



ANNUAL STATEMENT  
FOR THE YEAR ENDING DECEMBER 31, 2024  
OF THE CONDITION AND AFFAIRS OF THE

UDC OHIO, INC.

(Name)

NAIC Group Code 00549 (Current Period) 00549 (Prior Period) NAIC Company Code 52022 Employer's ID Number 74-2609036

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

Country of Domicile United States

Licensed as business type: Life, Accident & Health [ ] Property/Casualty [ ] Hospital, Medical & Dental Service or Indemnity [ ]  
Dental Service Corporation [ ] Vision Service Corporation [ ] Health Maintenance Organization [ ]  
Other [ X ] Is HMO, Federally Qualified? Yes [ ] No [ ]

Incorporated/Organized 04/20/1990 Commenced Business 05/17/1990

Statutory Home Office 4400 Easton Commons Way, Suite 125 Columbus, OH, US 43219  
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 96 Worcester Street Wellesley Hills, MA, US 02481  
(Street and Number) (City or Town, State, Country and Zip Code) 781-446-1514  
(Area Code) (Telephone Number)

Mail Address 96 Worcester Street Wellesley Hills, MA, US 02481  
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 96 Worcester Street Wellesley Hills, MA, US 02481  
(Street and Number) (City or Town, State, Country and Zip Code) 781-446-1514  
(Area Code) (Telephone Number) (Extension)

Internet Web Site Address N/A

Statutory Statement Contact Janelle Randall 781-446-1514  
(Name) (Area Code) (Telephone Number) (Extension)  
state.filings@sunlife.com 781-237-0707  
(E-Mail Address) (Fax Number)

OFFICERS

Name	Title	Name	Title
DAVID L. RILEY	PRESIDENT	COLLEEN LOUISE KALLAS	SECRETARY
JAY M RONCK	TREASURER	GREGORY JOHNSON #	ACTUARY

OTHER OFFICERS

DIRECTORS OR TRUSTEES

DAVID L. RILEY

State of Texas  
County of Tarrant

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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.

David L. Riley

Colleen Louise Kallas

Jay M. Ronck

DAVID L. RILEY  
PRESIDENT

COLLEEN LOUISE KALLAS  
SECRETARY

JAY M RONCK  
TREASURER

STATE OF TEXAS, COUNTY OF TARRANT

Subscribed and sworn to before me this 1st day of February 2025

by: David L. Riley, Notary Public, State of Texas

John D Clark



John D Clark

ID NUMBER  
13240917-9  
COMMISSION EXPIRES  
March 18, 2028

a. Is this an original filing? Yes [ X ] No [ ]

b. If no:

1. State the amendment number  
2. Date filed  
3. Number of pages attached

State of Texas, County of Galveston

Subscribed and sworn to before me this 31st day of January 2025 by Jay M. Ronck.

Jasmine Fontenot

Jasmine Fontenot



Jasmine Fontenot

ID NUMBER  
134597818  
COMMISSION EXPIRES  
October 10, 2027

See Notarize.com attached certificate

Electronically signed and notarized online using the Proof platform.

Electronically signed and notarized online using the Proof platform.

## DESCRIPTION OF ATTACHED DOCUMENT

Title or Type of Document: Jurat-UDC Ohio, Inc for Colleen Kallas

Document Date: 01/31/2025

Number of Pages (including notarial certificate): 2

State of Texas

County of Dallas County

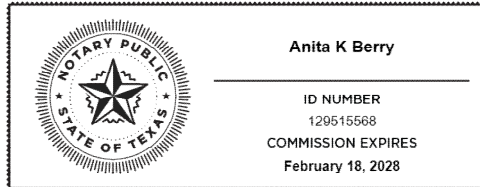
Sworn to and subscribed before me

on 01/31/2025 by Colleen Louise Kallas.

*Anita K Berry*

Notary Public, State of Texas

My commission expires: 02/18/2028



Electronically signed and notarized online using the Proof platform.

ASSETS

	Current Year			Prior Year
	1	2	3	4
	Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	Net Admitted Assets
1. Bonds (Schedule D).....	219,318		219,318	219,667
2. Stocks (Schedule D):				
2.1 Preferred stocks .....	0		0	0
2.2 Common stocks .....	0		0	0
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens .....			0	0
3.2 Other than first liens .....			0	0
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$ .....0 encumbrances).....			0	0
4.2 Properties held for the production of income (less \$ .....0 encumbrances) .....			0	0
4.3 Properties held for sale (less \$ .....0 encumbrances) .....			0	0
5. Cash (\$ .....614,143 , Schedule E-Part 1), cash equivalents (\$ .....0 , Schedule E-Part 2) and short-term investments (\$ .....0 , Schedule DA).....	614,143		614,143	619,401
6. Contract loans (including \$ ..... premium notes).....			0	0
7. Derivatives (Schedule DB).....	0		0	0
8. Other invested assets (Schedule BA) .....	0	0	0	0
9. Receivables for securities .....	0		0	0
10. Securities lending reinvested collateral assets (Schedule DL).....			0	0
11. Aggregate write-ins for invested assets .....	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11) .....	833,461	0	833,461	839,068
13. Title plants less \$ ..... charged off (for Title insurers only).....			0	0
14. Investment income due and accrued .....	2,238		2,238	1,406
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection .....	2,850	0	2,850	2,194
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ ..... earned but unbilled premiums).....			0	0
15.3 Accrued retrospective premiums (\$ ..... ) and contracts subject to redetermination (\$ ..... ) .....			0	0
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers .....	0		0	0
16.2 Funds held by or deposited with reinsured companies .....			0	0
16.3 Other amounts receivable under reinsurance contracts .....			0	0
17. Amounts receivable relating to uninsured plans .....			0	0
18.1 Current federal and foreign income tax recoverable and interest thereon .....			0	0
18.2 Net deferred tax asset.....			0	0
19. Guaranty funds receivable or on deposit .....			0	0
20. Electronic data processing equipment and software.....			0	0
21. Furniture and equipment, including health care delivery assets (\$ ..... ) .....			0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates .....			0	0
23. Receivables from parent, subsidiaries and affiliates .....			0	0
24. Health care (\$ ..... ) and other amounts receivable.....	2,587	2,587	0	0
25. Aggregate write-ins for other-than-invested assets .....	0	0	0	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25).....	841,136	2,587	838,549	842,668
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			0	0
28. Total (Lines 26 and 27)	841,136	2,587	838,549	842,668
DETAILS OF WRITE-INS				
1101. ....			0	0
1102. ....			0	0
1103. ....			0	0
1198. Summary of remaining write-ins for Line 11 from overflow page .....	0	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)	0	0	0	0
2501. ....			0	0
2502. ....			0	0
2503. ....			0	0
2598. Summary of remaining write-ins for Line 25 from overflow page .....	0	0	0	0
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	0	0	0	0

LIABILITIES, CAPITAL AND SURPLUS

	Current Year			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
1. Claims unpaid (less \$ .....0 reinsurance ceded)	.....5,115		.....5,115	.....4,513
2. Accrued medical incentive pool and bonus amounts .....			.....0	.....0
3. Unpaid claims adjustment expenses .....	.....5		.....5	.....13
4. Aggregate health policy reserves, including the liability of \$ ..... for medical loss ratio rebate per the Public Health Service Act.....	.....8,121		.....8,121	.....5,396
5. Aggregate life policy reserves .....			.....0	.....0
6. Property/casualty unearned premium reserves .....			.....0	.....0
7. Aggregate health claim reserves.....			.....0	.....0
8. Premiums received in advance .....	.....4,260		.....4,260	.....3,402
9. General expenses due or accrued .....	.....36,594		.....36,594	.....39,405
10.1 Current federal and foreign income tax payable and interest thereon (including \$ ..... on realized capital gains (losses)).....			.....0	.....0
10.2 Net deferred tax liability .....			.....0	.....0
11. Ceded reinsurance premiums payable .....			.....0	.....0
12. Amounts withheld or retained for the account of others .....			.....0	.....0
13. Remittances and items not allocated .....			.....0	.....0
14. Borrowed money (including \$ ..... current) and interest thereon \$ ..... (including \$ ..... current) .....			.....0	.....0
15. Amounts due to parent, subsidiaries and affiliates .....	.....6,700		.....6,700	.....11,898
16. Derivatives.....		.....0	.....0	.....0
17. Payable for securities .....			.....0	.....0
18. Payable for securities lending .....			.....0	.....0
19. Funds held under reinsurance treaties (with \$ ..... authorized reinsurers, \$ ..... unauthorized reinsurers and \$ ..... certified reinsurers).....			.....0	.....0
20. Reinsurance in unauthorized and certified (\$ .....) companies.....			.....0	.....0
21. Net adjustments in assets and liabilities due to foreign exchange rates .....			.....0	.....0
22. Liability for amounts held under uninsured plans .....			.....0	.....0
23. Aggregate write-ins for other liabilities (including \$ ..... current) .....	.....70	.....0	.....70	.....49
24. Total liabilities (Lines 1 to 23).....	.....60,865	.....0	.....60,865	.....64,676
25. Aggregate write-ins for special surplus funds .....	.....XXX	.....XXX	.....0	.....0
26. Common capital stock .....	.....XXX	.....XXX	.....100	.....100
27. Preferred capital stock .....	.....XXX	.....XXX		.....0
28. Gross paid in and contributed surplus .....	.....XXX	.....XXX	.....865,537	.....865,537
29. Surplus notes .....	.....XXX	.....XXX		.....0
30. Aggregate write-ins for other-than-special surplus funds .....	.....XXX	.....XXX	.....0	.....0
31. Unassigned funds (surplus) .....	.....XXX	.....XXX	.....(87,953)	.....(87,645)
32. Less treasury stock, at cost: 32.1 .....shares common (value included in Line 26 \$ ..... ) .....	.....XXX	.....XXX		.....0
32.2 .....shares preferred (value included in Line 27 \$ ..... ) .....	.....XXX	.....XXX		.....0
33. Total capital and surplus (Lines 25 to 31 minus Line 32) .....	.....XXX	.....XXX	.....777,684	.....777,992
34. Total liabilities, capital and surplus (Lines 24 and 33)	.....XXX	.....XXX	.....838,549	.....842,668
DETAILS OF WRITE-INS				
2301. State checks.....	.....70		.....70	.....49
2302. ....				
2303. ....				
2398. Summary of remaining write-ins for Line 23 from overflow page .....	.....0	.....0	.....0	.....0
2399. Totals (Lines 2301 through 2303 plus 2398) (Line 23 above)	.....70	.....0	.....70	.....49
2501. ....	.....XXX	.....XXX		.....0
2502. ....	.....XXX	.....XXX		
2503. ....	.....XXX	.....XXX		
2598. Summary of remaining write-ins for Line 25 from overflow page .....	.....XXX	.....XXX	.....0	.....0
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	.....XXX	.....XXX	.....0	.....0
3001. ....	.....XXX	.....XXX		.....0
3002. ....	.....XXX	.....XXX		.....0
3003. ....	.....XXX	.....XXX		.....0
3098. Summary of remaining write-ins for Line 30 from overflow page .....	.....XXX	.....XXX	.....0	.....0
3099. Totals (Lines 3001 through 3003 plus 3098) (Line 30 above)	.....XXX	.....XXX	.....0	.....0

STATEMENT OF REVENUE AND EXPENSES

	Current Year		Prior Year
	1 Uncovered	2 Total	3 Total
1. Member Months.....	XXX	15,429	19,104
2. Net premium income (including \$ .....0 non-health premium income).....	XXX	137,210	165,320
3. Change in unearned premium reserves and reserve for rate credits .....	XXX	1,175	1,930
4. Fee-for-service (net of \$ ..... medical expenses) .....	XXX		0
5. Risk revenue .....	XXX		0
6. Aggregate write-ins for other health care related revenues .....	XXX	0	0
7. Aggregate write-ins for other non-health revenues .....	XXX	0	0
8. Total revenues (Lines 2 to 7) .....	XXX	138,385	167,250
<b>Hospital and Medical:</b>			
9. Hospital/medical benefits .....			0
10. Other professional services .....		38,655	56,407
11. Outside referrals .....			0
12. Emergency room and out-of-area .....			0
13. Prescription drugs .....			0
14. Aggregate write-ins for other hospital and medical .....	0	0	0
15. Incentive pool, withhold adjustments and bonus amounts.....			0
16. Subtotal (Lines 9 to 15) .....	0	38,655	56,407
<b>Less:</b>			
17. Net reinsurance recoveries .....			0
18. Total hospital and medical (Lines 16 minus 17) .....	0	38,655	56,407
19. Non-health claims (net).....			0
20. Claims adjustment expenses, including \$ .....0 cost containment expenses.....		969	1,390
21. General administrative expenses.....		123,558	144,245
22. Increase in reserves for life and accident and health contracts (including \$ ..... increase in reserves for life only).....		3,900	0
23. Total underwriting deductions (Lines 18 through 22) .....	0	167,082	202,042
24. Net underwriting gain or (loss) (Lines 8 minus 23) .....	XXX	(28,697)	(34,792)
25. Net investment income earned (Exhibit of Net Investment Income, Line 17).....		27,285	22,144
26. Net realized capital gains (losses) less capital gains tax of \$ .....			0
27. Net investment gains (losses) (Lines 25 plus 26) .....	0	27,285	22,144
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$ ..... ) (amount charged off \$ ..... )] .....		0	0
29. Aggregate write-ins for other income or expenses .....	0	0	0
30. Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29).....	XXX	(1,412)	(12,648)
31. Federal and foreign income taxes incurred .....	XXX		0
32. Net income (loss) (Lines 30 minus 31) .....	XXX	(1,412)	(12,648)
<b>DETAILS OF WRITE-INS</b>			
0601. ....	XXX		0
0602. ....	XXX		0
0603. ....	XXX		0
0698. Summary of remaining write-ins for Line 6 from overflow page .....	XXX	0	0
0699. Totals (Lines 0601 through 0603 plus 0698) (Line 6 above) .....	XXX	0	0
0701. ....	XXX		0
0702. ....	XXX		0
0703. ....	XXX		0
0798. Summary of remaining write-ins for Line 7 from overflow page .....	XXX	0	0
0799. Totals (Lines 0701 through 0703 plus 0798) (Line 7 above) .....	XXX	0	0
1401. ....			0
1402. ....			0
1403. ....			0
1498. Summary of remaining write-ins for Line 14 from overflow page .....	0	0	0
1499. Totals (Lines 1401 through 1403 plus 1498) (Line 14 above) .....	0	0	0
2901. ....			0
2902. ....			0
2903. ....			0
2998. Summary of remaining write-ins for Line 29 from overflow page .....	0	0	0
2999. Totals (Lines 2901 through 2903 plus 2998) (Line 29 above) .....	0	0	0

STATEMENT OF REVENUE AND EXPENSES (Continued)

	1 Current Year	2 Prior Year
CAPITAL & SURPLUS ACCOUNT		
33. Capital and surplus prior reporting year .....	777,992	789,164
34. Net income or (loss) from Line 32 .....	(1,412)	(12,648)
35. Change in valuation basis of aggregate policy and claim reserves .....		0
36. Change in net unrealized capital gains (losses) less capital gains tax of \$ .....		0
37. Change in net unrealized foreign exchange capital gain or (loss) .....		0
38. Change in net deferred income tax .....		0
39. Change in nonadmitted assets .....	1,104	1,476
40. Change in unauthorized and certified reinsurance .....	0	0
41. Change in treasury stock .....	0	0
42. Change in surplus notes .....	0	0
43. Cumulative effect of changes in accounting principles .....		0
44. Capital Changes:		
44.1 Paid in .....	0	0
44.2 Transferred from surplus (Stock Dividend) .....		0
44.3 Transferred to surplus .....		0
45. Surplus adjustments:		
45.1 Paid in .....	0	0
45.2 Transferred to capital (Stock Dividend) .....	0	0
45.3 Transferred from capital .....		0
46. Dividends to stockholders .....		0
47. Aggregate write-ins for gains or (losses) in surplus .....	0	0
48. Net change in capital and surplus (Lines 34 to 47) .....	(308)	(11,172)
49. Capital and surplus end of reporting year (Line 33 plus 48)	777,684	777,992
DETAILS OF WRITE-INS		
4701. ....		
4702. ....		
4703. ....		
4798. Summary of remaining write-ins for Line 47 from overflow page .....	0	0
4799. Totals (Lines 4701 through 4703 plus 4798) (Line 47 above)	0	0

CASH FLOW

Cash from Operations	1	2
	Current Year	Prior Year
1. Premiums collected net of reinsurance	137,412	163,086
2. Net investment income	26,129	21,886
3. Miscellaneous income	0	0
4. Total (Lines 1 through 3)	163,541	184,972
5. Benefit and loss related payments	38,053	57,326
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts		0
7. Commissions, expenses paid and aggregate write-ins for deductions	127,346	144,399
8. Dividends paid to policyholders		0
9. Federal and foreign income taxes paid (recovered) net of \$ tax on capital gains (losses)	0	0
10. Total (Lines 5 through 9)	165,399	201,725
11. Net cash from operations (Line 4 minus Line 10)	(1,858)	(16,753)
Cash from Investments		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds	155,000	0
12.2 Stocks	0	0
12.3 Mortgage loans	0	0
12.4 Real estate	0	0
12.5 Other invested assets	0	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	0	0
12.7 Miscellaneous proceeds	0	0
12.8 Total investment proceeds (Lines 12.1 to 12.7)	155,000	0
13. Cost of investments acquired (long-term only):		
13.1 Bonds	154,328	0
13.2 Stocks	0	0
13.3 Mortgage loans	0	0
13.4 Real estate	0	0
13.5 Other invested assets	0	0
13.6 Miscellaneous applications	0	0
13.7 Total investments acquired (Lines 13.1 to 13.6)	154,328	0
14. Net increase/(decrease) in contract loans and premium notes	0	0
15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14)	672	0
Cash from Financing and Miscellaneous Sources		
16. Cash provided (applied):		
16.1 Surplus notes, capital notes	0	0
16.2 Capital and paid in surplus, less treasury stock	0	0
16.3 Borrowed funds	0	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities		0
16.5 Dividends to stockholders	0	0
16.6 Other cash provided (applied)	(4,072)	3,318
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)	(4,072)	3,318
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS		
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	(5,258)	(13,435)
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year	619,401	632,836
19.2 End of year (Line 18 plus Line 19.1)	614,143	619,401

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE UDC OHIO, INC.

