 0.0428 | |
| 47 | | Commercial Mortgages – All Other – CM5 – Low Quality | | | XXX | | 0.0183 | | 0.0486 | | 0.0628 | |
| | | Overdue, Not in Process: | | | | | | | | | | |
| 48 | | Farm Mortgages | | | XXX | | 0.0480 | | 0.0868 | | 0.1371 | |
| 49 | | Residential Mortgages – Insured or Guaranteed | | | XXX | | 0.0006 | | 0.0014 | | 0.0023 | |
| 50 | | Residential Mortgages – All Other | | | XXX | | 0.0029 | | 0.0066 | | 0.0103 | |
| 51 | | Commercial Mortgages - Insured or Guaranteed | | | XXX | | 0.0006 | | 0.0014 | | 0.0023 | |
| 52 | | Commercial Mortgages - All Other | | | XXX | | 0.0480 | | 0.0868 | | 0.1371 | |
| | | In Process of Foreclosure: | | | | | | | | | | |
| 53 | | Farm Mortgages | | | XXX | | – | | 0.1942 | | 0.1942 | |
| 54 | | Residential Mortgages - Insured or Guaranteed | | | XXX | | – | | 0.0046 | | 0.0046 | |
| 55 | | Residential Mortgages - All Other | | | XXX | | – | | 0.0149 | | 0.0149 | |
| 56 | | Commercial Mortgages - Insured or Guaranteed | | | XXX | | – | | 0.0046 | | 0.0046 | |
| 57 | | Commercial Mortgages - All Other | | | XXX | | – | | 0.1942 | | 0.1942 | |
| 58 | | Total Schedule B Mortgages (Sum of Lines 35 through 57) | | | XXX | | XXX | | XXX | | XXX | |
| 59 | | Schedule DA Mortgages | | | XXX | | 0.0034 | | 0.0114 | | 0.0149 | |
| 60 | | Total Mortgage Loans on Real Estate (Lines 58 + 59) | | | XXX | | XXX | | XXX | | XXX | |

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

| Line Number | NAIC Designation | Description | 1 Book / Adjusted Carrying Value | 2 Reclassify Related Party Encumbrances | 3 Add Third Party Encumbrances | 4 Balance for AVR Reserve Calculations (Cols. 1+2+3) | Basic Contribution | | Reserve Objective | | Maximum Reserve | |
|---|------------------|--|-------------------------------------|--|-----------------------------------|---|--------------------|-------------------------|-------------------|-------------------------|-----------------|--------------------------|
| | | | | | | | 5 Factor | 6 Amount (Cols. 4x5) | 7 Factor | 8 Amount (Cols. 4x7) | 9 Factor | 10 Amount (Cols. 4x9) |
| COMMON STOCK | | | | | | | | | | | | |
| 1 | | Unaffiliated Public..... | 611,824 | XXX..... | XXX..... | 611,824 | — | — | 0.1600 (a)..... | 97,892 | 0.1600 (a)..... | |
| 2 | | Unaffiliated Private..... | | XXX..... | XXX..... | | — | — | 0.1945..... | | 0.1945..... | |
| 3 | | Federal Home Loan Bank..... | | XXX..... | XXX..... | | — | — | 0.0061..... | | 0.0097..... | |
| 4 | | Affiliated Life with AVR..... | | XXX..... | XXX..... | | — | — | — | — | — | |
| 5 | | Affiliated Investment Subsidiary: | | | | | | | | | | |
| 6 | | Fixed Income Exempt Obligations..... | | | | | XXX..... | | XXX..... | | XXX..... | |
| 7 | | Fixed Income Highest Quality..... | | | | | XXX..... | | XXX..... | | XXX..... | |
| 8 | | Fixed Income High Quality..... | | | | | XXX..... | | XXX..... | | XXX..... | |
| 9 | | Fixed Income Medium Quality..... | | | | | XXX..... | | XXX..... | | XXX..... | |
| 10 | | Fixed Income Low Quality..... | | | | | XXX..... | | XXX..... | | XXX..... | |
| 11 | | Fixed Income Lower Quality..... | | | | | XXX..... | | XXX..... | | XXX..... | |
| 12 | | Fixed Income In or Near Default..... | | | | | XXX..... | | XXX..... | | XXX..... | |
| 13 | | Unaffiliated Common Stock Public..... | | | | | — | — | (a)..... | | (a)..... | |
| 14 | | Unaffiliated Common Stock Private..... | | | | | — | — | 0.1945..... | | 0.1945..... | |
| 15 | | Real Estate..... | | | | | (b)..... | | (b)..... | | (b)..... | |
| 16 | | Affiliated-Certain Other (See SVO Purposes & Procedures Manual)..... | | XXX..... | XXX..... | — | — | — | 0.1580..... | 0.1580..... | | |
| 17 | | Affiliated - All Other..... | | XXX..... | XXX..... | — | — | — | 0.1945..... | 0.1945..... | | |
| | | Total Common Stock (Sum of Lines 1 through 16)..... | 611,824 | | | 611,824 | XXX | — | XXX | 97,892 | XXX | |
| REAL ESTATE | | | | | | | | | | | | |
| 18 | | Home Office Property (General Account only)..... | 74,263 | | | 74,263 | — | — | 0.0912..... | 6,773 | 0.0912..... | |
| 19 | | Investment Properties..... | | | | | — | — | 0.0912..... | | 0.0912..... | |
| 20 | | Properties Acquired in Satisfaction of Debt..... | | | | | — | — | 0.1337..... | | 0.1337..... | |
| 21 | | Total Real Estate (Sum of Lines 18 through 20)..... | 74,263 | | | 74,263 | XXX | — | XXX | 6,773 | XXX | |
| OTHER INVESTED ASSETS INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF BONDS | | | | | | | | | | | | |
| 22 | | Exempt Obligations..... | | XXX..... | XXX..... | | — | — | — | — | — | |
| 23 | | Highest Quality..... | | XXX..... | XXX..... | | 0.0005..... | | 0.0016..... | | 0.0033..... | |
| 24 | | High Quality..... | | XXX..... | XXX..... | | 0.0021..... | | 0.0064..... | | 0.0106..... | |
| 25 | | Medium Quality..... | | XXX..... | XXX..... | | 0.0099..... | | 0.0263..... | | 0.0376..... | |
| 26 | | Low Quality..... | | XXX..... | XXX..... | | 0.0245..... | | 0.0572..... | | 0.0817..... | |
| 27 | | Lower Quality..... | | XXX..... | XXX..... | | 0.0630..... | | 0.1128..... | | 0.1880..... | |
| 28 | | In or Near Default..... | | XXX..... | XXX..... | | — | — | 0.2370..... | | 0.2370..... | |
| 29 | | Total with Bond Characteristics (Sum of Lines 22 through 28)..... | | XXX | XXX | | XXX | — | XXX | — | XXX | |

ASSET VALUATION RESERVE (CONTINUED)
BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS
EQUITY AND OTHER INVESTED ASSET COMPONENT

| Line Number | NAIC Designation | Description | 1 Book / Adjusted Carrying Value | 2 Reclassify Related Party Encumbrances | 3 Add Third Party Encumbrances | 4 Balance for AVR Reserve Calculations (Cols. 1+2+3) | Basic Contribution | | Reserve Objective | | Maximum Reserve | |
|-------------|------------------|--|-------------------------------------|--|-----------------------------------|---|--------------------|-------------------------|-------------------|-------------------------|-----------------|--------------------------|
| | | | | | | | 5 Factor | 6 Amount (Cols. 4x5) | 7 Factor | 8 Amount (Cols. 4x7) | 9 Factor | 10 Amount (Cols. 4x9) |
| 30 | 1 | INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF PREFERRED STOCKS | | XXX | XXX | | 0.0005 | | 0.0016 | | 0.0033 | |
| 31 | 2 | Highest Quality | | XXX | XXX | | 0.0021 | | 0.0064 | | 0.0106 | |
| 32 | 3 | High Quality | | XXX | XXX | | 0.0099 | | 0.0263 | | 0.0376 | |
| 33 | 4 | Medium Quality | | XXX | XXX | | 0.0245 | | 0.0572 | | 0.0817 | |
| 34 | 5 | Low Quality | | XXX | XXX | | 0.0630 | | 0.1128 | | 0.1880 | |
| 35 | 6 | Lower Quality | | XXX | XXX | | — | — | 0.2370 | | 0.2370 | |
| 36 | | In or Near Default | | XXX | XXX | | — | — | — | — | — | |
| 37 | | Affiliated Life with AVR | | XXX | XXX | | XXX | — | XXX | — | XXX | — |
| | | Total with Preferred Stock Characteristics (Sum of Lines 30 through 36) | | XXX | XXX | | XXX | — | XXX | — | XXX | — |
| 34 | | INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF MORTGAGE LOANS | | | | | | | | | | |
| 38 | | In Good Standing Affiliated: | | | | | XXX | 0.0011 | 0.0057 | | 0.0074 | |
| 39 | | Mortgages - CM1 - Highest Quality | | | | | XXX | 0.0040 | 0.0114 | | 0.0149 | |
| 40 | | Mortgages - CM2 - High Quality | | | | | XXX | 0.0069 | 0.0200 | | 0.0257 | |
| 41 | | Mortgages - CM3 - Medium Quality | | | | | XXX | 0.0120 | 0.0343 | | 0.0428 | |
| 42 | | Mortgages - CM4 - Low Medium Quality | | | | | XXX | 0.0183 | 0.0486 | | 0.0628 | |
| 43 | | Mortgages - CM5 - Low Quality | | | | | XXX | 0.0003 | 0.0007 | | 0.0011 | |
| 44 | | Residential Mortgages - Insured or Guaranteed | | | | | XXX | 0.0015 | 0.0034 | | 0.0046 | |
| 45 | | Residential Mortgages - All Other | | | | | XXX | 0.0003 | 0.0007 | | 0.0011 | |
| | | Commercial Mortgages - Insured or Guaranteed | | | | | XXX | 0.0480 | 0.0868 | | 0.1371 | |
| 46 | | Overdue, Not in Process Affiliated: | | | | | XXX | 0.0006 | 0.0014 | | 0.0023 | |
| 47 | | Farm Mortgages | | | | | XXX | 0.0029 | 0.0066 | | 0.0103 | |
| 48 | | Residential Mortgages - Insured or Guaranteed | | | | | XXX | 0.0006 | 0.0014 | | 0.0023 | |
| 49 | | Residential Mortgages - All Other | | | | | XXX | 0.0480 | 0.0868 | | 0.1371 | |
| 50 | | Commercial Mortgages - Insured or Guaranteed | | | | | XXX | — | — | — | — | |
| | | Commercial Mortgages -- All Other | | | | | XXX | — | — | — | — | |
| 51 | | In Process of Foreclosure Affiliated: | | | | | XXX | — | — | 0.1942 | 0.1942 | |
| 52 | | Farm Mortgages | | | | | XXX | — | — | 0.0046 | 0.0046 | |
| 53 | | Residential Mortgages - Insured or Guaranteed | | | | | XXX | — | — | 0.0149 | 0.0149 | |
| 54 | | Residential Mortgages - All Other | | | | | XXX | — | — | 0.0046 | 0.0046 | |
| 55 | | Commercial Mortgages - Insured or Guaranteed | | | | | XXX | — | — | 0.1942 | 0.1942 | |
| 56 | | Commercial Mortgages - All Other | | | | | XXX | — | — | — | — | |
| | | Total Affiliated (Sum of Lines 38 through 55) | | | | | XXX | XXX | XXX | XXX | XXX | |
| 57 | | Unaffiliated - In Good Standing With Covenants | | | | | XXX | (c) | (c) | (c) | (c) | |
| 58 | | Unaffiliated - In Good Standing Defeased With Government Securities | | | | | XXX | 0.0011 | 0.0057 | | 0.0074 | |
| 59 | | Unaffiliated - In Good Standing Primarily Senior | | | | | XXX | 0.0040 | 0.0114 | | 0.0149 | |
| 60 | | Unaffiliated - In Good Standing All Other | | | | | XXX | 0.0069 | 0.0200 | | 0.0257 | |
| 61 | | Unaffiliated - Overdue, Not in Process | | | | | XXX | 0.0480 | 0.0868 | | 0.1371 | |
| 62 | | Unaffiliated - In Process of Foreclosure | | | | | XXX | — | — | 0.1942 | 0.1942 | |
| 63 | | Total Unaffiliated (Sum of Lines 57 through 62) | | | | | XXX | — | XXX | — | XXX | |
| 64 | | Total with Mortgage Loan Characteristics (Lines 56 + 63) | | | | | XXX | XXX | XXX | XXX | XXX | |