ANALYSIS OF OPERATIONS BY LINES OF BUSINESS

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		2	3											
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
1. Net premium income .....	137,210	.0	.0	.0	.0	137,210	.0	.0	.0	.0	.0	.0	.0	.0
2. Change in unearned premium reserves and reserve for rate credit .....	1,175					1,175								
3. Fee-for-service (net of \$ ..... medical expenses) .....	.0													XXX
4. Risk revenue .....	.0													XXX
5. Aggregate write-ins for other health care related revenues .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	XXX
6. Aggregate write-ins for other non-health care related revenues .....	.0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0
7. Total revenues (Lines 1 to 6) .....	138,385	.0	.0	.0	.0	138,385	.0	.0	.0	.0	.0	.0	.0	.0
8. Hospital/medical benefits .....	.0													XXX
9. Other professional services .....	38,655					38,655								XXX
10. Outside referrals .....	.0													XXX
11. Emergency room and out-of-area .....	.0													XXX
12. Prescription drugs .....	.0													XXX
13. Aggregate write-ins for other hospital and medical .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	XXX
14. Incentive pool, withhold adjustments and bonus amounts .....	.0													XXX
15. Subtotal (Lines 8 to 14) .....	38,655	.0	.0	.0	.0	38,655	.0	.0	.0	.0	.0	.0	.0	XXX
16. Net reinsurance recoveries .....	.0													XXX
17. Total hospital and medical (Lines 15 minus 16) .....	38,655	.0	.0	.0	.0	38,655	.0	.0	.0	.0	.0	.0	.0	XXX
18. Non-health claims (net) .....	.0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0
19. Claims adjustment expenses including \$ .....0 cost containment expenses .....	969					969								
20. General administrative expenses .....	123,558					123,558								
21. Increase in reserves for accident and health contracts .....	3,900					3,900								XXX
22. Increase in reserves for life contracts .....	.0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
23. Total underwriting deductions (Lines 17 to 22) .....	167,082	.0	.0	.0	.0	167,082	.0	.0	.0	.0	.0	.0	.0	.0
24. Net underwriting gain or (loss) (Line 7 minus Line 23) .....	(28,697)	0	0	0	0	(28,697)	0	0	0	0	0	0	0	0
DETAILS OF WRITE-INS														
0501. ....														XXX
0502. ....														XXX
0503. ....														XXX
0598. Summary of remaining write-ins for Line 5 from overflow page .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	XXX
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 5 above) .....	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX
0601. ....		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0602. ....		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0603. ....		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0
0698. Summary of remaining write-ins for Line 6 from overflow page .....	.0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0
0699. Totals (Lines 0601 through 0603 plus 0698) (Line 6 above) .....	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
1301. ....														XXX
1302. ....														XXX
1303. ....														XXX
1398. Summary of remaining write-ins for Line 13 from overflow page .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	XXX
1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above) .....	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX



UNDERWRITING AND INVESTMENT EXHIBIT  
PART 1 - PREMIUMS

Line of Business	1 Direct Business	2 Reinsurance Assumed	3 Reinsurance Ceded	4 Net Premium Income (Cols. 1+2-3)
1. Comprehensive (hospital and medical) individual .....				.0
2. Comprehensive (hospital and medical) group .....				.0
3. Medicare Supplement .....				.0
4. Vision only .....				.0
5. Dental only .....	137,210			137,210
6. Federal Employees Health Benefits Plan .....	.0			.0
7. Title XVIII - Medicare .....	.0			.0
8. Title XIX – Medicaid .....	.0			.0
9. Credit A&H .....				.0
10. Disability Income .....				.0
11. Long-Term Care .....				.0
12. Other health .....				.0
13. Health subtotal (Lines 1 through 12) .....	137,210	.0	.0	137,210
14. Life .....	.0			.0
15. Property/casualty .....	.0			.0
16. Totals (Lines 13 to 15)	137,210	0	0	137,210

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE UDC OHIO, INC.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2 – CLAIMS INCURRED DURING THE YEAR

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		2	3											
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
1. Payments during the year:														
1.1 Direct .....	38,053					38,053								
1.2 Reinsurance assumed .....	0													
1.3 Reinsurance ceded .....	0													
1.4 Net .....	38,053	0	0	0	0	38,053	0	0	0	0	0	0	0	0
2. Paid medical incentive pools and bonuses .....	0													
3. Claim liability December 31, current year from Part 2A:														
3.1 Direct .....	5,115	0	0	0	0	5,115	0	0	0	0	0	0	0	0
3.2 Reinsurance assumed .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3.3 Reinsurance ceded .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3.4 Net .....	5,115	0	0	0	0	5,115	0	0	0	0	0	0	0	0
4. Claim reserve December 31, current year from Part 2D:														
4.1 Direct .....	0													
4.2 Reinsurance assumed .....	0													
4.3 Reinsurance ceded .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4.4 Net .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5. Accrued medical incentive pools and bonuses, current year .....	0													
6. Net healthcare receivables (a).....	0													
7. Amounts recoverable from reinsurers December 31, current year .....	0													
8. Claim liability December 31, prior year from Part 2A:														
8.1 Direct .....	4,513	0	0	0	0	4,513	0	0	0	0	0	0	0	0
8.2 Reinsurance assumed .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
8.3 Reinsurance ceded .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
8.4 Net .....	4,513	0	0	0	0	4,513	0	0	0	0	0	0	0	0
9. Claim reserve December 31, prior year from Part 2D:														
9.1 Direct .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
9.2 Reinsurance assumed .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
9.3 Reinsurance ceded .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
9.4 Net .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Accrued medical incentive pools and bonuses, prior year.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
11. Amounts recoverable from reinsurers December 31, prior year .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
12. Incurred benefits:														
12.1 Direct .....	38,655	0	0	0	0	38,655	0	0	0	0	0	0	0	0
12.2 Reinsurance assumed .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
12.3 Reinsurance ceded .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
12.4 Net .....	38,655	0	0	0	0	38,655	0	0	0	0	0	0	0	0
13. Incurred medical incentive pools and bonuses .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0

(a) Excludes \$ ..... loans or advances to providers not yet expensed.

UNDERWRITING AND INVESTMENT EXHIBIT  
PART 2A - CLAIMS LIABILITY END OF CURRENT YEAR

	1	Comprehensive (Hospital and Medical)		4	5	6	7	8	9	10	11	12	13	14
		2	3											
		Individual	Group											
	Total			Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
1. Reported in Process of Adjustment:														
1.1. Direct .....	.0													
1.2. Reinsurance assumed .....	.0													
1.3. Reinsurance ceded .....	.0													
1.4. Net .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. Incurred but Unreported:														
2.1. Direct .....	100					100								
2.2. Reinsurance assumed .....	.0													
2.3. Reinsurance ceded .....	.0													
2.4. Net .....	100	.0	.0	.0	.0	100	.0	.0	.0	.0	.0	.0	.0	.0
3. Amounts Withheld from Paid Claims and Capitations:														
3.1. Direct .....	5,015					5,015								
3.2. Reinsurance assumed .....	.0													
3.3. Reinsurance ceded .....	.0													
3.4. Net .....	5,015	.0	.0	.0	.0	5,015	.0	.0	.0	.0	.0	.0	.0	.0
4. TOTALS:														
4.1. Direct .....	5,115	.0	.0	.0	.0	5,115	.0	.0	.0	.0	.0	.0	.0	.0
4.2. Reinsurance assumed .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4.3. Reinsurance ceded .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4.4. Net	5,115	0	0	0	0	5,115	0	0	0	0	0	0	0	0

UNDERWRITING AND INVESTMENT EXHIBIT  
PART 2B - ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR-NET OF REINSURANCE

Line of Business	Claims Paid During the Year		Claim Reserve and Claim Liability December 31 of Current Year		5  Claims Incurred in Prior Years (Columns 1 + 3)	6  Estimated Claim Reserve and Claim Liability December 31 of Prior Year
	1  On Claims Incurred Prior to January 1 of Current Year	2  On Claims Incurred During the Year	3  On Claims Unpaid December 31 of Prior Year	4  On Claims Incurred During the Year		
1. Comprehensive (hospital and medical) individual .....					.0	.0
2. Comprehensive (hospital and medical) group .....					.0	.0
3. Medicare Supplement .....					.0	.0
4. Vision Only .....					.0	.0
5. Dental Only .....	386	37,667	2	5,113	388	4,513
6. Federal Employees Health Benefits Plan .....					.0	.0
7. Title XVIII - Medicare .....					.0	.0
8. Title XIX - Medicaid .....					.0	.0
9. Credit A&H .....					.0	.0
10. Disability Income .....					.0	.0
11. Long-Term Care .....					.0	.0
12. Other health .....					.0	.0
13. Health subtotal (Lines 1 to 12) .....	386	37,667	2	5,113	388	4,513
14. Healthcare receivables (a) .....					.0	.0
15. Other non-health .....					.0	.0
16. Medical incentive pools and bonus amounts .....					.0	.0
17. Totals (Lines 13-14+15+16)	386	37,667	2	5,113	388	4,513

(a) Excludes \$ 2,587 loans or advances to providers not yet expensed.

Pt 2C - Sn A - Paid Claims - Comp

NONE

Pt 2C - Sn A - Paid Claims - MS

NONE

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE UDC OHIO, INC.

UNDERWRITING AND INVESTMENT EXHIBIT  
PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS  
(\$000 Omitted)

Section A – Paid Health Claims - Dental Only

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2020	2 2021	3 2022	4 2023	5 2024
1. Prior .....	.2	.2	.2	.2	.2
2. 2020.....	.136	.137	.137	.137	.137
3. 2021.....	XXX	.101	.101	.101	.101
4. 2022.....	XXX	XXX	.77	.77	.77
5. 2023.....	XXX	XXX	XXX	.57	.57
6. 2024.....	XXX	XXX	XXX	XXX	38

Section B – Incurred Health Claims - Dental Only

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2020	2 2021	3 2022	4 2023	5 2024
1. Prior .....	.2	.2	.2	.2	.2
2. 2020.....	.143	.137	.137	.137	.137
3. 2021.....	XXX	.108	.101	.101	.101
4. 2022.....	XXX	XXX	.82	.77	.77
5. 2023.....	XXX	XXX	XXX	.61	.57
6. 2024.....	XXX	XXX	XXX	XXX	43

Section C – Incurred Year Health Claims and Claims Adjustment Expense Ratio – Dental Only

Years in which Premiums were Earned and Claims were Incurred	1	2	3	4	5	6	7	8	9	10
	Premiums Earned	Claims Payments	Claim Adjustment Expense Payments	(Col. 3/2) Percent	Claim and Claim Adjustment Expense Payments (Col. 2+3)	(Col. 5/1) Percent	Claims Unpaid	Unpaid Claims Adjustment Expenses	Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	(Col. 9/1) Percent
1. 2020.....	.306	.137	.3	2.2	.140	45.8			.140	45.8
2. 2021.....	.275	.101	.2	2.0	.103	37.5			.103	37.5
3. 2022.....	.211	.77	.2	2.6	.79	37.4			.79	37.4
4. 2023.....	.167	.57	.1	1.8	.58	34.7			.58	34.7
5. 2024.....	.138	.38	1	2.6	.39	28.3	5		.44	31.9

Pt 2C - Sn A - Paid Claims - VO  
**NONE**

Pt 2C - Sn A - Paid Claims - FE  
**NONE**

Pt 2C - Sn A - Paid Claims - XV  
**NONE**

Pt 2C - Sn A - Paid Claims - XI  
**NONE**

Pt 2C - Sn A - Paid Claims - OT  
**NONE**

UNDERWRITING AND INVESTMENT EXHIBIT  
PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS  
(\$000 Omitted)

Section A - Paid Health Claims - Grand Total

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2020	2 2021	3 2022	4 2023	5 2024
1. Prior .....	.2	.2	.2	.2	.2
2. 2020 .....	.136	.137	.137	.137	.137
3. 2021 .....	XXX	.101	.101	.101	.101
4. 2022 .....	XXX	XXX	.77	.77	.77
5. 2023 .....	XXX	XXX	XXX	.57	.57
6. 2024 .....	XXX	XXX	XXX	XXX	38

Section B - Incurred Health Claims - Grand Total

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2020	2 2021	3 2022	4 2023	5 2024
1. Prior .....	.2	.2	.2	.2	.2
2. 2020 .....	.143	.137	.137	.137	.137
3. 2021 .....	XXX	.108	.101	.101	.101
4. 2022 .....	XXX	XXX	.82	.77	.77
5. 2023 .....	XXX	XXX	XXX	.61	.57
6. 2024 .....	XXX	XXX	XXX	XXX	43

Section C – Incurred Year Health Claims and Claims Adjustment Expense Ratio – Grand Total

Years in which Premiums were Earned and Claims were Incurred	1  Premiums Earned	2  Claims Payments	3  Claim Adjustment Expense Payments	4  (Col. 3/2) Percent	5  Claim and Claim Adjustment Expense Payments (Col. 2+3)	6  (Col. 5/1) Percent	7  Claims Unpaid	8  Unpaid Claims Adjustment Expenses	9  Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10  (Col. 9/1) Percent
1. 2020 .....	.306	.137	.3	2.2	.140	45.8	.0	.0	.140	45.8
2. 2021 .....	.275	.101	.2	2.0	.103	37.5	.0	.0	.103	37.5
3. 2022 .....	.211	.77	.2	2.6	.79	37.4	.0	.0	.79	37.4
4. 2023 .....	.167	.57	.1	1.8	.58	34.7	.0	.0	.58	34.7
5. 2024 .....	.138	.38	1	2.6	.39	28.3	5	0	.44	31.9



Pt 2C - Sn B - Incurred Claims - Comp

NONE

Pt 2C - Sn B - Incurred Claims - MS

NONE

Pt 2C - Sn B - Incurred Claims - VO  
**NONE**

Pt 2C - Sn B - Incurred Claims - FE  
**NONE**

Pt 2C - Sn B - Incurred Claims - XV  
**NONE**

Pt 2C - Sn B - Incurred Claims - XI  
**NONE**

Pt 2C - Sn B - Incurred Claims - OT  
**NONE**

Part 2C - Sn C - Claims Expense Ratio Co

NONE

Part 2C - Sn C - Claims Expense Ratio MS

NONE

Part 2C - Sn C - Claims Expense Ratio VO  
**NONE**

Part 2C - Sn C - Claims Expense Ratio FE  
**NONE**

Part 2C - Sn C - Claims Expense Ratio XV  
**NONE**

Part 2C - Sn C - Claims Expense Ratio XI  
**NONE**

Part 2C - Sn C - Claims Expense Ratio OT  
**NONE**

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2D - AGGREGATE RESERVE FOR ACCIDENT AND HEALTH CONTRACTS ONLY

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	11	12	13
		2	3										
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other
1. Unearned premium reserves .....	4,221					4,221							
2. Additional policy reserves (a) .....	3,900					3,900							
3. Reserve for future contingent benefits .....	.0												
4. Reserve for rate credits or experience rating refunds (including \$ ..... for investment income) .....	.0												
5. Aggregate write-ins for other policy reserves .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
6. Totals (gross) .....	8,121	.0	.0	.0	.0	8,121	.0	.0	.0	.0	.0	.0	.0
7. Reinsurance ceded .....	.0												
8. Totals (Net) (Page 3, Line 4)	8,121	0	0	0	0	8,121	0	0	0	0	0	0	0
9. Present value of amounts not yet due on claims .....	.0												
10. Reserve for future contingent benefits .....	.0												
11. Aggregate write-ins for other claim reserves .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
12. Totals (gross) .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
13. Reinsurance ceded .....	.0												
14. Totals (Net) (Page 3, Line 7)	0	0	0	0	0	0	0	0	0	0	0	0	0
DETAILS OF WRITE-INS													
0501. ....													
0502. ....													
0503. ....													
0598. Summary of remaining write-ins for Line 5 from overflow page .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 5 above)	0	0	0	0	0	0	0	0	0	0	0	0	0
1101. ....													
1102. ....													
1103. ....													
1198. Summary of remaining write-ins for Line 11 from overflow page .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

(a) Includes \$ .....3,900 premium deficiency reserve.

UNDERWRITING AND INVESTMENT EXHIBIT  
PART 3 - ANALYSIS OF EXPENSES

	Claim Adjustment Expenses		3 General Administrative Expenses	4 Investment Expenses	5 Total
	1 Cost Containment Expenses	2 Other Claim Adjustment Expenses			
1. Rent (\$ .....for occupancy of own building) .....	0	18	613	0	631
2. Salaries, wages and other benefits .....	0	832	43,941	0	44,773
3. Commissions (less \$ .....ceded plus \$ .....assumed) .....	0	0	12,103	0	12,103
4. Legal fees and expenses .....	0	0	25	0	25
5. Certifications and accreditation fees .....	0	0	0	0	0
6. Auditing, actuarial and other consulting services .....	0	0	34,754	0	34,754
7. Traveling expenses .....	0	0	1,046	0	1,046
8. Marketing and advertising .....	0	0	255	0	255
9. Postage, express and telephone .....	0	23	623	0	646
10. Printing and office supplies .....	0	39	345	0	384
11. Occupancy, depreciation and amortization .....	0	0	0	0	0
12. Equipment .....	0	0	95	0	95
13. Cost or depreciation of EDP equipment and software .....	0	11	1,872	0	1,883
14. Outsourced services including EDP, claims, and other services .....	0	0	0	0	0
15. Boards, bureaus and association fees .....	0	0	92	0	92
16. Insurance, except on real estate .....	0	0	149	0	149
17. Collection and bank service charges .....	0	0	7,718	0	7,718
18. Group service and administration fees .....	0	0	1	0	1
19. Reimbursements by uninsured plans .....	0	0	0	0	0
20. Reimbursements from fiscal intermediaries .....	0	0	0	0	0
21. Real estate expenses .....	0	0	0	0	0
22. Real estate taxes .....	0	0	0	0	0
23. Taxes, licenses and fees:					
23.1 State and local insurance taxes .....	0	0	0	0	0
23.2 State premium taxes .....	0	0	1,372	0	1,372
23.3 Regulatory authority licenses and fees .....	0	0	7,319	0	7,319
23.4 Payroll taxes .....	0	46	2,507	0	2,553
23.5 Other (excluding federal income and real estate taxes) .....	0	0	260	0	260
24. Investment expenses not included elsewhere .....	0	0	0	0	0
25. Aggregate write-ins for expenses .....	0	0	8,468	0	8,468
26. Total expenses incurred (Lines 1 to 25) .....	0	969	123,558	0	(a) 124,527
27. Less expenses unpaid December 31, current year .....	0	5	36,594	0	36,599
28. Add expenses unpaid December 31, prior year .....	0	13	39,405	0	39,418
29. Amounts receivable relating to uninsured plans, prior year .....	0	0	0	0	0
30. Amounts receivable relating to uninsured plans, current year .....	0	0	0	0	0
31. Total expenses paid (Lines 26 minus 27 plus 28 minus 29 plus 30)	0	977	126,369	0	127,346
DETAILS OF WRITE-INS					
2501. CORPORATE AND IT CHARGEBACKS.....			8,468		8,468
2502. ....			0		0
2503. ....			0		0
2598. Summary of remaining write-ins for Line 25 from overflow page .....	0	0	0	0	0
2599. Totals (Line 2501 through 2503 plus 2598) (Line 25 above)	0	0	8,468	0	8,468

(a) Includes management fees of \$ .....61,738 to affiliates and \$ .....to non-affiliates.