ASSET VALUATION RESERVE (CONTINUED)
BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS
EQUITY AND OTHER INVESTED ASSET COMPONENT

| Line Number | NAIC Designation | Description | 1 Book / Adjusted Carrying Value | 2 Reclassify Related Party Encumbrances | 3 Add Third Party Encumbrances | 4 Balance for AVR Reserve Calculations (Cols. 1+2+3) | Basic Contribution | | Reserve Objective | | Maximum Reserve | |
|-------------|------------------|--|-------------------------------------|--|-----------------------------------|---|--------------------|-------------------------|-------------------|-------------------------|-----------------|--------------------------|
| | | | | | | | 5 Factor | 6 Amount (Cols. 4x5) | 7 Factor | 8 Amount (Cols. 4x7) | 9 Factor | 10 Amount (Cols. 4x9) |
| 65 | | INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF COMMON STOCK | | XXX | XXX | | — | — | (a) | | (a) | |
| 66 | | Unaffiliated Public | | XXX | XXX | | — | — | 0.1945 | | 0.1945 | |
| 67 | | Unaffiliated Private | | XXX | XXX | | — | — | — | | — | |
| 68 | | Affiliated Life with AVR | | XXX | XXX | | — | — | 0.1580 | | 0.1580 | |
| 69 | | Affiliated Certain Other (See SVO Purposes & Procedures Manual) | | XXX | XXX | | — | — | 0.1945 | | 0.1945 | |
| 70 | | Affiliated Other - All Other | | XXX | XXX | | — | — | XXX | | XXX | |
| | | Total with Common Stock Characteristics (Sum of Lines 65 through 69) | | XXX | XXX | | XXX | — | XXX | | XXX | |
| 71 | | INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF REAL ESTATE | | | | | — | — | 0.0912 | | 0.0912 | |
| 72 | | Home Office Property (General Account only) | | | | | — | — | 0.0912 | | 0.0912 | |
| 73 | | Investment Properties | | | | | — | — | 0.0912 | | 0.0912 | |
| 74 | | Properties Acquired in Satisfaction of Debt | | | | | — | — | 0.1337 | | 0.1337 | |
| | | Total with Real Estate Characteristics (Sum of Lines 71 through 73) | | | | | XXX | — | XXX | | XXX | |
| 75 | | LOW INCOME HOUSING TAX CREDIT INVESTMENTS | | | | | 0.0003 | | 0.0006 | | 0.0010 | |
| 76 | | Guaranteed Federal Low Income Housing Tax Credit | | | | | 0.0063 | | 0.0120 | | 0.0190 | |
| 77 | | Non-guaranteed Federal Low Income Housing Tax Credit | | | | | 0.0003 | | 0.0006 | | 0.0010 | |
| 78 | | Guaranteed State Low Income Housing Tax Credit | | | | | 0.0063 | | 0.0120 | | 0.0190 | |
| 79 | | Non-guaranteed State Low Income Housing Tax Credit | | | | | 0.0273 | | 0.0600 | | 0.0975 | |
| 80 | | All Other Low Income Housing Tax Credit | | | | | XXX | | XXX | | XXX | |
| | | Total LIHTC (Sum of Lines 75 through 79) | | | | | XXX | | XXX | | XXX | |
| 81 | | RESIDUAL TRANCES OR INTERESTS | | | | | — | — | 0.1580 | | 0.1580 | |
| 82 | | Fixed Income Instruments – Unaffiliated | | XXX | | | — | — | 0.1580 | | 0.1580 | |
| 83 | | Fixed Income Instruments – Affiliated | | XXX | XXX | | — | — | 0.1580 | | 0.1580 | |
| 84 | | Common Stock – Unaffiliated | | XXX | XXX | | — | — | 0.1580 | | 0.1580 | |
| 85 | | Common Stock – Affiliated | | XXX | XXX | | — | — | 0.1580 | | 0.1580 | |
| 86 | | Preferred Stock – Unaffiliated | | XXX | XXX | | — | — | 0.1580 | | 0.1580 | |
| 87 | | Preferred Stock – Affiliated | | XXX | XXX | | — | — | 0.1580 | | 0.1580 | |
| 88 | | Real Estate – Unaffiliated | | | | | — | — | 0.1580 | | 0.1580 | |
| 89 | | Real Estate – Affiliated | | | | | — | — | 0.1580 | | 0.1580 | |
| 90 | | Mortgage Loans – Unaffiliated | | XXX | XXX | | — | — | 0.1580 | | 0.1580 | |
| 91 | | Mortgage Loans – Affiliated | | XXX | XXX | | — | — | 0.1580 | | 0.1580 | |
| 92 | | Other – Unaffiliated | | XXX | XXX | | — | — | 0.1580 | | 0.1580 | |
| 93 | | Other – Affiliated | | XXX | XXX | | — | — | 0.1580 | | 0.1580 | |
| | | Total Residual Trances or Interests (Sum of Lines 81 through 92) | | | | | XXX | — | XXX | | XXX | |
| 94 | | ALL OTHER INVESTMENTS | | | | | — | — | 0.0042 | | 0.0042 | |
| 95 | | NAIC 1 Working Capital Finance Investments | | XXX | | | — | — | 0.0137 | | 0.0137 | |
| 96 | | NAIC 2 Working Capital Finance Investments | | XXX | | | — | — | 0.1580 | 5,418 | 0.1580 | |
| 97 | | Other Invested Assets - Schedule BA | 34,292 | XXX | | 34,292 | — | — | 0.1580 | 5,418 | 0.1580 | |
| 98 | | Other Short-Term Invested Assets - Schedule DA | | XXX | | | — | — | 0.1580 | | 0.1580 | |
| 99 | | Total All Other (Sum of Lines 94, 95, 96 and 97) | 34,292 | XXX | | 34,292 | XXX | — | XXX | 5,418 | XXX | |
| | | Total Other Invested Assets - Schedules BA & DA (Sum of Lines 29, 37, 64, 70, 74, 80, 93 and 98) | 34,292 | XXX | XXX | 34,292 | XXX | — | XXX | 5,418 | XXX | |