EXHIBIT OF NET INVESTMENT INCOME

		1	2
		Collected During Year	Earned During Year
1.	U.S. Government bonds .....	(a).....3,868	.....4,700
1.1	Bonds exempt from U.S. tax .....	(a).....0	.....0
1.2	Other bonds (unaffiliated) .....	(a).....0	.....0
1.3	Bonds of affiliates .....	(a).....0	.....0
2.1	Preferred stocks (unaffiliated) .....	(b).....0	.....0
2.11	Preferred stocks of affiliates .....	(b).....0	.....0
2.2	Common stocks (unaffiliated) .....	.....0	.....0
2.21	Common stocks of affiliates .....	.....0	.....0
3.	Mortgage loans .....	(c).....0	.....0
4.	Real estate .....	(d).....0	.....0
5.	Contract loans .....	.....0	.....0
6.	Cash, cash equivalents and short-term investments .....	(e).....22,585	.....22,585
7.	Derivative instruments .....	(f).....0	.....0
8.	Other invested assets .....	.....0	.....0
9.	Aggregate write-ins for investment income .....	.....0	.....0
10.	Total gross investment income .....	26,453	27,285
11.	Investment expenses .....		(g).....0
12.	Investment taxes, licenses and fees, excluding federal income taxes .....		(g).....0
13.	Interest expense .....		(h).....0
14.	Depreciation on real estate and other invested assets .....		(i).....0
15.	Aggregate write-ins for deductions from investment income .....		.....0
16.	Total deductions (Lines 11 through 15) .....		.....0
17.	Net investment income (Line 10 minus Line 16) .....		27,285
DETAILS OF WRITE-INS			
0901.	.....	.....0	.....0
0902.	.....		
0903.	.....		
0998.	Summary of remaining write-ins for Line 9 from overflow page .....	.....0	.....0
0999.	Totals (Lines 0901 through 0903 plus 0998) (Line 9 above) .....	0	0
1501.	.....		.....0
1502.	.....		
1503.	.....		
1598.	Summary of remaining write-ins for Line 15 from overflow page .....		.....0
1599.	Totals (Lines 1501 through 1503 plus 1598) (Line 15 above) .....		0

(a) Includes \$ .....323 accrual of discount less \$ ..... amortization of premium and less \$ .....1,011 paid for accrued interest on purchases.  
(b) Includes \$ ..... accrual of discount less \$ ..... amortization of premium and less \$ .....0 paid for accrued dividends on purchases.  
(c) Includes \$ .....0 accrual of discount less \$ .....0 amortization of premium and less \$ ..... paid for accrued interest on purchases.  
(d) Includes \$ ..... for company's occupancy of its own buildings; and excludes \$ ..... interest on encumbrances.  
(e) Includes \$ .....0 accrual of discount less \$ ..... amortization of premium and less \$ ..... paid for accrued interest on purchases.  
(f) Includes \$ ..... accrual of discount less \$ ..... amortization of premium.  
(g) Includes \$ ..... investment expenses and \$ ..... investment taxes, licenses and fees, excluding federal income taxes, attributable to segregated and Separate Accounts.  
(h) Includes \$ ..... interest on surplus notes and \$ ..... interest on capital notes.  
(i) Includes \$ ..... depreciation on real estate and \$ ..... depreciation on other invested assets.

EXHIBIT OF CAPITAL GAINS (LOSSES)

		1	2	3	4	5
		Realized Gain (Loss) On Sales or Maturity	Other Realized Adjustments	Total Realized Capital Gain (Loss) (Columns 1 + 2)	Change in Unrealized Capital Gain (Loss)	Change in Unrealized Foreign Exchange Capital Gain (Loss)
1.	U.S. Government bonds .....			.....0		
1.1	Bonds exempt from U.S. tax .....			.....0		
1.2	Other bonds (unaffiliated) .....			.....0		
1.3	Bonds of affiliates .....	.....0	.....0	.....0	.....0	.....0
2.1	Preferred stocks (unaffiliated) .....	.....0	.....0	.....0	.....0	.....0
2.11	Preferred stocks of affiliates .....	.....0	.....0	.....0	.....0	.....0
2.2	Common stocks (unaffiliated) .....	.....0	.....0	.....0	.....0	.....0
2.21	Common stocks of affiliates .....	.....0	.....0	.....0	.....0	.....0
3.	Mortgage loans .....	.....0	.....0	.....0	.....0	.....0
4.	Real estate .....	.....0	.....0	.....0		.....0
5.	Contract loans .....			.....0		
6.	Cash, cash equivalents and short-term investments .....			.....0	.....0	.....0
7.	Derivative instruments .....			.....0		
8.	Other invested assets .....	.....0	.....0	.....0	.....0	.....0
9.	Aggregate write-ins for capital gains (losses) .....	.....0	.....0	.....0	.....0	.....0
10.	Total capital gains (losses) .....	0	0	0	0	0
DETAILS OF WRITE-INS						
0901.	.....					
0902.	.....					
0903.	.....					
0998.	Summary of remaining write-ins for Line 9 from overflow page .....	.....0	.....0	.....0	.....0	.....0
0999.	Totals (Lines 0901 through 0903 plus 0998) (Line 9 above) .....	0	0	0	0	0

EXHIBIT OF NONADMITTED ASSETS

	1	2	3
	Current Year Total Nonadmitted Assets	Prior Year Total Nonadmitted Assets	Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1. Bonds (Schedule D).....	0	0	0
2. Stocks (Schedule D):			
2.1 Preferred stocks .....	0	0	0
2.2 Common stocks .....	0	0	0
3. Mortgage loans on real estate (Schedule B):			
3.1 First liens .....	0	0	0
3.2 Other than first liens .....	0	0	0
4. Real estate (Schedule A):			
4.1 Properties occupied by the company .....	0	0	0
4.2 Properties held for the production of income.....	0	0	0
4.3 Properties held for sale .....	0	0	0
5. Cash (Schedule E-Part 1), cash equivalents (Schedule E-Part 2) and short-term investments (Schedule DA).....	0	0	0
6. Contract loans .....	0	0	0
7. Derivatives (Schedule DB).....	0	0	0
8. Other invested assets (Schedule BA) .....	0	0	0
9. Receivables for securities .....	0	0	0
10. Securities lending reinvested collateral assets (Schedule DL).....	0	0	0
11. Aggregate write-ins for invested assets .....	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11) .....	0	0	0
13. Title plants (for Title insurers only).....	0	0	0
14. Investment income due and accrued .....	0	0	0
15. Premiums and considerations:			
15.1 Uncollected premiums and agents' balances in the course of collection.....	0	0	0
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due.....	0	0	0
15.3 Accrued retrospective premiums and contracts subject to redetermination .....	0	0	0
16. Reinsurance:			
16.1 Amounts recoverable from reinsurers .....	0	0	0
16.2 Funds held by or deposited with reinsured companies .....	0	0	0
16.3 Other amounts receivable under reinsurance contracts .....	0	0	0
17. Amounts receivable relating to uninsured plans .....	0	0	0
18.1 Current federal and foreign income tax recoverable and interest thereon .....	0	0	0
18.2 Net deferred tax asset.....	0	0	0
19. Guaranty funds receivable or on deposit .....	0	0	0
20. Electronic data processing equipment and software.....	0	0	0
21. Furniture and equipment, including health care delivery assets.....	0	0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates .....	0	0	0
23. Receivables from parent, subsidiaries and affiliates .....	0	0	0
24. Health care and other amounts receivable.....	2,587	3,691	1,104
25. Aggregate write-ins for other-than-invested assets .....	0	0	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25).....	2,587	3,691	1,104
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....	0	0	0
28. Total (Lines 26 and 27)	2,587	3,691	1,104
DETAILS OF WRITE-INS			
1101. ....		0	0
1102. ....		0	0
1103. ....		0	0
1198. Summary of remaining write-ins for Line 11 from overflow page .....	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)	0	0	0
2501. ....		0	0
2502. ....		0	0
2503. ....		0	0
2598. Summary of remaining write-ins for Line 25 from overflow page .....	0	0	0
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	0	0	0



EXHIBIT 1 - ENROLLMENT BY PRODUCT TYPE FOR HEALTH BUSINESS ONLY

Source of Enrollment	Total Members at End of					6 Current Year Member Months
	1 Prior Year	2 First Quarter	3 Second Quarter	4 Third Quarter	5 Current Year	
1. Health Maintenance Organizations.....	.0					
2. Provider Service Organizations.....	.0					
3. Preferred Provider Organizations.....	.0					
4. Point of Service.....	.0					
5. Indemnity Only.....	.0					
6. Aggregate write-ins for other lines of business.....	1,328	1,402	1,373	1,201	1,162	15,429
7. Total	1,328	1,402	1,373	1,201	1,162	15,429
DETAILS OF WRITE-INS						
0601. Dental.....	1,328	1,402	1,373	1,201	1,162	15,429
0602. ....						
0603. ....						
0698. Summary of remaining write-ins for Line 6 from overflow page .....	.0	.0	.0	.0	.0	.0
0699. Totals (Lines 0601 through 0603 plus 0698) (Line 6 above)	1,328	1,402	1,373	1,201	1,162	15,429

NOTES TO FINANCIAL STATEMENTS

Note #	Description	Page #
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NOTES TO FINANCIAL STATEMENTS

1. Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

The financial statements of UDC Ohio, Inc. (the “Company”) are presented on the basis of accounting practices prescribed or permitted by the Ohio Department of Insurance.

The Ohio Department of Insurance recognizes only statutory practices prescribed or permitted by the State of Ohio for determining and reporting the financial condition and results of operations of an insurance company, and for determining its solvency under the Ohio Insurance Law. The National Association of Insurance Commissioners’ (“NAIC”) *Accounting Practices and Procedures Manual* (“NAIC SAP”) has been adopted as a component of prescribed or permitted practices by the State of Ohio. The state has adopted certain prescribed accounting practices that differ from those found in NAIC SAP. The Commissioner of Insurance has the right to permit other specific practices that deviate from prescribed practices.

A reconciliation of the Company's net income and capital and surplus between NAIC SAP and practices prescribed and permitted by the State of Ohio is shown below:

	SSAP #	F/S Page	F/S Line #	12/31/2024	12/31/2023
NET INCOME					
(1) Company state basis (Page 4, Line 32, Columns 2 & 3)				\$ (1,412)	\$ (12,648)
(2) State Prescribed Practices that increase/(decrease) NAIC SAP:				—	—
(3) State Permitted Practices that increase/(decrease) NAIC SAP:				—	—
(4) NAIC SAP (1-2-3=4)				<u>\$ (1,412)</u>	<u>\$ (12,648)</u>
SURPLUS					
(5) Company state basis (Page 3, Line 33, Columns 3 & 4)				\$ 777,684	\$ 777,992
(6) State Prescribed Practices that increase/(decrease) NAIC SAP:				—	—
(7) State Permitted Practices that increase/(decrease) NAIC SAP:				—	—
(8) NAIC SAP (5-6-7=8)				<u>\$ 777,684</u>	<u>\$ 777,992</u>

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

The preparation of financial statements in conformity with NAIC SAP requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities. It also requires disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expense during the year. Actual results could differ from those estimates.

C. Accounting Policy

Premiums billed to individual and group subscribers are recognized as revenue in the month in which subscribers are entitled to receive dental care. Uncollected premiums over 90 days past due are nonadmitted and excluded from surplus. The Company contracts with dentists (providers) for dental services to be provided to its subscribers. Provider capitation consists of monthly fees paid to providers and is expensed in the month in which the provider is obligated to render dental services. Emergency services to members while temporarily out of their provider’s area, as well as specialty services not covered by capitation fees, are recorded as incurred.

In addition, the Company uses the following accounting policies:

- (1) Short-term investments are stated at amortized cost, which approximates fair value.
- (2) Bonds, mandatory convertible securities, and SVO-identified investments identified in SSAP No. 26R, not backed by other loans, are stated at amortized cost using the scientific method, except for those securities, which are other-than-temporarily impaired or where the NAIC rating has fallen to 6 and the fair value has fallen below amortized cost, in which case they are carried at fair value.
- (3) Common stocks are stated at fair value.
- (4) The Company does not have investments in preferred stocks.
- (5) The Company does not have investments in mortgage loans.
- (6) The Company does not have investments in loan-backed securities.
- (7) The Company does not own any shares of an upstream or intermediate parent or affiliate, either directly or indirectly.
- (8) The Company does not have investments in joint ventures, partnerships or limited liability companies.
- (9) The Company does not have investments in derivative instruments.

## NOTES TO FINANCIAL STATEMENTS

### (10) Aggregate Health Policy Reserves and Related Expenses

Premium deficiency reserves ("PDR") are recognized when it is possible that the expected future hospital and medical costs, including maintenance costs, will exceed anticipated future premiums and reinsurance recoveries on existing contracts. Anticipated investment income was not used in the calculation. The Company has premium deficiency liability at December 31, 2024.

(11) The reserve for costs expected to be incurred for services approved during the year, as well as costs incurred but not reported, are actuarial estimates based on historical claims data. The methods for making such estimates and for establishing the resulting liabilities are continually reviewed and any adjustments are reflected in the period determined.

(12) Fixed assets are not material to the Company's operations. The Company has not modified its capitalization policy from the prior year.

(13) The Company does not have pharmaceutical rebate receivables.

### D. Going concern

Management has evaluated the Company's financial position and determined that no conditions or events have occurred that would raise doubt about the Company's ability to continue as a going concern.

## 2. Accounting Changes and Corrections of Errors

### Accounting Changes

During the statement period, the NAIC's Statutory Accounting Principles Working Group (SAPWG) adopted and exposed changes related to various SSAP pronouncements, which were each evaluated independently for materiality and impact on the Company for the period ended December 31, 2024.

The following were adopted by the Company during the statement year:

- a. In August 2023, the NAIC adopted revisions to clarify and incorporate a new bond definition within disclosures SSAP No. 26 – Bonds, SSAP No. 43 – Asset-Backed Securities, and other related SSAPs, which will become effective January 1, 2025. The revisions were issued in connection with its principle-based bond definition project, "the Bond Project".

The Bond Project began in October 2020 through the development of a principle-based bond definition to be used for all securities in determining whether they qualify for reporting on the statutory annual statement Schedule D. Within the new bond definition, bonds are classified as an "issuer credit obligation" or an "asset-backed security."

An "issuer credit obligation" is defined as a bond where repayment is supported by the general creditworthiness of an operating entity, and an "asset-backed security" is defined as a bond issued by an entity created for the primary purpose of raising capital through debt backed by financial assets. The revisions to SSAP No. 26 reflect the principle-based bond definition, and SSAP No. 43 provides accounting and reporting guidance for investments that qualify as asset-backed securities under the new bond definition. Upon adoption, investments that do not qualify as bonds will not be permitted to be reported as bonds on Schedule D, Part 1 thereafter as there will be no grandfathering for existing investments that do not qualify under the revised SSAPs. The Company is currently assessing the impacts of the adopted SSAP No. 26, SSAP No. 43 and other related SSAPs in relation to the financial statements and will implement the changes in the March 31, 2025 quarterly financial statements.

- b. In March 2024, the NAIC adopted revisions to SSAP No. 21R - Other Admitted Assets, effective January 1, 2025, clarifying that residuals follow the effective yield approach with a cap and providing an election for the cost recovery method. The modifications are not expected to have a material effect on the Company's financial statements.
- c. Effective January 1, 2025, revisions will be made to short-term investments, which include excluding additional investment types from being reported as cash equivalents or short-term investments regardless of maturity date of the investment at the date of acquisition. Investments will be eliminated from being reported as cash equivalents or short-term investments unless they would qualify under SSAP No. 26R—Bonds as an issuer credit obligation. Such investments will then only qualify as a cash equivalent or short-term investment if they have a maturity date within 3-months (cash equivalents) or 12-months (short-term) from the date of acquisition or meet the specifics requirements for money market mutual funds or cash pooling arrangement. The modifications are not expected to have a material effect on the Company's financial statements.
- d. The NAIC adopted revisions to various SSAPs at the Spring National Meeting for investments in tax credits and acquired tax credits in response to the comments received, as well as updated annual statement reporting categories for tax credit investment risk-based capital. These revisions are in addition to the previous ones, which include broad criteria to scope in various tax credit programs, including solar programs and state specific programs. Proportional amortization will be the measurement approach as with existing low-income housing tax credits, which means recording amortization of the investment in the partnership through net investment income and use of the tax credits in the appropriate tax line. The adopted revisions will be effective on January 1, 2025. The Company is assessing the potential impact on the Company's financial statements.

### Corrections of Errors

The Company did not have any corrections of errors during the reporting period.

## 3. Business Combinations and Goodwill

### A. Statutory Purchase Method

There were no business combinations accounted for under the statutory purchase method during the statement year.

### B. Statutory Merger

The Company was not a part of any statutory mergers during the statement year.

NOTES TO FINANCIAL STATEMENTS

C. Assumption Reinsurance

The Company did not enter into any assumption reinsurance agreements during the statement year.

D. Impairment Loss

The Company did not recognize any impairment losses on any of the transactions described above during the statement year.

E. Subcomponents and Calculation of Adjusted Surplus and Total Admitted Goodwill

The Company does not hold any goodwill. Calculation of adjusted capital and surplus is provided below:

		Calculation of Limitation Using Prior Quarter Numbers	Current Reporting Period
(1)	Capital and Surplus	\$ 777,684	XXX
	Less:		
(2)	Admitted Positive Goodwill	\$ —	XXX
(3)	Admitted EDP Equipment & Operating System Software	\$ —	XXX
(4)	Admitted Net Deferred Taxes	\$ —	XXX
(5)	Adjusted Capital and Surplus (Line 1-2-3-4)	\$ 777,684	XXX
(6)	Limitation on amount of goodwill (adjusted capital and surplus times 10% goodwill limitation [Line 5*10%])	\$ 77,768	XXX
(7)	Current period reported Admitted Goodwill	XXX	\$ —
(8)	Current Period Admitted Goodwill as a % of prior period Adjusted Capital and Surplus (Line 7/Line 5)	XXX	— %

4. Discontinued Operations

The Company did not have any discontinued operations during the statement year.

5. Investments

A. Mortgage Loans, including Mezzanine Real Estate Loans

The Company does not have any mortgage loans or real estate for the statement year.

B. Debt Restructuring

The Company does not have debt restructuring for the statement year.

C. Reverse Mortgages

The Company does not have reverse mortgage investments for the statement year.

D. Loan-Backed Securities

The Company does not hold loan-backed securities.

E. Dollar Repurchase Agreements and/or Securities Lending Transactions

The Company does not have dollar repurchase agreements and does not participate in a securities lending program.

F. Repurchase Agreements Transactions Accounted for as Secured Borrowing

The Company does not have repurchase agreements transactions accounted for as secured borrowing.

G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing

The Company does not have reverse repurchase agreements transactions accounted for as secured borrowing.

H. Repurchase Agreements Transactions Accounted for as a Sale

The Company does not have repurchase agreements transactions accounted for as a sale.

I. Reverse Repurchase Agreements Transactions Accounted for as a Sale

The Company does not have reverse repurchase agreements transactions accounted for as a sale.

J. Real Estate

The Company does not have any real estate holdings.

NOTES TO FINANCIAL STATEMENTS

K. Low-Income Housing Tax Credits (LIHTC)

The Company does not have any low income housing tax credits.

L. Restricted Assets

(1) Restricted Assets (including Pledged)

Restricted Asset Category			1	2	3	4	5	6	7
			Total Gross (Admitted & Nonadmitted) Restricted from Current Year	Total Gross (Admitted & Nonadmitted) Restricted from Prior Year	Increase/ (Decrease) (1 minus 2)	Total Current Year Nonadmitted Restricted	Total Current Year Restricted (1 minus 4)	Gross (Admitted & Nonadmitted) Restricted to Total Assets (a)	Admitted Restricted to Total Admitted Assets (b)
	a.	Subject to contractual obligation for which liability is not shown	\$ —	\$ —	\$ —	\$ —	\$ —	— %	— %
	b.	Collateral held under security lending agreements	—	—	—	—	—	—	—
	c.	Subject to repurchase agreements	—	—	—	—	—	—	—
	d.	Subject to reverse repurchase agreements	—	—	—	—	—	—	—
	e.	Subject to dollar repurchase agreements	—	—	—	—	—	—	—
	f.	Subject to dollar reverse repurchase agreements	—	—	—	—	—	—	—
	g.	Placed under option contracts	—	—	—	—	—	—	—
	h.	Letter stock or securities restricted as to sale - excluding FHLB capital stock	—	—	—	—	—	—	—
	i.	FHLB capital stock	—	—	—	—	—	—	—
	j.	On deposit with states	219,319	—	219,319	—	219,319	25.2 %	25.3 %
	k.	On deposit with other regulatory bodies	—	—	—	—	—	—	—
	l.	Pledged collateral to FHLB (including assets backing funding agreements)	—	—	—	—	—	—	—
	m.	Pledged as collateral not captured in other categories	—	—	—	—	—	—	—
	n.	Other restricted assets	—	—	—	—	—	—	—
	o.	Total Restricted Assets	\$ 219,319	\$ —	\$ 219,319	\$ —	\$ 219,319	25.2 %	25.3 %

(a) Column 1 divided by Asset Page, Column 1, Line 28

(b) Column 5 divided by Asset Page, Column 3, Line 28

(2) The Company does not have assets pledged as collateral not captured in other categories.