(a) Times the company's weighted average portfolio beta (Minimum .1215, Maximum .2431).

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

(c) This will be the factor associated with the risk category determined in the company generated worksheet.

ASSET VALUATION RESERVE
BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS
REPLICATIONS (SYNTHETIC) ASSETS

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 |
|-----------------------|------|------------------|-------------------------|--|----------------|------------------------|-----------------------|---------------------|
| RSAT Number | Type | CUSIP (6 digits) | Description of Asset(s) | NAIC Designation or Other Description of Asset | Value of Asset | AVR Basic Contribution | AVR Reserve Objective | AVR Maximum Reserve |
| 0599999 - Totals..... | | | | | | | | |

NONE

SCHEDULE F

Showing all claims for death losses and all other contract claims resisted or compromised during the year, and
all claims for death losses and all other contract claims resisted December 31 of current year

| 1 Contract Numbers | 2 Claim Numbers | 3 State of Residence of Claimant | 4 Year of Claim for Death or Disability | 5 Amount Claimed | 6 Amount Paid During the Year | 7 Amount Resisted Dec. 31 of Current Year | 8 Why Compromised or Resisted |
|-----------------------|--------------------|---|--|---------------------|-------------------------------------|--|----------------------------------|
| 5399999 – Totals..... | | | | | | | XXX..... |

NONE

(38) Schedule H - Part 1

NONE

(38) Write-Ins for Line 11

NONE

(39) Schedule H - Part 2 - Reserves and Liabilities

NONE

(39) Schedule H - Part 3 - Test of Prior Year's Claim Reserves and Liabilities

NONE

(39) Schedule H - Part 4 - Reinsurance

NONE

(40) Schedule H - Part 5

NONE

(41) Schedule S - Part 1 - Section 1

NONE

(42) Schedule S - Part 1 - Section 2

NONE

(43) Schedule S - Part 2

NONE

SCHEDULE S - PART 3 - SECTION 1

Reinsurance Ceded Life Insurance, Annuities, Deposit Funds and Other Liabilities

Without Life or Disability Contingencies, and Related Benefits Listed by Reinsuring Company as of December 31, Current Year

| 1 NAIC Company Code | 2 ID Number | 3 Effective Date | 4 Name of Company | 5 Domiciliary Jurisdiction | 6 Type of Reinsurance Ceded | 7 Type of Business Ceded | 8 Amount in Force at End of Year | Reserve Credit Taken | | 11 Premiums | Outstanding Surplus Relief | | 14 Modified Coinsurance Reserve | 15 Funds Withheld Under Coinsurance |
|---|----------------|------------------------|----------------------|----------------------------------|--------------------------------------|-----------------------------------|--|----------------------|------------------|----------------|----------------------------|------------------|--|--|
| | | | | | | | | 9 Current Year | 10 Prior Year | | 12 Current Year | 13 Prior Year | | |
| General Account, Authorized, Non-Affiliates, Non-U.S. Non-Affiliates | | | | | | | | | | | | | | |
| 88099 | 75-1608507 | 06/17/1995 | Optimum Re Insurance | TX | YRT/I | OL | 62,760 | ..... | ..... | ..... 480 | ..... | ..... | ..... | ..... |
| 0999999 - General Account, Authorized, Non-Affiliates, Non-U.S. Non-Affiliates | | | | | | | 62,760 | ..... | ..... | ..... 480 | ..... | ..... | ..... | ..... |
| 1099999 - General Account, Authorized, Total Authorized Non-Affiliates | | | | | | | 62,760 | ..... | ..... | ..... 480 | ..... | ..... | ..... | ..... |
| 1199999 - Total General Account Authorized | | | | | | | 62,760 | ..... | ..... | ..... 480 | ..... | ..... | ..... | ..... |
| 4599999 - Total General Account Authorized, Unauthorized, Reciprocal Jurisdiction and Certified | | | | | | | 62,760 | ..... | ..... | ..... 480 | ..... | ..... | ..... | ..... |
| 9299999 - Total Non-U.S. | | | | | | | 62,760 | ..... | ..... | ..... 480 | ..... | ..... | ..... | ..... |
| 9999999 - Total (Sum of 4599999 and 9099999) | | | | | | | 62,760 | ..... | ..... | ..... 480 | ..... | ..... | ..... | ..... |