(3) The Company does not have any other restricted assets.

(4) The Company has not received any collateral reflected as assets within the Company’s financial statements.

M. Working Capital Finance Investments

The Company does not have working capital finance programs.

N. Offsetting and Netting of Assets and Liabilities

The Company has no offsetting or netting of assets and liabilities.

O. 5GI Securities

The Company does not hold 5GI securities.

P. Short Sales

The Company did not have any short sale transactions for the statement year.

Q. Prepayment Penalty and Acceleration Fees

The Company did not incur any prepayment penalties or acceleration fees during the statement year.

R. Reporting Entity’s Share of Cash Pool by Asset type

The Company did not participate in a cash pool during the statement year.

S. Aggregate Collateral Loans by Qualifying Investment Collateral

The Company does not have any collateral loans during the statement year.

6. Joint Ventures, Partnerships and Limited Liability Companies

A. Investments in Joint Ventures, Partnerships or Limited Liability Companies that exceed 10% of its admitted assets.

The Company does not hold any ownership interests in joint ventures, partnerships or limited liability companies.

B. Write-downs for Impairments in Joint Ventures, Partnerships and Limited Liability Companies

The Company did not recognize any write-downs for impairments during the statement year.

NOTES TO FINANCIAL STATEMENTS

7. Investment Income

- A. Due and accrued income is excluded from surplus on the following basis:
- The Company excludes all investment income due and accrued with amounts over 90 days past due.
- B. The total amount of investment income due and accrued excluded from surplus for the statement year was \$0.
- C. The gross, nonadmitted and admitted amounts for interest income due and accrued.
- | Interest Income Due and Accrued | Amount   |
|---------------------------------|----------|
| 1. Gross                        | \$ 2,238 |
| 2. Nonadmitted                  | \$ —     |
| 3. Admitted                     | \$ 2,238 |
- D. There were no amounts for aggregate deferred interest at December 31, 2024 or 2023.
- E. There were no cumulative amounts of paid-in-kind interest included in the current principal balance at December 31, 2024 or 2023.

8. Derivative Instruments

The Company does not hold any derivative instruments.

9. Income Taxes

- A. The application of SSAP No. 101 requires a company to evaluate the recoverability of deferred tax assets and to establish a valuation allowance, if necessary, to reduce the deferred tax asset to an amount, which is more likely than not to be realized. Considerable judgment is required in determining whether a valuation allowance is necessary, and if so, the amount of such valuation allowance. As a result of management's evaluation at December 31, 2024, management believes it is more likely than not that the deferred tax assets will not be realized. Therefore, the Company has recorded a valuation allowance against the gross deferred assets ("DTAs"), excluding the effects associated with its deferred tax liabilities ("DTLs"), as of December 31, 2024, and December 31, 2023.
- On August 16th, 2022, the Inflation Reduction Act ("IRA") was signed into law and includes certain corporate income tax provisions. Impacts to the Company include the imposition of a corporate alternative minimum tax "CAMT" applicable to tax years beginning after December 31, 2022. The CAMT imposes a 15% minimum tax on adjusted financial statement income on applicable corporations. The Company has determined it is an applicable corporation and is subject to CAMT starting in 2023. Pending final regulations, the Company determined that it does not have a CAMT liability in 2023 or through Q4 2024. The Company has not made an accounting policy election regarding CAMT when evaluating the need for a valuation allowance for its regular tax DTAs.
1. The components of deferred tax assets ("DTAs") and deferred tax liabilities ("DTLs") as of December 31, 2024, and December 31, 2023, are as follows:

Description	12/31/2024			12/31/2023			Change		
	(1)	(2)	(3)	(1)	(2)	(3)	(7)	(8)	(9)
	Ordinary	Capital	(Col 1+2) Total	Ordinary	Capital	(Col 4+5) Total	(Col 1-4) Ordinary	(Col 2-5) Capital	(Col 7+8) Total
(a) Gross deferred tax assets	\$ 39,137	\$ —	\$ 39,137	\$ 39,406	\$ —	\$ 39,406	\$ (269)	\$ —	\$ (269)
(b) Statutory valuation allowance adjustments	37,621	—	37,621	37,609	—	37,609	12	—	12
(c) Adjusted gross deferred tax assets (1a-1b)	1,516	—	1,516	1,797	—	1,797	(281)	—	(281)
(d) Deferred tax assets nonadmitted	—	—	—	—	—	—	—	—	—
(e) Subtotal net admitted deferred tax assets (1c-1d)	1,516	—	1,516	1,797	—	1,797	(281)	—	(281)
(f) Deferred tax liabilities	1,516	—	1,516	1,797	—	1,797	(281)	—	(281)
(g) Net admitted deferred tax assets/(net deferred tax liability) (1e-1f)	\$ —	\$ —	\$ —	\$ —	\$ —	\$ —	\$ —	\$ —	\$ —

2. The following table provides component amounts of the Company's net admitted DTA calculation by tax character of paragraphs 11.a, 11.b.i, 11.b.ii and 11.c of SSAP No. 101 and the risk-based capital level used to determine the recovery period and threshold limitation amount.

NOTES TO FINANCIAL STATEMENTS

Description	12/31/2024			12/31/2023			Change		
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
	Ordinary	Capital	(Col 1+2) Total	Ordinary	Capital	(Col 4+5) Total	(Col 1-4) Ordinary	(Col 2-5) Capital	(Col 7+8) Total
Admission Calculation Components									
SSAP No. 101									
(a) Federal income taxes paid in prior years recoverable through loss carrybacks	\$ —	\$ —	\$ —	\$ —	\$ —	\$ —	\$ —	\$ —	\$ —
(b) Adjusted gross deferred tax assets expected to be realized (excluding the amount of deferred tax assets from 2(a) above) after application of the threshold limitation. (The lesser of 2(b)1 and 2(b)2 below)	—	—	—	—	—	—	—	—	—
1. Adjusted gross deferred tax assets expected to be realized following the balance sheet date	—	—	—	—	—	—	—	—	—
2. Adjusted gross deferred tax assets allowed per limitation threshold	—	—	116,653	—	—	116,699	—	—	(46)
(c) Adjusted gross deferred tax assets (excluding the amount of deferred tax assets from 2(a) and 2(b) above) offset by gross deferred tax liabilities.	—	—	—	—	—	—	—	—	—
(d) Deferred tax assets admitted as the result of application of SSAP No. 101. Total (2(a) + 2(b) + 2(c))	<u>\$ —</u>	<u>\$ —</u>	<u>\$ —</u>	<u>\$ —</u>	<u>\$ —</u>	<u>\$ —</u>	<u>\$ —</u>	<u>\$ —</u>	<u>\$ —</u>

3. Adjusted capital and surplus

	12/31/2024		12/31/2023	
Ratio percentage used to determine recovery period and threshold				
a.) limitation amount		12,330 %		11,127 %
Amount of adjusted capital and surplus used to determine recovery period and threshold limitation In				
b.) 2(b)2 above	\$	781,584	\$	777,991

4. The following table provides the impact of tax-planning strategies, if used in the Company's SSAP No. 101 calculation, on adjusted gross and net admitted DTAs.

Description	12/31/2024		12/31/2023		Change	
	(1)	(2)	(4)	(5)	(7)	(8)
	Ordinary	Capital	Ordinary	Capital	(Col 1-4) Ordinary	(Col 2-5) Capital
Impact of Tax Planning Strategies						
(a) Determination of adjusted gross deferred tax assets and net admitted deferred assets, by tax character as a percentage						
1 Adjusted gross DTAs amount from Note 9A1(c)	\$ 1,516	\$ —	\$ 1,797	\$ —	\$ (281)	\$ —
2 Percentage of adjusted gross DTAs by tax character attributable to the impact of tax planning strategies	0.0 %	0.0 %	0.0 %	0.0 %	0.0 %	0.0 %
3 Net admitted adjusted gross DTAs amount from Note 9A1(e)	\$ 1,516	\$ —	\$ 1,797	\$ —	\$ (281)	\$ —
4 Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of tax planning strategies	0.0 %	0.0 %	0.0 %	0.0 %	0.0 %	0.0 %
(b) Does the Company's tax-planning strategies include the use of reinsurance?	Yes	No X				

B. Not applicable.

C. The following tables provide the Company's significant components of income taxes incurred and the changes in DTAs and DTLs.

	(1)	(2)	(3)
	12/31/2024	12/31/2023	(Col 1-2) Change
1. Current Income Tax:			
(a) Federal	\$ —	\$ —	\$ —
(b) Foreign	—	—	—
(c) Subtotal (1a+1b)	—	—	—
(d) Federal income tax on net capital gains	—	—	—
(e) Utilization of loss carryforwards	—	—	—
(f) Prior period adjustment	—	—	—
(g) Federal and foreign income taxes incurred (1c+1d+1e+1f)	<u>\$ —</u>	<u>\$ —</u>	<u>\$ —</u>



NOTES TO FINANCIAL STATEMENTS

	(1)	(2)	(3)
	12/31/2024	12/31/2023	(Col 1-2) Change
2. Deferred Tax Assets:			
(a) Ordinary			
(1) Unassigned capitation	\$ —	\$ —	\$ —
(2) Nonadmitted assets	543	775	(232)
(3) Net operating loss (NOL)	33,310	32,953	357
(4) Accrued audit fees	5,283	5,675	(392)
(5) CAMT Credit	—	—	—
(6) Other	1	3	(2)
(99) Subtotal (sum of 2a1 through 2a6)	39,137	39,406	(269)
(b) Statutory valuation allowance adjustment	37,621	37,609	12
(c) Nonadmitted	—	—	—
(d) Admitted ordinary deferred tax assets (2a99 – 2b – 2c)	1,516	1,797	(281)
(e) Capital:			
(1) Investments	—	—	—
(2) Net capital loss carryforward	—	—	—
(3) Real estate	—	—	—
(4) Other	—	—	—
(99) Subtotal (sum of 2e1 through 2e4)	—	—	—
(f) Statutory valuation allowance adjustment	—	—	—
(g) Nonadmitted	—	—	—
(h) Admitted capital deferred tax assets (2e99 – 2f – 2g)	—	—	—
(i) Admitted deferred tax assets (2d + 2h)	\$ 1,516	\$ 1,797	\$ (281)

	(1)	(2)	(3)
	12/31/2024	12/31/2023	(Col 1-2) Change
3. Deferred Tax Liabilities:			
(a) Ordinary			
(1) Investments	\$ 195	\$ 93	\$ 102
(2) Fixed assets	—	—	—
(3) Deferred and uncollected premium	—	—	—
(4) Prepaid capitation	543	775	(232)
(5) Other	778	929	(151)
(99) Subtotal (sum of 3a1 through 3a5)	1,516	1,797	(281)
(b) Capital:			
(1) Investments	—	—	—
(2) Real estate	—	—	—
(3) Other	—	—	—
(99) Subtotal (3b1+3b2+3b3)	—	—	—
(c) Deferred tax liabilities (3a99+3b99)	\$ 1,516	\$ 1,797	\$ (281)
4. Net deferred tax assets/liabilities (2i-3c)	\$ —	\$ —	\$ —

D. The provision for federal income taxes incurred for the current year is different from that which would be obtained by applying the statutory federal income tax rate of 21% to income before income taxes. The significant items causing this difference are as follows:

NOTES TO FINANCIAL STATEMENTS

Description		Amount	Tax Effect @ 21%	Effective Tax Rate
(a)	Income before taxes	\$ (1,412)	\$ (297)	21.0%
(b)	Pre-tax capital gains - pre IMR	—	—	0.0%
(c)	Dividends received deduction	—	—	0.0%
(d)	Non-deductible expenses	251	53	-3.8%
(e)	Change in tax contingency reserves	—	—	0.0%
(f)	IMR	—	—	0.0%
(g)	Change in nonadmitted assets	1,105	232	-16.4%
(h)	Prior year over/under accrual	—	—	0.0%
(g)	Change in federal income tax rate for deferred tax assets and liabilities	—	—	0.0%
(j)	Change in statutory valuation allowance	—	12	-0.8%
(k)	Miscellaneous	—	—	0.0%
(l)	Total statutory income taxes		<u>\$ —</u>	<u>0.0%</u>
(m)	Federal and foreign income taxes incurred		\$ —	0.0%
(n)	Change in net deferred income taxes		—	0.0%
(o)	Total statutory income taxes		<u>\$ —</u>	<u>0.0%</u>

- E. (1) At December 31, 2024, the Company has \$158,731 of net operating loss carryforwards, which will begin to expire, if not utilized, in 2036. At December 31, 2024, the Company has no capital loss carryforward.
- (2) There are no tax expenses incurred in the periods after acquisition that are available for recoupment in the event of future losses.
- (3) At December 31, 2024, the Company has no deposits admitted under Section 6603 of the Internal Revenue Service Code.
- F. (1) For the year ended December 31, 2024, the Company will file a stand-alone federal income tax return as an insurance company.
- (2) Not applicable.
- G. As of December 31, 2024, there are no positions for which management believes it to be reasonably possible that total amounts of tax contingencies will significantly increase or decrease within 12 months of the reporting date.
- H-I. At December 31, 2024 and December 31, 2023, the Company had no Corporate Alternative Minimum Tax (CAMT) credit carryforward.

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

- A.-B. On March 1, 2016, after receiving all required regulatory approvals, Sun Life Assurance Company of Canada ("SLOC") acquired substantially all of the U.S. employee benefits business of Assurant, Inc., including all of the issued and outstanding stock of the Company. The Company is a wholly owned direct subsidiary of SLOC and a wholly owned indirect subsidiary of Sun Life Financial Inc.
- C. Transactions with related party who are not reported on Schedule Y

(1) Detail of Material Related Party Transactions

The Company had no material transactions with related parties.

(2) Detail of Material Related Party Transactions Involving Services

Ref #	Name of Related Party	Overview Description	Amount Charged	Amount Based on Allocation of Costs or Market Rates	Amount Charged Modified or Waived (Yes/No)
GSA-103	SLOC	Administrative Services Agreement	\$ 16,218	\$ 66,590	No
GSA-131			\$ —	\$ —	
Total			\$ 16,218	\$ 66,590	

(3) Detail of Material Related Party Transactions Involving Exchange of Assets and Liabilities

The Company had no material transactions involving exchange of assets and liabilities with related parties.

(4) Detail of Amounts Owed To/From a Related Party

Name of Related Party	Aggregate Amount Due From	Aggregate Amount Due To	Amount Offset In Financial Statement	Net Amount Recoverable/ (Payable)	Admitted Recoverable
SLOC	\$ 38,490	\$ (45,190)	\$ (6,700)	\$ (6,700)	—
	\$ —	\$ —	\$ —	\$ —	—
Total	\$ 38,490	\$ (45,190)	\$ (6,700)	\$ (6,700)	—

- D. The Company had \$6,700 and \$11,898 due to related parties at December 31, 2024 and December 31, 2023, respectively, under the terms of various management and service contracts, which provide for cash settlements on a quarterly or more frequent basis. The Company had no balances due from related parties at December 31, 2024 and December 31, 2023.

NOTES TO FINANCIAL STATEMENTS

E. Material management and service contracts and all cost sharing arrangements involving the Company and any related party are as follows:

An administrative services agreement between the Company and SLOC, under which SLOC provides general administrative support services to the Company on a cost reimbursement basis. (Reference: GSA-103)

An administrative services agreement between the Company and Sun Life and Health Insurance Company (U.S.) whereby Sun Life and Health Insurance Company (U.S.) provides billing, collection, and broker services to the Company. (Reference: GSA-131)

An investment advisory agreement between the Company and Sun Life Capital Management (U.S.) LLC ("SLCMUS") (formerly, Sun Life Institutional Investments (U.S.) LLC and Sun Capital Advisers LLC), under which SLCMUS acts as investment manager for certain of the Company's portfolios. (Reference: ISA-42)

- F. The Company had no guarantees or undertakings for the benefit of an affiliate during the statement period.
- G. The Company is a wholly owned direct subsidiary of SLOC and a wholly owned indirect subsidiary of Sun Life Financial Inc.
- H. The Company does not own any shares of an upstream or intermediate parent, either directly or indirectly.
- I. The Company does not own any shares in an affiliate or other related entity.
- J. The Company did not recognize any impairment write downs for its investments in subsidiary, controlled and affiliated ("SCA") entities.
- K. The Company does not own any shares in foreign investments.
- L. The Company does not have any investments in downstream non-insurance holding companies.
- M. The Company does not have investments in non-insurance SCA entities.
- N. The Company does not have investments in insurance SCA entities.
- O. The Company does not have any investments in SCA entities.

11. Debt

- A. The Company had no debt obligations during the statement year.
- B. The Company had no borrowing agreements through the Federal Home Loan Bank.

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

A.-D. Defined Benefit Plans

The Company does not have any Defined Benefit Plans.

E. Defined Contribution Plans

The Company participates in the Sun Advantage Savings and Investment Plan, sponsored by Sun Life Services, that qualifies under Section 401(k) of the Internal Revenue Code (the "401(k) Plan") and includes a retirement investment account feature that qualifies under Section 401(a) of the Internal Revenue Code (the "RIA"). Expenses under the 401(k) Plan and the RIA are allocated to participating companies pursuant to approved inter-company agreements. The expenses allocated to the Company under the 401(k) plan and the RIA for the years ended December 31, 2024 and December 31, 2023 were \$3,934 and \$3,252, respectively.

F. Multiemployer Plans

The Company does not participate in any multiemployer plans.

G. Consolidated/Holding Company Plan

Not applicable.

H. Postemployment Benefits and Compensated Absences

Not applicable.

I. Impact of Medicare Modernization Act on Postretirement Benefits

The Company did not experience any impact due to the Medicare Modernization Act.

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

- A. The Company is authorized to issue 1,000 shares of common stock, \$.10 par value per share. 1,000 shares were issued and outstanding as of December 31, 2024.
- B. The Company has no preferred stock outstanding.
- C. The State of Ohio has enacted laws governing the payment of dividends to stockholders by domestic insurers. Pursuant to

NOTES TO FINANCIAL STATEMENTS

Ohio’s insurance laws, the Company may pay a shareholder dividend only from its earned surplus. In addition, the maximum amount of dividends and distributions that the Company may pay in any twelve month period without the prior of approval of the Director of the Department of Insurance is limited to the greater of: (i) 10% of the Company’s surplus as regards policyholders as of the preceding December 31, and (ii) the net income of the Company for the preceding calendar year.

- D. There were no dividends paid during the statement year.
- E. Within the limitations of 13(3) above and applicable state corporate law, there are no restrictions placed on the portion of the Company's profits that may be paid as ordinary dividends to its stockholders.
- F. There were no restrictions placed on the Company's surplus during the statement year, and all surplus is held for the benefit of the stockholders.
- G. The Company does not have any advances to surplus.
- H. The Company does not hold any preferred stock, employee stock options or stock purchase warrants.
- I. The Company does not have special surplus funds as of December 31, 2024.
- J. The portion of unassigned funds (surplus) represented or reduced by cumulative unrealized gains and (losses) excluding deferred tax was \$0 at December 31, 2024.
- K. The Company did not issue any surplus debenture or similar obligations during the periods covered by this statement.
- L. The Company did not participate in any quasi reorganization during the statement year.
- M. The Company has not participated in any quasi reorganization in the past 10 years.

14. Liabilities, Contingencies and Assessments

A. Contingent Commitments

The Company did not have any material contingent liabilities or guarantees for the statement year.

B. Assessments

The Company has not been notified of any insolvency that will result in a guaranty fund assessment against the Company at some future date.

The Company has not established an asset for premium tax credits or policy surcharges, as the amount of recoveries is unknown and cannot be reasonably estimated.

C. Gain Contingencies

The Company did not have any gain contingencies for the statement year.

D. Claims Related Extra Contractual Obligations and Bad Faith Losses Stemming from Lawsuits

The Company did not have claims-related extra contractual obligation or bad faith losses stemming from lawsuits for the statement year.

E. Joint and Several Liabilities

The Company did not have any joint and several liabilities for the statement year.

F. All Other Contingencies

Occasionally, in the ordinary course of its business, the Company may be threatened with litigation or be a party to it. While it is not possible to predict when such threats or litigation may arise, or the outcome of them, management believes, based upon currently available information, that there are no pending matters that, when ultimately resolved, would be materially adverse to the Company's financial position, results of operations or cash flows.

In the normal course of its business, the Company enters into agreements that include indemnities in favor of third parties, such as contracts with advisors and consultants, outsourcing agreements, underwriting and agency agreements, information technology agreements, distribution agreements, and service agreements. The Company has also agreed to indemnify its directors and certain of its officers and employees in accordance with the Company's by-laws. The Company believes that any potential liability under these agreements is neither probable nor estimable; therefore, the Company has not recorded any associated liability.

15. Leases

A. Lessee Leasing Arrangements

The Company has no lease commitments.

B. Lessor Leasing Arrangements

The Company did not participate in any lessor leasing arrangements or hold any leveraged leases during the statement year.

NOTES TO FINANCIAL STATEMENTS

16. Information about Financial Instruments with Off-Balance Sheet Risk and Financial Instruments with Concentrations of Credit Risk

The Company does not hold any financial instruments with off-balance-sheet risk or financial instruments with concentrations of credit risk.

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

A. Transfers of Receivables Reported as Sales

Not applicable.

B. Transfer and Servicing of Financial Assets

Not applicable.

C. Wash Sales

The Company did not incur any wash sales for the statement year.

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

A. Administrative Services Only (ASO) Plans

The Company does not administer ASO business.

B. Administrative Services Contract (ASC) Plans

The Company does not administer ASC business.

C. Medicare or Similarly Structured Cost Based Reimbursement Contract

The Company does not administer any Medicare or similarly structured cost-based reimbursement contracts.

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

The Company did not have direct written premium generated through managing general agents or third party administrator during the statement year.

20. Fair Value Measurements

A. Assets Measured at Fair Value

Fair value is defined as the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. In determining fair value, the Company uses various methods including market, income and cost approaches. The Company utilizes valuation techniques that maximize the use of observable inputs and minimize the use of unobservable inputs.

- (1) The Company did not hold assets measured at fair value as of December 31, 2024.
- (2) Consistent with Note 20(A)(1), since no assets were measured at fair value, no securities were categorized within Level 3 of the fair value hierarchy for the year ended December 31, 2024.
- (3) The Company had no transfers into or out of Level 3 during the statement year. Additionally, the Company consistently follows its policy for determining when transfers between levels are recognized.
- (4) The Company has categorized the fair value of its financial instruments into a three-level hierarchy based on the priority of the inputs to the valuation technique. The fair value hierarchy gives the highest priority to quoted prices in active markets for identical assets or liabilities (Level 1) and the lowest priority to unobservable inputs (Level 3). If the inputs used to measure fair value fall within different levels of the hierarchy, the category level is based on the lowest priority level input that is significant to the fair value measurement of the instrument.

Financial assets and liabilities recorded at fair value in the Company's balance sheet are categorized as follows:

Level 1 - Unadjusted quoted prices for identical assets or liabilities in an active market. The types of assets and liabilities utilizing Level 1 valuations include U.S. Treasury and agency securities and investments in publicly-traded mutual funds with quoted market prices.

Level 2 - Quoted prices in markets that are not active or significant inputs that are observable either directly or indirectly. Level 2 inputs include the following:

- Quoted prices for similar assets or liabilities in active markets,
- Quoted prices for identical or similar assets or liabilities in non-active markets,
- Inputs other than quoted market prices that are observable, and
- Inputs that are derived principally from or corroborated by observable market data through correlation or other means.

The types of assets and liabilities utilizing Level 2 valuations generally include U.S. Government securities not backed by the full faith and credit of the U.S. Government, municipal bonds, structured notes and certain asset-backed securities ("ABS") including collateralized debt obligations, residential mortgage-backed securities ("RMBS"), commercial mortgage-backed securities ("CMBS"), certain corporate debt and certain private equity investments.

NOTES TO FINANCIAL STATEMENTS

Level 3 - Prices or valuation techniques that require inputs that are both unobservable and significant to the overall fair value measurement. They reflect management's opinions regarding the assumptions a market participant would use in pricing the asset or liability. Generally, the types of assets and liabilities utilizing Level 3 valuations are certain ABS, RMBS, and CMBS, certain corporate debt, certain private equity investments and certain mutual fund holdings and certain derivatives.

There have been no significant changes made in valuation techniques for the statement year.

(5) The Company does not hold derivative instruments.

B. Presentation of Fair Value Information

The Company has combined fair value disclosure requirements from other accounting pronouncements within Note 20.

C. Aggregate Fair Value of all Financial Instruments

The following table presents the carrying amounts and estimated fair values of the Company's financial instruments as of December 31, 2024:

Type of financial instrument	Aggregate Fair Value	Carrying Value	Level 1
Financial assets:			
Debt securities	\$ 214,946	\$ 219,319	\$ 214,946
Cash, cash equivalents and short-term investments	614,143	614,143	614,143
Total financial assets	<u>\$ 829,088</u>	<u>\$ 833,462</u>	<u>\$ 829,088</u>

The Company did not have any Level 2 or Level 3 financial instruments.

The methods and assumptions that the Company uses in determining the estimated fair value of its financial instruments are summarized below:

**Debt securities:** The Company determines the fair value of its publicly-traded fixed maturity securities using three primary pricing methods: third-party pricing services, non-binding broker quotes and pricing models. Prices are first sought from third-party pricing services with the remaining unpriced securities priced using one of the other two methods. Third-party pricing services derive the security prices through recently reported trades for identical or similar securities with adjustments for trading volumes and market observable information through the reporting date. In the event that there are no recent market trades, pricing services and brokers may use pricing models to develop a security price based on future expected cash flows discounted at an estimated market rate using collateral performance and vintages. The Company generally does not adjust quotes or prices obtained from brokers or pricing services.

**Cash, cash equivalents and short-term investments:** The carrying value for cash, cash equivalents and short-term investments approximates fair value due to the short-term nature and liquidity of the balances.

D. Not Practicable to Estimate Fair Value

The Company held no financial instruments where it was not practicable to estimate fair value.

E. Investments Measured Using the Net Asset Value Expedient Pursuant to SSAP No. 100R-Fair Value

The Company held no financial instruments measured using the Net Asset Value practical expedient.

21. Other Items

A. Unusual or Infrequent Items

The Company did not have any unusual or infrequent items to disclose during the statement year.

B. Troubled Debt Restructuring

The Company did not have any troubled debt restructuring for debtors during the statement year.

C. Other Disclosures

The Company did not have any other disclosures during the statement year.

D. Business Interruption Insurance Recoveries

The Company did not receive any business interruption insurance recoveries during the statement year.

E. State Transferable and Non-Transferable Tax Credits

The Company does not have any state transferable or non-transferable tax credits.

F. Sub-prime Mortgage Related Risk Exposure

The Company did not have any direct or indirect exposure to residential sub-prime mortgages for the statement year.

G. Retained Assets

The Company does not have retained asset accounts for beneficiaries.

NOTES TO FINANCIAL STATEMENTS

H. Insurance-Linked Securities (ILS) Contracts

The Company does not have any ILS contracts.

I. The Amount That Could Be Realized on Life Insurance Where the Reporting Entity is Owner and Beneficiary or Has Otherwise Obtained Rights to Control the Policy

The Company does not have life insurance where it is the owner and beneficiary or has otherwise obtained rights to control the policy.

22. Events Subsequent

Subsequent events were evaluated through February 18th, 2025. No additional subsequent events were noted.

23. Reinsurance

A. Ceded Reinsurance Report

Section I – General Interrogatories

- (1) Are any of the reinsurers, listed on Schedule S as non-affiliated, owned in excess of 10% or controlled, either directly or indirectly, by the Company or by any representative, officer, trustee, or director of the Company?

Yes ( ) No ( X )

If yes, give full details.

- (2) Have any policies issued by the Company been reinsured with a company chartered in a country other than the United States (excluding U.S. Branches of such companies) that is owned in excess of 10% or controlled directly or indirectly by an insured, a beneficiary, a creditor or any other person not primarily engaged in the insurance business?

Yes ( ) No ( X )

If yes, give full details.

Section 2 – Ceded Reinsurance Report – Part A

- (1) Does the Company have any reinsurance agreements in effect under which the reinsurer may unilaterally cancel any reinsurance for reasons other than for nonpayment of premium or other similar credits?

Yes ( ) No ( X )

- a. If yes, what is the estimated amount of the aggregate reduction in surplus of a unilateral cancellation by the reinsurer as of the date of this statement for those agreements in which cancellation results in a net obligation of the reporting entity to the reinsurer, and for which such obligation is not presently accrued? Where necessary, the reporting entity may consider the current or anticipated experience of the business reinsured in making this estimate.

Not applicable.

- b. What is the total amount of reinsurance credits taken whether as an asset or as a reduction of liability for these agreements in this statement?

Not applicable.

- (2) Does the reporting entity have any reinsurance agreements in effect such that the amount of losses paid or accrued through the statement data may result in a payment to the reinsurer of amounts that, in aggregate and allowing for offset of mutual credits from other reinsurance agreements with the same reinsurer, exceed the total direct premium collected under the reinsured policies?

Yes ( ) No ( X )

If yes, give full details.

Section 3 – Ceded Reinsurance Report – Part B

- (1) What is the estimated amount of the aggregate reduction in surplus (for agreements other than those under which the reinsurer may unilaterally cancel for reasons other than for nonpayment of premium or other similar credits that are reflected in Section 2 above) of termination of all reinsurance agreements, by either party, as of the date of this statement? Where necessary, the Company may consider the current or anticipated experience of the business reinsured in making this estimate.

\$0

- (2) Have any new agreements been executed or existing agreements amended, since January 1 of the year of this statement, to include policies or contracts that were in force or which had existing reserves established by the company as of the effective date of the agreement?

Yes ( ) No ( X )

If yes, what is the amount of reinsurance credits, whether an asset or a reduction of liability, taken for such new agreements or amendments?

NOTES TO FINANCIAL STATEMENTS

- B. Uncollectible Reinsurance

None.
- C. Commutation of Reinsurance Reflected in Income and Expenses

None.
- D. Certified Reinsurer Rating Downgraded or Status Subject to Revocation

Not applicable.
- E. Reinsurance Credit

Not applicable.

24. Retrospectively Rated Contracts & Contracts Subject to Redetermination

- A.-D. Retrospectively Rated Contracts Including Medical Loss Ratio Rebates

The Company has no retrospectively rated contracts.
- E. Risk Sharing Provisions of the Affordable Care Act

The Company did not write any accident and health insurance premium that was subject to the Affordable Care Act risk-sharing provisions.

25. Change in Incurred Claims and Claims Adjustment Expenses

- A. Reserves as of December 31, 2023 were \$4,526. As of December 31, 2024, \$387 has been paid for incurred claims and claim adjustment expenses attributable to insured events of prior years. Reserves remaining for prior years are now \$2 as a result of re-estimation of unpaid claims and claim adjustment expenses, principally on the dental care line of insurance. Therefore, there has been a \$4,137 favorable prior-year development since December 31, 2023 to December 31, 2024. The decrease is generally the result of ongoing analysis of recent loss development trends. Original estimates are increased or decreased, as additional information becomes known regarding individual claims. The Company did not experience any prior year loss development on retrospectively rated policies.
- B. There were no significant changes in methodologies and assumptions used in calculating the liability for unpaid losses and loss adjustment expenses during the statement period.

26. Intercompany Pooling Arrangements

The Company did not participate in any inter-company pooling arrangements during the statement year.

27. Structured Settlements

Not applicable.

28. Health Care Receivables

- A. Pharmaceutical Rebate Receivables

The Company does not have pharmaceutical rebate receivables.
- B. Risk Sharing Receivables

The Company does not have risk sharing receivables.

29. Participating Policies

The Company does not have participating policies.

30. Premium Deficiency Reserves

1. Liability carried for premium deficiency reserves

\$3,900
2. Date of the most recent evaluation of this liability

12/31/2024
3. Was anticipated investment income utilized in the calculation?

Yes ( ) No ( X )

31. Anticipated Salvage and Subrogation

The Company does not have anticipated salvage and subrogation.



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE UDC OHIO, INC.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

- 1.1

Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer?  
If yes, complete Schedule Y, Parts 1, 1A, 2 and 3.

Yes [ X ] No [ ]
- 1.2

If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations?

Yes [ ] No [ ] N/A [ X ]
- 1.3

State Regulating? Ohio.....
- 1.4

Is the reporting entity publicly traded or a member of a publicly traded group?

Yes [ X ] No [ ]
- 1.5

If the response to 1.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group.

0001097362.....
- 2.1

Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity?

Yes [ ] No [ X ]
- 2.2

If yes, date of change:

.....
- 3.1

State as of what date the latest financial examination of the reporting entity was made or is being made.

.....12/31/2023
- 3.2

State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released.

.....12/31/2018
- 3.3

State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date).

.....03/06/2020
- 3.4

By what department or departments? Ohio Department of Insurance.....
- 3.5

Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments?

Yes [ ] No [ ] N/A [ X ]
- 3.6

Have all of the recommendations within the latest financial examination report been complied with?

Yes [ ] No [ ] N/A [ X ]
- 4.1

During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity) receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:  
4.11 sales of new business?  
4.12 renewals?

Yes [ ] No [ X ]  
Yes [ ] No [ X ]
- 4.2

During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:  
4.21 sales of new business?  
4.22 renewals?

Yes [ ] No [ X ]  
Yes [ ] No [ X ]
- 5.1

Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?  
If yes, complete and file the merger history data file with the NAIC.

Yes [ ] No [ X ]
- 5.2

If yes, provide the name of the entity, NAIC company code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

1 Name of Entity	2 NAIC Company Code	3 State of Domicile
.....	.....	.....
.....	.....	.....
.....	.....	.....

- 6.1

Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period?

Yes [ ] No [ X ]
- 6.2

If yes, give full information .....
- 7.1

Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity?

Yes [ X ] No [ ]
- 7.2

If yes,  
7.21 State the percentage of foreign control .....100.0 %  
7.22 State the nationality(s) of the foreign person(s) or entity(s); or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact and identify the type of entity(s) (e.g., individual, corporation, government, manager or attorney-in-fact).

1 Nationality	2 Type of Entity
Canada.....	Corporation.....
.....	.....
.....	.....

- 8.1

Is the company a subsidiary of a depository institution holding company (DIHC) or a DIHC itself, regulated by the Federal Reserve Board?

Yes [ ] No [ X ]
- 8.2

If response to 8.1 is yes, please identify the name of the DIHC.
- 8.3

Is the company affiliated with one or more banks, thrifts or securities firms?

Yes [ X ] No [ ]
- 8.4

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

1 Affiliate Name	2 Location (City, State)	3 FRB	4 OCC	5 FDIC	6 SEC
Advisors Asset Management, Inc.....	Monument, CO.....				YES.....
BentalIGreenOak (U.S.) Limited Partnership.....	Seattle, WA.....				YES.....
BentalIGreenOak Real Estate US LLC.....	New York, NY.....				YES.....
BGO US Real Estate LP.....	New York, NY.....				YES.....
BentalIGreenOak Strategic Capital Partners, LLC.....	New York, NY.....				YES.....
Crescent Capital Group LP.....	Los Angeles, CA.....				YES.....
Crescent Cap Advisors, LLC.....	Los Angeles, CA.....				YES.....
Crescent Private Credit Income Corp.....	Los Angeles, CA.....				YES.....
Crescent Cap NT Advisors, LLC.....	Los Angeles, CA.....				YES.....
Infrared Capital Partners (US) LLC.....	New York, NY.....				YES.....
Massachusetts Financial Services Company.....	Boston, MA.....				YES.....
MFS Fund Distributors, Inc.....	Boston, MA.....				YES.....
MFS Institutional Advisors, Inc.....	Boston, MA.....				YES.....
MFS Service Center, Inc.....	Boston, MA.....				YES.....
Sun Life Capital Management (U.S.) LLC.....	Wellesley Hills, MA.....				YES.....
Sun Life Institutional Distributors (U.S.) LLC.....	Wellesley Hills, MA.....				YES.....

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE UDC OHIO, INC.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

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

- 8.5

Is the reporting entity a depository institution holding company with significant insurance operations as defined by the Board of Governors of Federal Reserve System or a subsidiary of the depository institution holding company?

Yes [ ] No [ X ]
- 8.6

If response to 8.5 is no, is the reporting entity a company or subsidiary of a company that has otherwise been made subject to theFederal Reserve Board's capital rule?

Yes [ ] No [ X ] N/A [ ]
9.

What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?  
Deloitte & Touche LLP, 200 Berkeley Street, Boston, MA 02116.....
- 10.1

Has the insurer been granted any exemptions to the prohibited non-audit services provided by the certified independent public accountant requirements as allowed in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Rule), or substantially similar state law or regulation?

Yes [ ] No [ X ]
- 10.2

If the response to 10.1 is yes, provide information related to this exemption:
- 10.3

Has the insurer been granted any exemptions related to the other requirements of the Annual Financial Reporting Model Regulation as allowed for in Section 18A of the Model Regulation, or substantially similar state law or regulation?

Yes [ ] No [ X ]
- 10.4

If the response to 10.3 is yes, provide information related to this exemption:
- 10.5

Has the reporting entity established an Audit Committee in compliance with the domiciliary state insurance laws?

Yes [ X ] No [ ] N/A [ ]
- 10.6

If the response to 10.5 is no or n/a, please explain
11.

What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification?  
Gregory Johnson, FSA, MAAA, Appointed Actuary, 96 Worcester Street, Wellesley Hills, MA 02481.....
- 12.1

Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly?

Yes [ ] No [ X ]
- 12.11

Name of real estate holding company

.....
- 12.12

Number of parcels involved

.....0
- 12.13

Total book/adjusted carrying value

\$.....
- 12.2

If yes, provide explanation
13.

FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:
- 13.1

What changes have been made during the year in the United States manager or the United States trustees of the reporting entity?
- 13.2

Does this statement contain all business transacted for the reporting entity through its United States Branch on risks wherever located?

Yes [ X ] No [ ]
- 13.3

Have there been any changes made to any of the trust indentures during the year?

Yes [ ] No [ X ]
- 13.4

If answer to (13.3) is yes, has the domiciliary or entry state approved the changes?

Yes [ ] No [ ] N/A [ X ]
- 14.1

Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?  
a. Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;  
b. Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;  
c. Compliance with applicable governmental laws, rules and regulations;  
d. The prompt internal reporting of violations to an appropriate person or persons identified in the code; and  
e. Accountability for adherence to the code.

Yes [ X ] No [ ]
- 14.11

If the response to 14.1 is no, please explain:
- 14.2

Has the code of ethics for senior managers been amended?

Yes [ X ] No [ ]
- 14.21

If the response to 14.2 is yes, provide information related to amendment(s).  
No substantive changes only minor changes. The refreshed content covers Sun Life's culture and values, expansion of people-leader obligations, and enhanced human rights, sustainability, and diversity, equity and inclusion language.....
- 14.3

Have any provisions of the code of ethics been waived for any of the specified officers?