(45) Schedule S - Part 3 - Section 2

NONE

(46) Schedule S - Part 4

NONE

(46) Schedule S - Part 4 - Bank Information

NONE

(47) Schedule S - Part 5

NONE

(47) Schedule S - Part 5 - Bank Information

NONE

SCHEDULE S - PART 6Five-Year Exhibit of Reinsurance Ceded Business
(\$000 Omitted)

| | 1 2022 | 2 | 3 2020 | 4 2019 | 5 2018 |
|---|-----------|---|-----------|-----------|-----------|
| A. OPERATIONS ITEMS | | | | | |
| 1. Premiums and annuity considerations for life and accident and health contracts..... | | — | — | | |
| 2. Commissions and reinsurance expense allowances..... | | | | | |
| 3. Contract claims..... | | | | | |
| 4. Surrender benefits and withdrawals for life contracts..... | | | | | |
| 5. Dividends to policyholders and refunds to members..... | | | | | |
| 6. Reserve adjustments on reinsurance ceded..... | | | | | |
| 7. Increase in aggregate reserves for life and accident and health contracts..... | | | | | |
| B. BALANCE SHEET ITEMS | | | | | |
| 8. Premiums and annuity considerations for life and accident and health contracts deferred and uncollected..... | | | | | |
| 9. Aggregate reserves for life and accident and health contracts..... | | — | | | |
| 10. Liability for deposit-type contracts..... | | | | | |
| 11. Contract claims unpaid..... | | | | | |
| 12. Amounts recoverable on reinsurance..... | | | | | |
| 13. Experience rating refunds due or unpaid..... | | | | | |
| 14. Policyholders' dividends and refunds to members (not included in Line 10)..... | | | | | |
| 15. Commissions and reinsurance expense allowances due..... | | | | | |
| 16. Unauthorized reinsurance offset..... | | | | | |
| 17. Offset for reinsurance with Certified Reinsurers..... | | | | | |
| C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM) | | | | | |
| 18. Funds deposited by and withheld from (F)..... | | | | | |
| 19. Letters of credit (L)..... | | | | | |
| 20. Trust agreements (T)..... | | | | | |
| 21. Other (O)..... | | | | | |
| D. REINSURANCE WITH CERTIFIED REINSURERS (DEPOSITS BY AND FUNDS WITHHELD FROM) | | | | | |
| 22. Multiple Beneficiary Trust..... | | | | | |
| 23. Funds deposited by and withheld from (F)..... | | | | | |
| 24. Letters of credit (L)..... | | | | | |
| 25. Trust agreements (T)..... | | | | | |
| 26. Other (O)..... | | | | | |

NONE

SCHEDULE S - PART 7

Restatement of Balance Sheet to Identify Net Credit for Ceded Reinsurance

| | 1 As Reported (net of ceded) | 2 Restatement Adjustments | 3 Restated (gross of ceded) |
|---|------------------------------------|---------------------------------|--------------------------------------|
| ASSETS (Page 2, Col. 3) | | | |
| 1. Cash and invested assets (Line 12)..... | 20,968,342 | | 20,968,342 |
| 2. Reinsurance (Line 16)..... | | | |
| 3. Premiums and considerations (Line 15)..... | 415 | | 415 |
| 4. Net credit for ceded reinsurance..... | XXX | | |
| 5. All other admitted assets (balance)..... | 275,287 | | 275,287 |
| 6. Total assets excluding Separate Accounts (Line 26)..... | 21,244,044 | | 21,244,044 |
| 7. Separate Account assets (Line 27)..... | | | |
| 8. Total assets (Line 28)..... | 21,244,044 | | 21,244,044 |
| LIABILITIES, CAPITAL AND SURPLUS (Page 3) | | | |
| 9. Contract reserves (Lines 1 and 2)..... | 17,448,882 | | 17,448,882 |
| 10. Liability for deposit-type contracts (Line 3)..... | 122,645 | | 122,645 |
| 11. Claim reserves (Line 4)..... | 113,918 | | 113,918 |
| 12. Policyholder dividends/member refunds/reserves (Lines 5 through 7)..... | 35,000 | | 35,000 |
| 13. Premium & annuity considerations received in advance (Line 8)..... | 14,270 | | 14,270 |
| 14. Other contract liabilities (Line 9)..... | 24,678 | | 24,678 |
| 15. Reinsurance in unauthorized companies (Line 24.02 minus inset amount)..... | | | |
| 16. Funds held under reinsurance treaties with unauthorized reinsurers (Line 24.03 minus inset amount)..... | | | |
| 17. Reinsurance with Certified Reinsurers (Line 24.02 inset amount)..... | | | |
| 18. Funds held under reinsurance treaties with Certified Reinsurers (Line 24.03 inset amount)..... | | | |
| 19. All other liabilities (balance)..... | 515,580 | | 515,580 |
| 20. Total liabilities excluding Separate Accounts (Line 26)..... | 18,274,972 | | 18,274,972 |
| 21. Separate Account liabilities (Line 27)..... | | | |
| 22. Total liabilities (Line 28)..... | 18,274,972 | | 18,274,972 |
| 23. Capital & surplus (Line 38)..... | 2,969,072 | XXX | 2,969,072 |
| 24. Total liabilities, capital & surplus (Line 39)..... | 21,244,044 | | 21,244,044 |
| NET CREDIT FOR CEDED REINSURANCE | | | |
| 25. Contract reserves..... | | XXX | XXX |
| 26. Claim reserves..... | | XXX | XXX |
| 27. Policyholder dividends/reserves..... | | XXX | XXX |
| 28. Premium & annuity considerations received in advance..... | | XXX | XXX |
| 29. Liability for deposit-type contracts..... | | XXX | XXX |
| 30. Other contract liabilities..... | | XXX | XXX |
| 31. Reinsurance ceded assets..... | | XXX | XXX |
| 32. Other ceded reinsurance recoverables..... | | XXX | XXX |
| 33. Total ceded reinsurance recoverables..... | | XXX | XXX |
| 34. Premiums and considerations..... | | XXX | XXX |
| 35. Reinsurance in unauthorized companies..... | | XXX | XXX |
| 36. Funds held under reinsurance treaties with unauthorized reinsurers..... | | XXX | XXX |
| 37. Reinsurance with Certified Reinsurers..... | | XXX | XXX |
| 38. Funds held under reinsurance treaties with Certified Reinsurers..... | | XXX | XXX |
| 39. Other ceded reinsurance payables/offsets..... | | XXX | XXX |
| 40. Total ceded reinsurance payable/offsets..... | | XXX | XXX |
| 41. Total net credit for ceded reinsurance..... | | XXX | XXX |