Yes [ ] No [ X ]
- 14.31

If the response to 14.3 is yes, provide the nature of any waiver(s).
- 15.1

Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance where the issuing or confirming bank is not on the SVO Bank List?

Yes [ ] No [ X ]
- 15.2

If the response to 15.1 is yes, indicate the American Bankers Association (ABA) Routing Number and the name of the issuing or confirming bank of the Letter of Credit and describe the circumstances in which the Letter of Credit is triggered.

1	2	3	4
American Bankers Association (ABA) Routing Number	Issuing or Confirming Bank Name	Circumstances That Can Trigger the Letter of Credit	Amount
.....	.....	.....	.....0
.....	.....	.....	.....
.....	.....	.....	.....

BOARD OF DIRECTORS

16.

Is the purchase or sale of all investments of the reporting entity passed upon either by the board of directors or a subordinate committee thereof?

Yes [ X ] No [ ]
17.

Does the reporting entity keep a complete permanent record of the proceedings of its board of directors and all subordinate committees thereof?

Yes [ X ] No [ ]
18.

Has the reporting entity an established procedure for disclosure to its board of directors or trustees of any material interest or affiliation on the part of any of its officers, directors, trustees or responsible employees that is in conflict or is likely to conflict with the official duties of such person?

Yes [ X ] No [ ]

FINANCIAL

19.

Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g., Generally Accepted Accounting Principles)?

Yes [ ] No [ X ]
- 20.1

Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans):

20.11 To directors or other officers

\$.....

20.12 To stockholders not officers

\$.....

20.13 Trustees, supreme or grand (Fraternal only)

\$.....
- 20.2

Total amount of loans outstanding at the end of year (inclusive of Separate Accounts, exclusive of policy loans):

20.21 To directors or other officers

\$.....

20.22 To stockholders not officers

\$.....

20.23 Trustees, supreme or grand (Fraternal only)

\$.....
- 21.1

Were any assets reported in this statement subject to a contractual obligation to transfer to another party without the liability for such obligation being reported in the statement?

Yes [ ] No [ X ]
- 21.2

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

21.21 Rented from others

\$.....

21.22 Borrowed from others

\$.....

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE UDC OHIO, INC.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

21.23 Leased from others \$.....

21.24 Other \$.....

- 22.1 Does this statement include payments for assessments as described in the *Annual Statement Instructions* other than guaranty fund or guaranty association assessments? Yes [ ] No [ X ]
- 22.2 If answer is yes:
- 22.21 Amount paid as losses or risk adjustment \$.....
- 22.22 Amount paid as expenses \$.....
- 22.23 Other amounts paid \$.....
- 23.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? Yes [ ] No [ X ]
- 23.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: \$.....
- 24.1 Does the insurer utilize third parties to pay agent commissions in which the amounts advanced by the third parties are not settled in full within 90 days? Yes [ ] No [ X ]
- 24.2 If the response to 24.1 is yes, identify the third-party that pays the agents and whether they are a related party.

1	2
Name of Third-Party	Is the Third-Party Agent a Related Party (Yes/No)

INVESTMENT

- 25.01 Were all the stocks, bonds and other securities owned December 31 of current year, over which the reporting entity has exclusive control, in the actual possession of the reporting entity on said date? (other than securities lending programs addressed in 25.03) Yes [ X ] No [ ]
- 25.02 If no, give full and complete information, relating thereto
- 25.03 For securities lending programs, provide a description of the program including value for collateral and amount of loaned securities, and whether collateral is carried on or off-balance sheet. (an alternative is to reference Note 17 where this information is also provided)
- 25.04 For the reporting entity's securities lending program, report amount of collateral for conforming programs as outlined in the Risk-Based Capital Instructions. \$.....
- 25.05 For the reporting entity's securities lending program, report amount of collateral for other programs. \$.....
- 25.06 Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract? Yes [ ] No [ ] NA [ X ]
- 25.07 Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%? Yes [ ] No [ ] NA [ X ]
- 25.08 Does the reporting entity or the reporting entity's securities lending agent utilize the Master Securities Lending Agreement (MSLA) to conduct securities lending? Yes [ ] No [ ] NA [ X ]
- 25.09 For the reporting entity's securities lending program, state the amount of the following as of December 31 of the current year:
- 25.091 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 \$.....0
- 25.092 Total book/adjusted carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 \$.....0
- 25.093 Total payable for securities lending reported on the liability page \$.....0
- 26.1 Were any of the stocks, bonds or other assets of the reporting entity owned at December 31 of the current year not exclusively under the control of the reporting entity or has the reporting entity sold or transferred any assets subject to a put option contract that is currently in force? (Exclude securities subject to Interrogatory 24.1 and 25.03). Yes [ X ] No [ ]
- 26.2 If yes, state the amount thereof at December 31 of the current year:
- 26.21 Subject to repurchase agreements \$.....
- 26.22 Subject to reverse repurchase agreements \$.....
- 26.23 Subject to dollar repurchase agreements \$.....
- 26.24 Subject to reverse dollar repurchase agreements \$.....
- 26.25 Placed under option agreements \$.....
- 26.26 Letter stock or securities restricted as to sale – excluding FHLB Capital Stock \$.....
- 26.27 FHLB Capital Stock \$.....
- 26.28 On deposit with states \$.....219,319
- 26.29 On deposit with other regulatory bodies \$.....
- 26.30 Pledged as collateral – excluding collateral pledged to an FHLB \$.....
- 26.31 Pledged as collateral to FHLB – including assets backing funding agreements \$.....
- 26.32 Other \$.....

26.3 For category (26.26) provide the following:

1	2	3
Nature of Restriction	Description	Amount

- 27.1 Does the reporting entity have any hedging transactions reported on Schedule DB? Yes [ ] No [ X ]
- 27.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes [ ] No [ ] N/A [ X ]
- If no, attach a description with this statement.

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

- 27.3 Does the reporting entity utilize derivatives to hedge variable annuity guarantees subject to fluctuations as a result of interest rate sensitivity? Yes [ ] No [ ]
- 27.4 If the response to 27.3 is YES, does the reporting entity utilize:
- 27.41 Special accounting provision of SSAP No. 108 Yes [ ] No [ ]
- 27.42 Permitted accounting practice Yes [ ] No [ ]
- 27.43 Other accounting guidance Yes [ ] No [ ]
- 27.5 By responding YES to 27.41 regarding utilizing the special accounting provisions of SSAP No. 108, the reporting entity attests to the following: Yes [ ] No [ ]
- The reporting entity has obtained explicit approval from the domiciliary state.
  - Hedging strategy subject to the special accounting provisions is consistent with the requirements of VM-21.
  - Actuarial certification has been obtained which indicates that the hedging strategy is incorporated within the establishment of VM-21 reserves and provides the impact of the hedging strategy within the Actuarial Guideline Conditional Tail Expectation Amount.
  - Financial Officer Certification has been obtained which indicates that the hedging strategy meets the definition of a Clearly Defined Hedging Strategy within VM-21 and that the Clearly Defined Hedging Strategy is the hedging strategy being used by the company in its actual day-to-day risk mitigation efforts.

- 28.1 Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into equity, or, at the option of the issuer, convertible into equity? Yes [ ] No [ X ]
- 28.2 If yes, state the amount thereof at December 31 of the current year. \$.....

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

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

1	2
Name of Custodian(s)	Custodian's Address

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GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

1 Name of Custodian(s)	2 Custodian's Address
Citibank, N.A.....	Trust and Custody Operations, 480 Washington Boulevard, 30th Floor, Jersey City, NJ 07310.....

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

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

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

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

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

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

1 Name of Firm or Individual	2 Affiliation
Sun Life Capital Management (U.S.) LLC.....	A.....

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

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

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

1 Central Registration Depository Number	2 Name of Firm or Individual	3 Legal Entity Identifier (LEI)	4 Registered With	5 Investment Management Agreement (IMA) Filed
109684.....	Sun Life Capital Management (U.S.) LLC.....		SEC.....	DS.....

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

30.2 If yes, complete the following schedule:

1 CUSIP #	2 Name of Mutual Fund	3 Book/Adjusted Carrying Value
30.2001 .....		
30.2002 .....		
30.2999 TOTAL		0

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

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

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

	1 Statement (Admitted) Value	2 Fair Value	3 Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
31.1 Bonds.....	219,318	214,946	(4,372)
31.2 Preferred Stocks.....	0		0
31.3 Totals	219,318	214,946	(4,372)

31.4 Describe the sources or methods utilized in determining the fair values:  
See Notes to Financial Statements, Note 20.....

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

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

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

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

33.2 If no, list exceptions:

34. By self-designating 5GI securities, the reporting entity is certifying the following elements of each self-designated 5GI security:  
a.Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available.  
b.Issuer or obligor is current on all contracted interest and principal payments.  
c.The insurer has an actual expectation of ultimate payment of all contracted interest and principal.  
Has the reporting entity self-designated 5GI securities? Yes [ ] No [ X ]

35. By self-designating PLGI securities, the reporting entity is certifying its compliance with the requirements as specified in the *Purposes and Procedures Manual of the NAIC Investment Analysis Office* (P&P Manual) for private letter rating (PLR) securities and the following

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE UDC OHIO, INC.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

elements of each self-designated PLGI security:

- a. The security was either:

i. issued prior to January 1, 2018 (which is exempt from PLR filing requirements pursuant to the P&P Manual), or

ii. issued from January 1, 2018 to December 31, 2021 and subject to a confidentiality agreement executed prior to January 1, 2022 which confidentiality agreement remains in force, for which an insurance company cannot provide a copy of a private letter rating rationale report to the SVO due to confidentiality or other contractual reasons ("waived submission PLR securities").
- b. The reporting entity is holding capital commensurate with the NAIC Designation and NAIC Designation Category reported for the security.
- c. The NAIC Designation and NAIC Designation Category were derived from the credit rating assigned by an NAIC CRP in its legal capacity as an NRSRO which is shown on a current private letter rating, dated during the financial statement year, held by the insurer and available for examination by state insurance regulators.
- d. Other than for waived submission PLR securities, defined above, on or after January 1, 2024 for any PLR securities issued on or after January 1, 2022, if the reporting entity is not permitted to share this private credit rating or the private rating letter rationale report of the PL security with the SVO, it certifies that it is reporting it as an NAIC 5.B GI and may not assign any other self-designation.

Has the reporting entity self-designated PLGI to securities, all of which meet the above requirement and as specified in the P&P Manual?

Yes [ ☐ ] No [ ☒ ]

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

a. The shares were purchased prior to January 1, 2019.

b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.

c. The security had a public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO prior to January 1, 2019.

d. The fund only or predominantly holds bonds in its portfolio.

e. The current reported NAIC Designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO.

f. The public credit rating(s) with annual surveillance assigned by an NAIC CRP has not lapsed.
- Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria?

Yes [ ☐ ] No [ ☒ ]
37. By rolling/renewing short-term or cash equivalent investments with continued reporting on Schedule DA, Part 1 or Schedule E Part 2 (identified through a code (%) in those investment schedules), the reporting entity is certifying to the following:

a. The investment is a liquid asset that can be terminated by the reporting entity on the current maturity date.

b. If the investment is with a nonrelated party or nonaffiliated then it reflects an arms-length transaction with renewal completed at the discretion of all involved parties.

c. If the investment is with a related party or affiliate, then the reporting entity has completed robust re-underwriting of the transaction for which documentation is available for regulator review.

d. Short-term and cash equivalent investments that have been renewed/rolled from the prior period that do not meet the criteria in 37.a -37.c are reported as long-term investments.

Has the reporting entity rolled/renewed short-term or cash equivalent investments in accordance with these criteria?

Yes [ ☐ ] No [ ☐ ] NA [ ☒ ]

38.1 Does the reporting entity directly hold cryptocurrencies?

Yes [ ☐ ] No [ ☒ ]

38.2 If the response to 38.1 is yes, on what schedule are they reported?

39.1 Does the reporting entity directly or indirectly accept cryptocurrencies as payments for premiums on policies?

Yes [ ☐ ] No [ ☒ ]

39.2 If the response to 39.1 is yes, are the cryptocurrencies held directly or are they immediately converted to U.S. dollars?

39.21 Held directly

39.22 Immediately converted to U.S. dollars

Yes [ ☐ ] No [ ☐ ]

Yes [ ☐ ] No [ ☐ ]

39.3 If the response to 38.1 or 39.1 is yes, list all cryptocurrencies accepted for payments of premiums or that are held directly.

1 Name of Cryptocurrency	2 Immediately Converted to USD, Directly Held, or Both	3 Accepted for Payment of Premiums

OTHER

40.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any?

\$ .....1,029

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

1 Name	2 Amount Paid
STATE OF OHIO.....	\$.....700
KENTUCKY INTERACTIVE LLC.....	\$.....329

41.1 Amount of payments for legal expenses, if any?

\$ .....236

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

1 Name	2 Amount Paid
WOLTERS KLUWER.....	\$.....236

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

\$ .....0

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

1 Name	2 Amount Paid
None.....	\$.....0
	\$.....
	\$.....

FN 40, 41 & 42 - Payments made directly by the Company differ from expense amounts which include allocations

27.4

GENERAL INTERROGATORIES  
PART 2 - HEALTH INTERROGATORIES

1.1 Does the reporting entity have any direct Medicare Supplement Insurance in force?

Yes [ ] No [ X ]

1.2 If yes, indicate premium earned on U.S. business only.

\$ .....0

1.3 What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit?

\$ .....

1.31 Reason for excluding .....

1.4 Indicate amount of earned premium attributable to Canadian and/or Other Alien not included in Item (1.2) above

\$ .....

1.5 Indicate total incurred claims on all Medicare Supplement insurance.

\$ .....0

1.6 Individual policies:

Most current three years:

1.61 Total premium earned

\$ .....0

1.62 Total incurred claims

\$ .....0

1.63 Number of covered lives

.....0

All years prior to most current three years:

1.64 Total premium earned

\$ .....0

1.65 Total incurred claims

\$ .....0

1.66 Number of covered lives

.....0

1.7 Group policies:

Most current three years:

1.71 Total premium earned

\$ .....0

1.72 Total incurred claims

\$ .....0

1.73 Number of covered lives

.....0

All years prior to most current three years:

1.74 Total premium earned

\$ .....0

1.75 Total incurred claims

\$ .....0

1.76 Number of covered lives

.....0

2. Health Test:

		1		2
		Current Year		Prior Year
2.1	Premium Numerator	\$ .....137,210	\$	.....165,320
2.2	Premium Denominator	\$ .....138,385	\$	.....167,250
2.3	Premium Ratio (2.1/2.2)	.....0.992		.....0.988
2.4	Reserve Numerator	\$ .....13,236	\$	.....9,909
2.5	Reserve Denominator	\$ .....13,236	\$	.....9,909
2.6	Reserve Ratio (2.4/2.5)	.....1.000		.....1.000

3.1 Has the reporting entity received any endowment or gift from contracting hospitals, physicians, dentists, or others that is agreed will be returned when, as and if the earnings of the reporting entity permits?

Yes [ ] No [ X ]

3.2 If yes, give particulars:

4.1 Have copies of all agreements stating the period and nature of hospitals', physicians', and dentists' care offered to subscribers and dependents been filed with the appropriate regulatory agency?

Yes [ X ] No [ ]

4.2 If not previously filed, furnish herewith a copy(ies) of such agreement(s). Do these agreements include additional benefits offered?

Yes [ ] No [ X ]

5.1 Does the reporting entity have stop-loss reinsurance?

Yes [ ] No [ X ]

5.2 If no, explain:

5.3 Maximum retained risk (see instructions)

5.31 Comprehensive Medical

\$ .....

5.32 Medical Only

\$ .....

5.33 Medicare Supplement

\$ .....

5.34 Dental and Vision

\$ .....2,000

5.35 Other Limited Benefit Plan

\$ .....

5.36 Other

\$ .....

6. Describe arrangement which the reporting entity may have to protect subscribers and their dependents against the risk of insolvency including hold harmless provisions, conversion privileges with other carriers, agreements with providers to continue rendering services, and any other agreements:

7.1 Does the reporting entity set up its claim liability for provider services on a service date basis?

Yes [ ] No [ X ]

7.2 If no, give details

8. Provide the following information regarding participating providers:

8.1 Number of providers at start of reporting year

.....361

8.2 Number of providers at end of reporting year

.....241

9.1 Does the reporting entity have business subject to premium rate guarantees?

Yes [ X ] No [ ]

9.2 If yes, direct premium earned:

9.21 Business with rate guarantees between 15-36 months

.....30,383

9.22 Business with rate guarantees over 36 months

.....

GENERAL INTERROGATORIES  
PART 2 - HEALTH INTERROGATORIES

- 10.1 Does the reporting entity have Incentive Pool, Withhold or Bonus Arrangements in its provider contracts?

Yes [ ] No [ X ]
- 10.2 If yes:

10.21 Maximum amount payable bonuses\$.....

10.22 Amount actually paid for year bonuses\$.....

10.23 Maximum amount payable withholds\$.....

10.24 Amount actually paid for year withholds\$.....
- 11.1 Is the reporting entity organized as:

11.12 A Medical Group/Staff Model,

Yes [ ] No [ X ]

11.13 An Individual Practice Association (IPA), or,

Yes [ ] No [ X ]

11.14 A Mixed Model (combination of above) ?

Yes [ ] No [ X ]
- 11.2 Is the reporting entity subject to Statutory Minimum Capital and Surplus Requirements?

Yes [ X ] No [ ]
- 11.3 If yes, show the name of the state requiring such minimum capital and surplus.

Ohio and Kentucky.....
- 11.4 If yes, show the amount required.

\$.....250,000
- 11.5 Is this amount included as part of a contingency reserve in stockholder's equity?

Yes [ ] No [ X ]
- 11.6 If the amount is calculated, show the calculation
12. List service areas in which reporting entity is licensed to operate:

1 Name of Service Area
State of Ohio.....
State of Kentucky.....

- 13.1 Do you act as a custodian for health savings accounts?

Yes [ ] No [ X ]
- 13.2 If yes, please provide the amount of custodial funds held as of the reporting date.

\$.....
- 13.3 Do you act as an administrator for health savings accounts?

Yes [ ] No [ X ]
- 13.4 If yes, please provide the balance of the funds administered as of the reporting date.

\$.....
- 14.1 Are any of the captive affiliates reported on Schedule S, Part 3 as authorized reinsurers?

Yes [ ] No [ X N/A [ ]
- 14.2 If the answer to 14.1 is yes, please provide the following:

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

15. Provide the following for individual ordinary life insurance\* policies (U.S. business only) for the current year (prior to reinsurance assumed or ceded).

15.1 Direct Premium Written\$.....

15.2 Total Incurred Claims\$.....

15.3 Number of Covered Lives.....

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

16. Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states? .....

Yes [ X ] No [ ]
- 16.1 If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity? .....