SCHEDULE T – PART 2
 INTERSTATE COMPACT – EXHIBIT OF PREMIUMS WRITTEN
 Allocated By States And Territories

| States, Etc. | Life (Group and Individual) | Direct Business Only | | | | |
|---------------------------------|--|---------------------------------------|------------------------|--------|---|-----------|
| | | 1 | 2 | 3 | 4 | 5 |
| Annuites (Group and Individual) | Disability Income (Group and Individual) | Long-Term Care (Group and Individual) | Deposit-Type Contracts | Totals | | |
| 1. Alabama | AL | | | | | |
| 2. Alaska | AK | | | | | |
| 3. Arizona | AZ | | | | | |
| 4. Arkansas | AR | | | | | |
| 5. California | CA | | | | | |
| 6. Colorado | CO | | | | | |
| 7. Connecticut | CT | | | | | |
| 8. Delaware | DE | | | | | |
| 9. District of Columbia | DC | | | | | |
| 10. Florida | FL | | | | | |
| 11. Georgia | GA | | | | | |
| 12. Hawaii | HI | | | | | |
| 13. Idaho | ID | | | | | |
| 14. Illinois | IL | 3,220 | 21,550 | | | 24,770 |
| 15. Indiana | IN | | | | | |
| 16. Iowa | IA | 2,583 | 30,000 | | | 32,583 |
| 17. Kansas | KS | | | | | |
| 18. Kentucky | KY | | | | | |
| 19. Louisiana | LA | | | | | |
| 20. Maine | ME | | | | | |
| 21. Maryland | MD | | | | | |
| 22. Massachusetts | MA | | | | | |
| 23. Michigan | MI | | 10,000 | | | 10,000 |
| 24. Minnesota | MN | 405 | | | | 405 |
| 25. Mississippi | MS | | | | | |
| 26. Missouri | MO | | | | | |
| 27. Montana | MT | | | | | |
| 28. Nebraska | NE | 797 | | | | 797 |
| 29. Nevada | NV | | | | | |
| 30. New Hampshire | NH | | | | | |
| 31. New Jersey | NJ | | | | | |
| 32. New Mexico | NM | | | | | |
| 33. New York | NY | 377 | | | | 377 |
| 34. North Carolina | NC | | | | | |
| 35. North Dakota | ND | | | | | |
| 36. Ohio | OH | 29,860 | 1,949,654 | | | 1,979,514 |
| 37. Oklahoma | OK | | | | | |
| 38. Oregon | OR | | | | | |
| 39. Pennsylvania | PA | | | | | |
| 40. Rhode Island | RI | | | | | |
| 41. South Carolina | SC | | | | | |
| 42. South Dakota | SD | | | | | |
| 43. Tennessee | TN | | | | | |
| 44. Texas | TX | | | | | |
| 45. Utah | UT | | | | | |
| 46. Vermont | VT | | | | | |
| 47. Virginia | VA | | | | | |
| 48. Washington | WA | | | | | |
| 49. West Virginia | WV | | | | | |
| 50. Wisconsin | WI | | | | | |
| 51. Wyoming | WY | | | | | |
| 52. American Samoa | AS | | | | | |
| 53. Guam | GU | | | | | |
| 54. Puerto Rico | PR | | | | | |
| 55. US Virgin Islands | VI | | | | | |
| 56. Northern Mariana Islands | MP | | | | | |
| 57. Canada | CAN | | | | | |
| 58. Aggregate Other Alien | OT | | | | | |
| 59. Totals | | 37,242 | 2,011,204 | | | 2,048,446 |

Annual Statement for the Year 2022 of the Czech Catholic Union

(53) Schedule Y - Part 1A - Detail of Insurance Holding Company System

NONE

(53) Schedule Y - Part 1A - Explanation

NONE

(54) Schedule Y - Part 2

NONE

(55) Schedule Y - Part 3

NONE

SUPPLEMENTAL EXHIBIT AND SCHEDULE INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of **WAIVED** to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason, enter **SEE EXPLANATION** and provide an explanation following the interrogatory questions.