Yes [ ] No [ ]

FIVE - YEAR HISTORICAL DATA

	1 2024	2 2023	3 2022	4 2021	5 2020
<b>Balance Sheet</b> (Pages 2 and 3)					
1. Total admitted assets (Page 2, Line 28) .....	838,549	842,668	855,112	856,207	851,896
2. Total liabilities (Page 3, Line 24) .....	60,865	64,676	65,948	69,599	68,265
3. Statutory minimum capital and surplus requirement .....	250,000	250,000	250,000	250,000	250,000
4. Total capital and surplus (Page 3, Line 33) .....	777,684	777,992	789,164	786,608	783,631
<b>Income Statement</b> (Page 4)					
5. Total revenues (Line 8) .....	138,385	167,250	211,112	274,932	306,227
6. Total medical and hospital expenses (Line 18) .....	38,655	56,407	75,128	100,851	136,721
7. Claims adjustment expenses (Line 20) .....	969	1,390	1,548	2,234	2,534
8. Total administrative expenses (Line 21) .....	123,558	144,245	145,133	166,192	181,017
9. Net underwriting gain (loss) (Line 24) .....	(28,697)	(34,792)	(7,897)	2,855	(14,045)
10. Net investment gain (loss) (Line 27) .....	27,285	22,144	3,772	3,650	7,184
11. Total other income (Lines 28 plus 29) .....	0	0	0	0	0
12. Net income or (loss) (Line 32) .....	(1,412)	(12,648)	(4,125)	6,505	(6,861)
<b>Cash Flow</b> (Page 6)					
13. Net cash from operations (Line 11).....	(1,858)	(16,753)	(6,020)	5,565	(11,454)
<b>Risk-Based Capital Analysis</b>					
14. Total adjusted capital.....	777,684	777,992	789,164	786,608	783,631
15. Authorized control level risk-based capital.....	6,339	6,992	7,162	8,127	9,443
<b>Enrollment</b> (Exhibit 1)					
16. Total members at end of period (Column 5, Line 7) .....	1,162	1,328	1,849	2,302	2,624
17. Total members months (Column 6, Line 7) .....	15,429	19,104	24,142	29,379	33,501
<b>Operating Percentage</b> (Page 4)					
(Item divided by Page 4, sum of Lines 2, 3, and 5) x 100.0					
18. Premiums earned plus risk revenue (Line 2 plus Lines 3 and 5) .....	100.0	100.0	100.0	100.0	100.0
19. Total hospital and medical plus other non-health (Lines 18 plus Line 19) .....	27.9	33.7	35.6	36.7	44.6
20. Cost containment expenses .....	0.0	0.0	0.0	0.0	0.0
21. Other claims adjustment expenses .....	0.7	0.8	0.7	0.8	0.8
22. Total underwriting deductions (Line 23) .....	120.7	120.8	103.7	99.0	104.6
23. Total underwriting gain (loss) (Line 24) .....	(20.7)	(20.8)	(3.7)	1.0	(4.6)
<b>Unpaid Claims Analysis</b>					
(U&I Exhibit, Part 2B)					
24. Total claims incurred for prior years (Line 17, Col. 5) .....	388	795	98	811	2,186
25. Estimated liability of unpaid claims – [prior year (Line 17, Col. 6)] .....	4,513	5,432	6,899	7,478	8,712
<b>Investments in Parent, Subsidiaries and Affiliates</b>					
26. Affiliated bonds (Sch. D Summary, Line 12, Col. 1) .....	0	0	0	0	0
27. Affiliated preferred stocks (Sch. D Summary, Line 18, Col. 1) .....	0	0	0	0	0
28. Affiliated common stocks (Sch. D Summary, Line 24, Col. 1) .....	0	0	0	0	0
29. Affiliated short-term investments (subtotal included in Sch. DA Verification, Col. 5, Line 10) .....	0	0	0	0	0
30. Affiliated mortgage loans on real estate .....	0	0	0	0	0
31. All other affiliated .....	0	0	0	0	0
32. Total of above Lines 26 to 31.....	0	0	0	0	0
33. Total investment in parent included in Lines 26 to 31 above .....					

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

If no, please explain .....



SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

Allocated by States and Territories

			1	Direct Business Only								
			2	3	4	5	6	7	8	9	10	
State, Etc.			Active Status (a)	Accident & Health Premiums	Medicare Title XVIII	Medicaid Title XIX	CHIP Title XXI	Federal Employees Health Benefits Plan Premiums	Life & Annuity Premiums & Other Considerations	Property/ Casualty Premiums	Total Columns 2 Through 8	Deposit-Type Contracts
1.	Alabama	AL	N								0	0
2.	Alaska	AK	N								0	0
3.	Arizona	AZ	N								0	0
4.	Arkansas	AR	N								0	0
5.	California	CA	N								0	0
6.	Colorado	CO	N								0	0
7.	Connecticut	CT	N								0	0
8.	Delaware	DE	N								0	0
9.	District of Columbia	DC	N								0	0
10.	Florida	FL	N								0	0
11.	Georgia	GA	N								0	0
12.	Hawaii	HI	N								0	0
13.	Idaho	ID	N								0	0
14.	Illinois	IL	N								0	0
15.	Indiana	IN	N								0	0
16.	Iowa	IA	N								0	0
17.	Kansas	KS	N								0	0
18.	Kentucky	KY	L								0	0
19.	Louisiana	LA	N								0	0
20.	Maine	ME	N								0	0
21.	Maryland	MD	N								0	0
22.	Massachusetts	MA	N								0	0
23.	Michigan	MI	N								0	0
24.	Minnesota	MN	N								0	0
25.	Mississippi	MS	N								0	0
26.	Missouri	MO	N								0	0
27.	Montana	MT	N								0	0
28.	Nebraska	NE	N								0	0
29.	Nevada	NV	N								0	0
30.	New Hampshire	NH	N								0	0
31.	New Jersey	NJ	N								0	0
32.	New Mexico	NM	N								0	0
33.	New York	NY	N								0	0
34.	North Carolina	NC	N								0	0
35.	North Dakota	ND	N								0	0
36.	Ohio	OH	L	137,210							137,210	0
37.	Oklahoma	OK	N								0	0
38.	Oregon	OR	N								0	0
39.	Pennsylvania	PA	N								0	0
40.	Rhode Island	RI	N								0	0
41.	South Carolina	SC	N								0	0
42.	South Dakota	SD	N								0	0
43.	Tennessee	TN	N								0	0
44.	Texas	TX	N								0	0
45.	Utah	UT	N								0	0
46.	Vermont	VT	N								0	0
47.	Virginia	VA	N								0	0
48.	Washington	WA	N								0	0
49.	West Virginia	WV	N								0	0
50.	Wisconsin	WI	N								0	0
51.	Wyoming	WY	N								0	0
52.	American Samoa	AS	N								0	0
53.	Guam	GU	N								0	0
54.	Puerto Rico	PR	N								0	0
55.	U.S. Virgin Islands	VI	N								0	0
56.	Northern Mariana Islands	MP	N								0	0
57.	Canada	CAN	N								0	0
58.	Aggregate other alien	OT	XXX	0	0	0	0	0	0	0	0	0
59.	Subtotal		XXX	137,210	0	0	0	0	0	0	137,210	0
60.	Reporting entity contributions for Employee Benefit Plans		XXX								0	
61.	Total (Direct Business)		XXX	137,210	0	0	0	0	0	0	137,210	0
DETAILS OF WRITE-INS												
58001.			XXX									
58002.			XXX									
58003.			XXX									
58998.	Summary of remaining write-ins for Line 58 from overflow page		XXX	0	0	0	0	0	0	0	0	0
58999.	Totals (Lines 58001 through 58003 plus 58998) (Line 58 above)		XXX	0	0	0	0	0	0	0	0	0

(a) Active Status Counts											
1.	L – Licensed or Chartered – Licensed insurance carrier or domiciled RRG	2	4.	Q – Qualified – Qualified or accredited reinsurer	0						
2.	R – Registered – Non-domiciled RRGs	0	5.	N – None of the above – Not allowed to write business in the state	55						
3.	E – Eligible – Reporting entities eligible or approved to write surplus lines in the state	0									

(b) Explanation of basis of allocation by states, premiums by states, etc.  
Premiums are assigned to the state based on the situs of contract.

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

Federal ID#	Entity Name	% of Voting Shares	Insurer / Non-Insurer	Note
98-0226074	<b>Sun Life Financial Inc. – Foreign Operations</b>			
	6324983 Canada Inc.	100%	Non-Insurer	
	SLC Management Canadian Long Duration Overlay Fund	27.45%	Non-Insurer	
	Sun Life Investment Holdings (UK Funds) Inc.	100%	Non-Insurer	
	Sun Life LRCN Trust	100%	Non-Insurer	
	<b>Sun Life Global Investments Inc. – United States Operations</b>	100%	Non-Insurer	
	Sun Life 2007-1 Financing Corp.	100%	Non-Insurer	
	Sun Life (Bermuda) Finance No. 1 Ltd.	100%	Non-Insurer	
	Sun Life (Bermuda) Finance No. 2 LLC	100%	Non-Insurer	
	Sun Life (Hungary) Finance No. 1 Kft	100%	Non-Insurer	
	Sun Life (Ireland) Finance No. 1 Limited	100%	Non-Insurer	
04-3401283	Sun Life Assurance Company of Canada - U.S. Operations Holdings, Inc.	100%	Non-Insurer	
20-4056199	DentaQuest Group, Inc.	100%	Non-Insurer	
20-0390099	DentaQuest, LLC	100%	Non-Insurer	
20-1391244	DCP Holding Company	100%	Non-Insurer	
61-1301274	Adenta, Inc.	100%	Non-Insurer	
31-1185262	Dental Care Plus, Inc.	100%	Insurer	
96265 OH				
20-1455615	Insurance Associates Plus, Inc.	100%	Non-Insurer	
27-1693969	The Ohio Retiree Dental Benefits Association LLC	100%	Non-Insurer	
32-0487994	DentaQuest Care Group Management, LLC	100%	Non-Insurer	
	AD Management of Iowa, LLC	100%	Non-Insurer	
92-3643599	AD Management of OK, LLC	100%	Non-Insurer	
92-1262785	AD Management of TX, LLC	100%	Non-Insurer	
20-8939962	Advantage Community Holding Company, LLC	100%	Non-Insurer	
93-1195386	Advantage Dental Services, LLC	100%	Non-Insurer	
57-1140840	Advantage Leveraged Lenders, Inc.	100%	Non-Insurer	
26-3981367	Advantage Support Services, LLC	100%	Non-Insurer	

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

Federal ID#	Entity Name	% of Voting Shares	Insurer / Non-Insurer	Note
26-3981408	Advantage Consulting Services, LLC	100%	Non-Insurer	
	Advantage Harbor QALICB, LLC	100%	Non-Insurer	
	Advantage LaPine QALICB, LLC	100%	Non-Insurer	
	Advantage QALICB-1, LLC	100%	Non-Insurer	
27-0357326	DQCGM of Oregon, LLC	100%	Non-Insurer	
87-2778161	DQCGM of Alabama, LLC	100%	Non-Insurer	
87-3142270	DQCGM of Florida, LLC	100%	Non-Insurer	
84-1851756	DQCGM of Massachusetts, LLC	100%	Non-Insurer	
84-3407897	DQCGM of Washington, LLC	100%	Non-Insurer	
45-4129709	Oregon Community Dental Care	100%	Non-Insurer	2
81-0616910	DentaQuest IPA of New York, LLC	100%	Non-Insurer	
11-3692025	DentaQuest of Arizona, LLC	100%	Non-Insurer	
65-0743731	DentaQuest of Florida, Inc.	100%	Non-Insurer	
14-1885493	DentaQuest of Georgia, LLC	100%	Non-Insurer	
42-1529687	DentaQuest of Illinois, LLC	100%	Non-Insurer	
61-1871504	DentaQuest of Iowa, LLC	100%	Non-Insurer	
14-1885490	DentaQuest of Kentucky, LLC	100%	Non-Insurer	
81-0567214	DentaQuest of Maryland, LLC	100%	Non-Insurer	
56-2356445	DentaQuest of Minnesota, LLC	100%	Non-Insurer	
56-2356433	DentaQuest of New Jersey, LLC	100%	Insurer	
16647 NJ				
14-1885481	DentaQuest of New Mexico, LLC	100%	Non-Insurer	
14-1885500	DentaQuest of New York, LLC	100%	Non-Insurer	
35-2177954	DentaQuest of Tennessee, LLC	100%	Non-Insurer	
20-2970185	DentaQuest USA Insurance Company, Inc.	100%	Insurer	
12307 TX				
+ □ □ □ □ □ □ □ □ □ □	DentaQuest National Insurance Company, Inc.	100%	Insurer	
67636 TX				
33-0672992	Pacific Dental Network, Inc.	100%	Non-Insurer	

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

Federal ID#	Entity Name	% of Voting Shares	Insurer / Non-Insurer	Note
93-0954061	California Dental Network, Inc.	100%	Non-Insurer	
20-8998687	SL Finance 2007-1, Inc.	100%	Non-Insurer	
	SL Investment 2007-1 ULC	100%	Non-Insurer	
	SLC AM CORP LLC	100%	Non-Insurer	
	SLC Asset Management LLC	100%	Non-Insurer	
	SLC US CAV LLC	100%	Non-Insurer	
84-4711925	Sun Life (U.S.) HoldCo 2020, Inc.	100%	Non-Insurer	
27-4341553	AAM Holdings Inc.	51%	Non-Insurer	
20-0532180	Advisors Asset Management, Inc.	100%	Non-Insurer	
84-1239309	Sterling Resources, Inc.	100%	Non-Insurer	
20-3457105	Base Camp Road, LLC	100%	Non-Insurer	
74-3114760	IH 10/FIS Building, LP	99%	Non-Insurer	
	RLG/FIS Management, L.L.C.	100%	Non-Insurer	
74-3114760	IH 10/FIS Building, LP	1%	Non-Insurer	
	Atlas Senior Loan Fund XVI, Ltd.	100%	Non-Insurer	
	Atlas Senior Loan Fund XVII, Ltd.	51.2%	Non-Insurer	
	Atlas Senior Loan Fund XVIII, Ltd.	76.01%	Non-Insurer	
	Atlas Senior Loan Fund XX, Ltd.	100%	Non-Insurer	
	Atlas Senior Loan Fund XXI, Ltd.	89.09%	Non-Insurer	
	Atlas Static Senior Loan Fund I, Ltd.	100%	Non-Insurer	
87-3725776	BGO Prime Industrial Development Partnership LP	18.517%	Non-Insurer	
84-3793856	Core Plus Separate Account LP	100%	Non-Insurer	
84-3805305	Core Plus Separate Account LF LP	100%	Non-Insurer	
	Core Plus Separate Account Reit LLC	100%	Non-Insurer	
	BGO Plaza 600 Member LLC	100%	Non-Insurer	
84-3749558	BGO Plaza 600 JV LLC	90%	Non-Insurer	
	SVF Operating LLC	100%	Non-Insurer	
	SVF The View Pacific LLC	100%	Non-Insurer	

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

Federal ID#	Entity Name	% of Voting Shares	Insurer / Non-Insurer	Note
	The View Pacific LLC	80%	Non-Insurer	
	The View Pacific Owner LLC	100%	Non-Insurer	
86-2034290	Crescent Capital Group GP LLC	51%	Non-Insurer	
27-2698206	Crescent Capital Group LP	51%	Non-Insurer	
82-4548868	Atlas CLO Funding I LLC	100%	Non-Insurer	3
82-4627401	Atlas CLO Funding II LLC	100%	Non-Insurer	3
85-1874898	Captrust II Services, LLC	100%	Non-Insurer	3
35-2526928	CCAP Administration LLC	100%	Non-Insurer	
47-3517782	CDL (TX) Services, LLC	100%	Non-Insurer	3
81-5385968	CDL Fund II GP, LLC	100%	Non-Insurer	3
98-1357876	CDL II GP Limited	100%	Non-Insurer	3
81-5459731	CDL Fund II SLP, LLC	100%	Non-Insurer	3
85-3063228	CDL Fund III GP LLC	100%	Non-Insurer	
98-1558976	CDL III GP Limited	100%	Non-Insurer	
86-3576917	CDL Fund III SLP LLC	100%	Non-Insurer	
99-2891390	CDL Fund IV GP LLC	100%	Non-Insurer	
98-1791035	CDL IV GP Limited	100%	Non-Insurer	
99-2767473	Crescent Direct Lending Fund IV (Delaware) LP	100%	Non-Insurer	
99-2842853	Crescent Direct Lending Levered Fund IV Note Feeder LP	100%	Non-Insurer	
99-2863093	CDL Fund IV SLP LLC	100%	Non-Insurer	
	CDL Intact GP Ltd	100%	Non-Insurer	
	CDL Parasol Fund GP LLC	100%	Non-Insurer	
35-2604554	CDL Unlevered Fund II SLP, LLC	100%	Non-Insurer	3
36-4910693	CESL II Special Partner LP Inc.	100%	Non-Insurer	3
98-1682831	CESL-A Coinvest GP S.a.r.l.	100%	Non-Insurer	
83-1247840	CPCP General Partner LLC	100%	Non-Insurer	3
98-1477744	CPCP General Partner Limited	100%	Non-Insurer	3
83-2139562	CPCP SLP LLC	100%	Non-Insurer	3

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

Federal ID#	Entity Name	% of Voting Shares	Insurer / Non-Insurer	Note
61-1708588	Crescent (TX) Direct Lending, LLC	67%	Non-Insurer	3
83-1960406	Crescent Agency Services LLC	100%	Non-Insurer	
30-0856933	Crescent Cap Advisors, LLC	89%	Non-Insurer	
92-2521407	Crescent Cap NT Advisors, LLC	100%	Non-Insurer	
61-1683869	Crescent Capital Group High Income B LLC	100%	Non-Insurer	3
61-1672438	Crescent Capital Group High Income LLC	100%	Non-Insurer	3
84-4403566	Crescent CCAP 10B5-1 Associates LLC	100%	Non-Insurer	
82-4141193	Crescent CLO Funding GP, LLC	100%	Non-Insurer	3
82-4176595	Crescent CLO Funding, L.P.	100%	Non-Insurer	3
	Crescent CLO Funding II GP LLC	100%	Non-Insurer	
	Crescent CLO Equity Funding II, LP	50%	Non-Insurer	
	Crescent CLO Management LP	100%	Non-Insurer	
98-1030093	Crescent Credit Europe Group Ltd	100%	Non-Insurer	
98-1030085	Crescent Credit Europe LLP	100%	Non-Insurer	
	Crescent Credit Malta LTD	100%	Non-Insurer	
86-1661364	Crescent Credit Solutions VIII (PA), LLC	100%	Non-Insurer	
85-4377705	Crescent Credit Opportunities, LLC	100%	Non-Insurer	3
98-1536487	Crescent Credit Opportunities GP, S.a.r.l.	100%	Non-Insurer	3
	Crescent Credit Solutions IX, LLC	100%	Non-Insurer	
	Crescent Credit Solutions IX GP, S.à r.l.	100%	Non-Insurer	
	Crescent Credit Solutions IXD (Senior Unlevered), SCSp	100%	Non-Insurer	
	Crescent Credit Solutions IXE (Senior Levered), SCSp	100%	Non-Insurer	
87-1058071	Crescent Credit Solutions VIII, LLC	100%	Non-Insurer	
98-1564309	Crescent Credit Solutions VIII GP, S.a.r.l	100%	Non-Insurer	
88-1082321	Crescent Credit Solutions VIII Note Issuer, LLC	100%	Non-Insurer	
87-4645617	Crescent K GP, LLC	100%	Non-Insurer	
88-0556706	Crescent CRPTF Multi-Strat, LLC	100%	Non-Insurer	
88-0583032	Crescent CRPTF Private Credit, LLC	100%	Non-Insurer	