REQUIRED FILINGS

| | | Response |
|---|---|----------|
| March Filing | | |
| 1. | Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1? | YES |
| 2. | Will the confidential Risk-based Capital Report be filed with the NAIC by March 1? | YES |
| 3. | Will the confidential Risk-based Capital Report be filed with the state of domicile, if required, by March 1? | YES |
| 4. | Will an actuarial opinion be filed by March 1? | YES |
| April Filing | | |
| 5. | Will Management's Discussion and Analysis be filed by April 1? | YES |
| 6. | Will the Life, Health & Annuity Guaranty Association Assessable Premium Exhibit – Parts 1 and 2 be filed with the state of domicile and the NAIC by April 1? (Not applicable to fraternal benefit societies) | NO |
| 7. | Will the Supplemental Investment Risks Interrogatories be filed by April 1? | YES |
| June Filing | | |
| 8. | Will an audited financial report be filed by June 1? | YES |
| 9. | Will Accountants Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1? | YES |
| SUPPLEMENTAL FILINGS | | |
| <p>The following supplemental reports are required to be filed as part of your statement filing if your company is engaged in the type of business covered by the supplement. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason, enter SEE EXPLANATION and provide an explanation following the interrogatory questions.</p> | | |
| March Filing | | |
| 10. | Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1? (Not applicable to fraternal benefit societies) | NO |
| 11. | Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1? | NO |
| 12. | Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1? | NO |
| 13. | Will the actuarial opinion on participating and non-participating policies as required in Interrogatories 1 and 2 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1? | YES |
| 14. | Will the actuarial opinion on non-guaranteed elements as required in interrogatory #3 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1? | YES |
| 15. | Will the actuarial opinion on X-Factors be filed with the state of domicile and electronically with the NAIC by March 1? | NO |
| 16. | Will the actuarial opinion on Separate Accounts Funding Guaranteed Minimum Benefit be filed with the state of domicile and electronically with the NAIC by March 1? | NO |
| 17. | Will the actuarial opinion on Synthetic Guaranteed Investment Contracts be filed with the state of domicile and electronically with the NAIC by March 1? | NO |
| 18. | Will the Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1? | YES |
| 19. | Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1? | NO |
| 20. | Will the Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI be filed with the state of domicile and electronically with the NAIC by March 1? | NO |
| 21. | Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Average Market Value) be filed with the state of domicile and electronically with the NAIC by March 1? | NO |
| 22. | Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value) be filed with the state of domicile and electronically with the NAIC by March 1? | NO |
| 23. | Will the C-3 RBC Certifications required under C-3 Phase I be filed with the state of domicile and electronically with the NAIC by March 1? | NO |
| 24. | Will the C-3 RBC Certifications required under C-3 Phase II be filed with the state of domicile and electronically with the NAIC by March 1? | NO |
| 25. | Will the Actuarial Certifications Related to Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities be filed with the state of domicile and electronically with the NAIC by March 1? | NO |
| 26. | Will the actuarial opinion required by the Modified Guaranteed Annuity Model Regulation be filed with the state of domicile and electronically with the NAIC by March 1? | NO |
| 27. | Will the Actuarial Certification regarding the use of 2001 Preferred Class Tables required by the Model Regulation Permitting the Recognition of Preferred Mortality Tables for Use in Determining Minimum Reserve Liabilities be filed with the state of domicile and electronically with the NAIC by March 1? | NO |
| 28. | Will the Workers' Compensation Carve-Out Supplement be filed by March 1? (Not applicable to fraternal benefit societies) | NO |
| 29. | Will Supplemental Schedule O be filed with the state of domicile and the NAIC by March 1? | NO |
| 30. | Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1? | NO |
| 31. | Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1? | NO |
| 32. | Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1? | NO |
| 33. | Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1? | NO |
| 34. | Will the VM-20 Reserves Supplement be filed with the state of domicile and the NAIC by March 1? | NO |
| 35. | Will the Health Care Receivables Supplement be filed with the state of domicile and the NAIC by March 1? | NO |
| April Filing | | |
| 36. | Will the confidential Regulatory Asset Adequacy Issues Summary (RAAIS) required by the Valuation Manual be filed with the state of domicile by April 1? | YES |
| 37. | Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1? | NO |

SUPPLEMENTAL EXHIBIT AND SCHEDULE INTERROGATORIES

| | Response |
|--|----------|
| 38. Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1? (Not applicable to fraternal benefit societies)..... | NO |
| 39. Will the Accident and Health Policy Experience Exhibit be filed by April 1?..... | NO |
| 40. Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1?..... | NO |
| 41. Will the regulator only (non-public) Supplemental Health Care Exhibit's Allocation Report be filed with the state of domicile and the NAIC by April 1?..... | NO |
| 42. Will the confidential Actuarial Memorandum required by Actuarial Guideline XXXVIII 8D be filed with the state of domicile by April 30?..... | NO |
| 43. Will the Supplemental Term and Universal Life Insurance Reinsurance Exhibit be filed with the state of domicile and the NAIC by April 1?..... | NO |
| 44. Will the Variable Annuities Supplement be filed with the state of domicile and the NAIC by April 1?..... | NO |
| 45. Will the confidential Executive Summary of the PBR Actuarial Report be filed with the state of domicile by April 1?..... | YES |
| 46. Will the confidential Life Summary of the PBR Actuarial Report be filed with the state of domicile by April 1?..... | YES |
| 47. Will the confidential Variable Annuities Summary of the PBR Actuarial Report be filed with the state of domicile by April 1?..... | YES |

August Filing

| | |
|---|-----|
| 48. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?..... | YES |
|---|-----|

| Explanation | Barcode |
|---|--|
| 1. | |
| 2. | |
| 3. | |
| 4. | |
| 5. | |
| 6. |  5 6 3 2 4 2 0 2 2 9 0 0 0 0 0 0 |
| 7. | |
| 8. | |
| 9. | |
| 10. The data for this supplement is not required to be filed. |  5 6 3 2 4 2 0 2 2 4 2 0 0 0 0 0 0 |
| 11. The data for this supplement is not required to be filed. |  5 6 3 2 4 2 0 2 2 3 6 0 0 0 0 0 0 |
| 12. The data for this supplement is not required to be filed. |  5 6 3 2 4 2 0 2 2 4 9 0 0 0 0 0 0 |
| 13. | |
| 14. | |
| 15. The data for this supplement is not required to be filed. |  5 6 3 2 4 2 0 2 2 4 4 2 0 0 0 0 0 0 |
| 16. The data for this supplement is not required to be filed. |  5 6 3 2 4 2 0 2 2 4 4 3 0 0 0 0 0 0 |
| 17. The data for this supplement is not required to be filed. |  5 6 3 2 4 2 0 2 2 4 4 4 0 0 0 0 0 0 |
| 18. The data for this supplement is not required to be filed. |  5 6 3 2 4 2 0 2 2 4 4 6 0 0 0 0 0 0 |
| 19. The data for this supplement is not required to be filed. |  5 6 3 2 4 2 0 2 2 4 4 7 0 0 0 0 0 0 |
| 20. The data for this supplement is not required to be filed. |  5 6 3 2 4 2 0 2 2 4 4 8 0 0 0 0 0 0 |
| 21. The data for this supplement is not required to be filed. |  5 6 3 2 4 2 0 2 2 4 4 9 0 0 0 0 0 0 |
| 22. The data for this supplement is not required to be filed. |  5 6 3 2 4 2 0 2 2 4 4 9 0 0 0 0 0 0 |
| 23. The data for this supplement is not required to be filed. |  5 6 3 2 4 2 0 2 2 4 5 0 0 0 0 0 0 0 |
| 24. The data for this supplement is not required to be filed. |  5 6 3 2 4 2 0 2 2 4 5 1 0 0 0 0 0 0 |
| 25. The data for this supplement is not required to be filed. |  5 6 3 2 4 2 0 2 2 4 5 2 0 0 0 0 0 0 |
| 26. The data for this supplement is not required to be filed. |  5 6 3 2 4 2 0 2 2 4 5 3 0 0 0 0 0 0 |
| 27. The data for this supplement is not required to be filed. |  5 6 3 2 4 2 0 2 2 4 5 4 0 0 0 0 0 0 |
| 28. The data for this supplement is not required to be filed. |  5 6 3 2 4 2 0 2 2 4 5 5 0 0 0 0 0 0 |
| 29. The data for this supplement is not required to be filed. |  5 6 3 2 4 2 0 2 2 4 6 5 0 0 0 0 0 0 |
| 30. The data for this supplement is not required to be filed. |  5 6 3 2 4 2 0 2 2 4 6 5 0 0 0 0 0 0 |
| 31. The data for this supplement is not required to be filed. |  5 6 3 2 4 2 0 2 2 4 6 5 0 0 0 0 0 0 |
| 32. The data for this supplement is not required to be filed. |  5 6 3 2 4 2 0 2 2 4 6 5 0 0 0 0 0 0 |
| 33. The data for this supplement is not required to be filed. |  5 6 3 2 4 2 0 2 2 4 6 6 0 0 0 0 0 0 |
| 34. The data for this supplement is not required to be filed. |  5 6 3 2 4 2 0 2 2 4 6 6 0 0 0 0 0 0 |
| 35. | |
| 36. | |
| 37. The data for this supplement is not required to be filed. |  5 6 3 2 4 2 0 2 2 3 0 6 0 0 0 0 0 0 |
| 38. The data for this supplement is not required to be filed. |  5 6 3 2 4 2 0 2 2 3 0 0 0 0 0 0 0 0 |
| 39. The data for this supplement is not required to be filed. |  5 6 3 2 4 2 0 2 2 2 1 0 0 0 0 0 0 0 0 |

SUPPLEMENTAL EXHIBIT AND SCHEDULE INTERROGATORIES

Barcode

| Explanation | Barcode |
|---|--|
| 40. The data for this supplement is not required to be filed. |  5 6 3 2 4 2 0 2 2 2 1 6 0 0 0 0 0 |
| 41. The data for this supplement is not required to be filed. |  5 6 3 2 4 2 0 2 2 2 1 7 0 0 0 0 0 |
| 42. The data for this supplement is not required to be filed. |  5 6 3 2 4 2 0 2 2 4 3 5 0 0 0 0 0 |
| 43. The data for this supplement is not required to be filed. |  5 6 3 2 4 2 0 2 2 3 4 5 0 0 0 0 0 |
| 44. The data for this supplement is not required to be filed. |  5 6 3 2 4 2 0 2 2 8 6 0 0 0 0 0 |
| 45. | |
| 46. | |
| 47. | |
| 48. | |

OVERFLOW PAGE FOR WRITE-INS**SUMMARY OF OPERATIONS**

| | 1 Current Year | 2 Prior Year |
|---|-------------------|-----------------|
| 08.304. PPP Loan Forgiveness..... | | |
| 08.397. Summary of remaining write-ins for Line 8.3 from overflow page..... | | |
| 2797. Summary of remaining write-ins for Line 27 from overflow page..... | | |
| 5397. Summary of remaining write-ins for Line 53 from overflow page..... | | |

OVERFLOW PAGE FOR WRITE-INS