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

40.5

Federal ID#	Entity Name	% of Voting Shares	Insurer / Non-Insurer	Note
	Crescent CRPTF Services, LLC	100%	Non-Insurer	
37-1719025	Crescent Direct Lending Levered, LLC	100%	Non-Insurer	3
38-3933857	Crescent Direct Lending Management, LLC	100%	Non-Insurer	3
47-1591692	CDL Services, LLC	100%	Non-Insurer	3
35-2471734	Crescent Direct Lending SBIC, LLC	51%	Non-Insurer	3
37-1756582	Crescent Direct Lending SLP, LLC	82%	Non-Insurer	3
87-1405505	Crescent Direct Lending SMA Management LLC	100%	Non-Insurer	
30-0770800	Crescent Direct Lending, LLC	100%	Non-Insurer	3
	Crescent ESL Saffron GP S.a.r.l.	100%	Non-Insurer	
82-4168954	Crescent European Specialty Lending II LLC	100%	Non-Insurer	3
98-1421071	Crescent European Specialty Loan II S.à r.l.	100%	Non-Insurer	3
88-2460041	Crescent European Specialty Lending III LLC	100%	Non-Insurer	
	CESL III Associates	100%	Non-Insurer	
	CESL III Special Partner LP Inc.	100%	Non-Insurer	
92-3996123	Crescent European Specialty Lending Fund III (USD Note Feeder) LP	100%	Non-Insurer	
98-1715009	Crescent European Specialty Lending III S.a.r.l.	100%	Non-Insurer	
46-4810825	Crescent European Specialty Lending LLC	100%	Non-Insurer	3
	CCE CAA Special Partner LP Inc.	100%	Non-Insurer	3
	CCE MM Special Partner LP Inc.	100%	Non-Insurer	3
98-1174592	CESL Special Partner LP Inc.	100%	Non-Insurer	3
98-1192548	Crescent European Specialty Loan S.A.R.L	100%	Non-Insurer	3
	Crescent Global CLO Management, LLC	100%	Non-Insurer	
88-1663341	Crescent Global CLO Management, LLC, Management Series	100%	Non-Insurer	
88-1656628	Crescent Global CLO Management, LLC, Retention Series	100%	Non-Insurer	
87-1336783	Crescent ICS GP, LLC	100%	Non-Insurer	
87-1358933	Crescent LACERS SMA Partnership GP, LLC	100%	Non-Insurer	
36-4714877	Crescent Mezzanine VI, LLC	100%	Non-Insurer	3
83-3844421	Crescent Mezzanine VII (Chengdong LP), LLC	100%	Non-Insurer	3

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

Federal ID#	Entity Name	% of Voting Shares	Insurer / Non-Insurer	Note
37-1835000	Crescent Mezzanine VII (PA), LLC	100%	Non-Insurer	3
47-3348044	Crescent Mezzanine VII, LLC	100%	Non-Insurer	3
98-1456184	Crescent Mezzanine VII (Chengdong GP), Ltd.	100%	Non-Insurer	3
32-0481443	Crescent Mezzanine VII (Scots) GP-GP, L.P.	100%	Non-Insurer	3
61-1776665	Crescent Mezzanine VII (Scots) GP, L.P.	100%	Non-Insurer	3
83-2090117	Crescent Private Credit Partners Management LLC	100%	Non-Insurer	3
90-0952920	Crescent SBIC Management, LLC	100%	Non-Insurer	3
90-0883982	Crescent Senior Secured Loan Management LLC	100%	Non-Insurer	3
20-2778298	Crescent Senior Secured Floating Rate Loan Fund, LLC	100%	Non-Insurer	3
98-1205323	Crescent Special Situations, Ltd.	100%	Non-Insurer	3
98-1205346	Crescent Special Situations, L.P.	100%	Non-Insurer	3
87-3229602	Crescent Syndicated Credit Solutions LLC	100%	Non-Insurer	
47-5590506	Crescent/Aegis SMA Partners, LLC	100%	Non-Insurer	3
46-4655436	Crescent/K Schools SMA Partners, LLC	100%	Non-Insurer	3
35-2548504	NPS/Crescent SMA Partners II, LLC	100%	Non-Insurer	3
80-0941625	NPS/Crescent SMA Partners, LLC	100%	Non-Insurer	3
	WTW CSCS GP LLC	100%	Non-Insurer	
98-1807059	WTW CSCS Fund (Cayman), L.P.	100%	Non-Insurer	
	InfraRed (UK) Holdco 2020 Ltd.	100%	Non-Insurer	
	Charles II Realisation LLP	100%	Non-Insurer	
	InfraRed Partners LLP	100%	Non-Insurer	
	InfraRed Capital Partners (Holdco) Limited	100%	Non-Insurer	
	Agincourt (2) GP LLP	100%	Non-Insurer	
	Fitzailwin (I) General Partner LLP	100%	Non-Insurer	
	InfraRed (I) MA GP LLP	100%	Non-Insurer	
	InfraRed (Infrastructure) Capital Partners Limited	100%	Non-Insurer	
	Infrastructure Investments General Partner Limited	100%	Non-Insurer	
	InfraRed Capital Partners (Australia) Pty Limited	100%	Non-Insurer	



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	InfraRed Capital Partners (France) SAS	100%	Non-Insurer	
	InfraRed Capital Partners (GP Holdco) Limited	100%	Non-Insurer	
	InfraRed Capital Partners (Spain) Limited	100%	Non-Insurer	
	InfraRed Capital Partners (US) LLC	100%	Non-Insurer	
	InfraRed Capital Partners Limited	100%	Non-Insurer	
	Curato Infrastructure Management Services Limited	100%	Non-Insurer	
	Curato Infrastructure Services Limited	100%	Non-Insurer	
	InfraRed Capital Partners México S de RL de CV	100%	Non-Insurer	
	InfraRed CIV (US Renewables) General Partner Limited	100%	Non-Insurer	
	InfraRed CIV (US Renewables) GP LLP	100%	Non-Insurer	
	InfraRed Environmental Infrastructure GP Limited	100%	Non-Insurer	
	InfraRed ETF GPLP Limited	100%	Non-Insurer	
	InfraRed ETF Lux General Partner S.à.r.l.	100%	Non-Insurer	
	InfraRed ETF UGP Limited	100%	Non-Insurer	
	InfraRed European Infrastructure Income 4 General Partner LLP	100%	Non-Insurer	
	InfraRed European Infrastructure Income 4 General Partner S.à.r.l.	100%	Non-Insurer	
	InfraRed Infrastructure (Colombia) GP Limited	100%	Non-Insurer	
	InfraRed Infrastructure III General Partner Limited	100%	Non-Insurer	
	InfraRed Infrastructure RAM GP Limited	100%	Non-Insurer	
	InfraRed Infrastructure V General Partner LLP	100%	Non-Insurer	
	InfraRed Infrastructure VI General Partner LLP	100%	Non-Insurer	
	InfraRed Infrastructure VI General Partner S.à.r.l.	100%	Non-Insurer	
	InfraRed Infrastructure Yield General Partner Limited	100%	Non-Insurer	
	Faryngton (I) GP LLP	100%	Non-Insurer	
	Faryngton (II) GP LLP	100%	Non-Insurer	
	Paternoster General Partner LLP	100%	Non-Insurer	
	Paternoster Intermediate (GP) Limited	100%	Non-Insurer	
	Paternoster IRAFIII CI GP Limited	100%	Non-Insurer	

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	Paternoster IRE RE GP Limited	100%	Non-Insurer	
	Paternoster IRIF CI GP Limited	100%	Non-Insurer	
	Paternoster RE CI GP Limited	100%	Non-Insurer	
	Waterloo Place (1) GP LLP	100%	Non-Insurer	
	Waterloo Place (2) GP LLP	100%	Non-Insurer	
	Waterloo Place (3) GP LLP	100%	Non-Insurer	
	Sun Life (UK) Designated Member Ltd.	100%	Non-Insurer	
	Sun Life Financial (Bermuda) Reinsurance Ltd.	100%	Insurer	
04-3526207	Sun Life Financial (Japan), Inc.	100%	Non-Insurer	
04-3579262	Sun Life Financial (U.S.) Holdings, Inc.	100%	Non-Insurer	
	Sun Life Financial (U.S.) Investments LLC	100%	Non-Insurer	
26-4183712	SL Investment US-RE Holdings 2009-1, Inc.	5%	Non-Insurer	
	SLC New Slim US LLC	100%	Non-Insurer	
61-1723752	Sun Life Institutional Distributors (U.S.) LLC	100%	Non-Insurer	
68-0635051	Sun Life Investment Management U.S., Inc.	100%	Non-Insurer	
20-5270592	BentallGreenOak (U.S.) GP LLC	100%	Non-Insurer	
	GO Equity GP LLC	100%	Non-Insurer	
	BentallGreenOak Europe Core Plus Logistics GP Ltd.	100%	Non-Insurer	
	BentallGreenOak Europe Core Plus Logistics GP Holdings LP	100%	Non-Insurer	
	BentallGreenOak Europe Core Plus Logistics GP S.à r.l.	100%	Non-Insurer	
	BentallGreenOak Europe IV GP, Ltd.	100%	Non-Insurer	
	BentallGreenOak Europe IV GP, LP	100%	Non-Insurer	
	BentallGreenOak Europe (Lux) IV GP S.à r.l.	100%	Non-Insurer	
	BentallGreenOak Europe Secured Lending III Carry, LP	100%	Non-Insurer	
	BentallGreenOak Europe Secured Lending III GP Holdings, LP	100%	Non-Insurer	
	BentallGreenOak Europe Secured Lending III GP S.à r.l.	100%	Non-Insurer	
	BentallGreenOak Europe Tactical Lending II Carry, LP	100%	Non-Insurer	
	BentallGreenOak Europe Tactical Lending II GP Holdings, LP	100%	Non-Insurer	

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	BentallGreenOak Europe Tactical Lending II GP S.à r.l.	100%	Non-Insurer	
81-4942820	GO Core Plus Employee Feeder GP, LLC	100%	Non-Insurer	
	GO Cross GP Ltd.	100%	Non-Insurer	
98-1061767	GO Europe Advisor LP	100%	Non-Insurer	
98-1162250	GOGL Manager Ltd.	50%	Non-Insurer	
98-1322411	GO Europe Carry II, LP	100%	Non-Insurer	
98-1326162	GreenOak UK Secured Lending II GP Ltd.	100%	Non-Insurer	
	GreenOak UK II GP Holdings, LLC	100%	Non-Insurer	
98-1322664	GO Europe Carry, LP	100%	Non-Insurer	
81-1928087	GO Europe II Carry, LP	100%	Non-Insurer	
98-1317898	GreenOak Europe (Lux) GP II, S.à r.l.	100%	Non-Insurer	
	GO Europe Investment Carry GP, Ltd.	100%	Non-Insurer	
98-1222294	GO Europe Investment Carry, LP	100%	Non-Insurer	
98-1272837	GO Europe Secured Lending GP Holdings, LP	100%	Non-Insurer	
98-1272874	GreenOak Europe Secured Lending GP S.à r.l.	100%	Non-Insurer	
98-1161816	GO Spain JV I, LP	100%	Non-Insurer	
98-1155466	GOGL Funding I, LP	88.274%	Non-Insurer	
98-1155147	GOGL GP Ltd.	75.64%	Non-Insurer	
98-1531654	GreenOak Europe Core Plus Logistics GP Holdings LP	100%	Non-Insurer	
98-1676628	BentallGreenOak US Core Plus GP (Lux) S.à r.l.	100%	Non-Insurer	
	BentallGreenOak US Core Plus Fund (Lux) SCSP	100%	Non-Insurer	
	BentallGreenOak US Core Plus (Lux) Blocker Cayman LP	100%	Non-Insurer	
	BentallGreenOak US Core Plus (Lux) Blocker Delaware LLC	100%	Non-Insurer	
98-1507422	GreenOak Europe Core Plus Logistics GP S.à r.l.	100%	Non-Insurer	
98-1295732	GreenOak Europe II GP Ltd.	100%	Non-Insurer	
98-1295754	GreenOak Europe II GP, LP	100%	Non-Insurer	
98-1512107	GreenOak Europe III GP Ltd.	100%	Non-Insurer	
98-1512140	GreenOak Europe III GP, LP	100%	Non-Insurer	

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98-1481275	GreenOak Europe (Lux) III GP S.à r.l.	100%	Non-Insurer	
98-1531622	GreenOak Europe Secured Lending II GP Holdings, LP	100%	Non-Insurer	
98-1611447	GreenOak Europe Secured Lending II GP S.à r.l.	100%	Non-Insurer	
98-1283316	GreenOak Japan GP Ltd.	100%	Non-Insurer	
98-1035286	BentallGreenOak Asia Advisor LP	100%	Non-Insurer	
98-1405886	GreenOak India Investment Advisors Private Limited	0.01%	Non-Insurer	
98-1656665	BentallGreenOak Asia Core Plus GP, LP	100%	Non-Insurer	
98-1656702	BentallGreenOak Asia Core Plus Joint Venture, LP	1%	Non-Insurer	
	BentallGreenOak Asia Core Plus Partnership, LP	1%	Non-Insurer	
	BentallGreenOak Asia GP IV, LP	100%	Non-Insurer	
98-1774758	BGO Helios GP, LP	100%	Non-Insurer	
98-1201073	GreenOak Asia GP II, LP	100%	Non-Insurer	
98-1502736	GreenOak Asia GP III, LP	100%	Non-Insurer	
	GreenOak Asia III SPV 1 Ltd.	100%	Non-Insurer	
	GreenOak Asia III SPV 2 Ltd.	100%	Non-Insurer	
98-1322998	GreenOak Spain GP, LP	100%	Non-Insurer	
98-1201236	GreenOak Spain GP, Ltd.	100%	Non-Insurer	
98-1531650	GreenOak Tactical Lending GP Holdings, LP	100%	Non-Insurer	
98-1531650	GreenOak Tactical Lending GP S.à r.l.	100%	Non-Insurer	
98-1261607	GreenOak US (EU Parallel) GP S.à r.l.	100%	Non-Insurer	
80-0931706	GreenOak US Blocker II, Inc.	23.33%	Non-Insurer	
46-2839069	GreenOak US GP II, LP	100%	Non-Insurer	
81-1072868	GreenOak US (EU Parallel) GP II, LLC	100%	Non-Insurer	
81-2921195	GreenOak US GP III, LP	100%	Non-Insurer	
26-4183712	SL Investment US-RE Holdings 2009-1, Inc.	95%	Non-Insurer	
20-5300937	BentallGreenOak (U.S.) Limited Partnership	50%	Non-Insurer	
	BentallGreenOak Strategic Capital Partners, LLC	100%	Non-Insurer	
99-1468504	BGO SCP Holdings, LLC	100%	Non-Insurer	

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Federal ID#	Entity Name	% of Voting Shares	Insurer / Non-Insurer	Note
	BentallGreenOak US Core Plus GP LLC	100%	Non-Insurer	
	BentallGreenOak US Core Plus SLP LLC	100%	Non-Insurer	
92-1395141	BGO 1Sharpe B Member, LLC	100%	Non-Insurer	
99-2447472	BGO 425 Park Guarantor LLC	100%	Non-Insurer	
32-0466479	BGO Corporate Holdings (US) LLC	100%	Non-Insurer	
	BGO US Mortgages Inc.	100%	Non-Insurer	
37-1948633	SLCAL, Inc.	100%	Non-Insurer	
20-1641876	Rushmore Partners LLC	100%	Non-Insurer	
30-0872552	NewTower Trust Company	100%	Non-Insurer	
81-4733550	BGO Daily Value Fund GP LLC	100%	Non-Insurer	
	NewTower Management GP LLC	100%	Non-Insurer	
	BDPF Feeder GP, LLC	100%	Non-Insurer	
	BDPF US B GP, LLC	100%	Non-Insurer	
	BGO ERA I LLC	100%	Non-Insurer	
	BGO Funds GP LLC	100%	Non-Insurer	
86-1891213	BentallGreenOak US Cold Storage GP LP	100%	Non-Insurer	
	BentallGreenOak Cold Storage Canada ULC	100%	Non-Insurer	
	BentallGreenOak US GP IV, LP	100%	Non-Insurer	
	BentallGreenOak US Lending GP LLC	100%	Non-Insurer	
87-3684973	BGO Prime Industrial Development GP LP	100%	Non-Insurer	
87-3712150	BGO Prime Industrial Development Feeder LLC	1%	Non-Insurer	
87-3734237	BGO Prime Industrial Development Parallel-F Partnership LP	1%	Non-Insurer	
	BGO Prime Industrial Development Parallel-Q Partnership LP	100%	Non-Insurer	
87-3725776	BGO Prime Industrial Development Partnership LP	1%	Non-Insurer	
	BGO REIT Special Limited Partner GP LLC	100%	Non-Insurer	
	BGO REIT Special Limited Partner LP	100%	Non-Insurer	
93-1929940	BGO Properties LLC	100%	Non-Insurer	
	BGO SCP Funds GP LLC	100%	Non-Insurer	

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99-1371098	BGO SCP Funds GP, LP	100%	Non-Insurer	
	BGO Strategic Capital Partners SLP LP	1%	Non-Insurer	
	BGO-SEC III GP, LP	100%	Non-Insurer	
	BGO Strategic Capital Partners SLP LP	99%	Non-Insurer	
42-1772921	BGO US Real Estate LP	100%	Non-Insurer	
42-1772920	BentallGreenOak Real Estate Advisors LP	99%	Non-Insurer	
81-1293379	GreenOak MC Real Estate Management LLC	50%	Non-Insurer	
42-1772919	BentallGreenOak Real Estate GP LLC	100%	Non-Insurer	
42-1772920	BentallGreenOak Real Estate Advisors LP	1%	Non-Insurer	
45-1599282	BentallGreenOak Real Estate US LLC	100%	Non-Insurer	
90-0925083	BKUS Institutional Logistics Coinvestment LLC	100%	Non-Insurer	
81-4441299	Metropolitan Real Estate Holdings, LLC	100%	Non-Insurer	
87-1203667	BGO Enstar GP, L.P.	100%	Non-Insurer	
	BGO EPPF GP, LP	100%	Non-Insurer	
88-1181599	BGO MEP US Holdings LP	20.023%	Non-Insurer	
20-5300937	BentallGreenOak (U.S.) Limited Partnership	6%	Non-Insurer	
88-1251149	MEP US Holdings GP LLC	100%	Non-Insurer	
04-3132283	Sun Life Capital Management (U.S.) LLC	100%	Non-Insurer	
87-3309366	SLC Management MAC GP LLC	100%	Non-Insurer	
87-3327712	SLC Management Multi-Asset Credit Fund US LP	100%	Non-Insurer	
87-3346872	SLC Management MAC Investments LP	5%	Non-Insurer	
87-3368919	SLC Management MAC US Investments LLC	5%	Non-Insurer	
	SLC Management Multi-Series LLC	100%	Non-Insurer	
84-3510618	SLC Management U.S. Private Credit GP, LLC	100%	Non-Insurer	
04-3401285	Sun Life of Canada (U.S.) Financial Services Holdings, Inc.	99.929%	Non-Insurer	
04-2747644	Massachusetts Financial Services Company	95.724%	Non-Insurer	
	MFS Development Funds, LLC	100%	Non-Insurer	
04-2747644	MFS Exchange LLC	100%	Non-Insurer	

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04-3169826	MFS Fund Distributors, Inc.	100%	Non-Insurer	
02-0507414	MFS Heritage Trust Company	100%	Non-Insurer	
04-3247425	MFS Institutional Advisors, Inc.	100%	Non-Insurer	
	3060097 Nova Scotia Company	100%	Non-Insurer	
	MFS Investment Management Canada Limited	15%	Non-Insurer	
	MFS Investment Management Canada Limited	85%	Non-Insurer	
	MFS International Ltd.	100%	Non-Insurer	
	MFS do Brasil Desenvolvimento de Mercado Ltda.	100%	Non-Insurer	
	MFS International (Chile) SpA	100%	Non-Insurer	
	MFS International (Hong Kong) Limited	100%	Non-Insurer	
	MFS International Holdings Pty Ltd	100%	Non-Insurer	
	MFS Financial Management Consulting (Shanghai) Co., Ltd.	100%	Non-Insurer	
	MFS International (U.K.) Limited	100%	Non-Insurer	
	MFS International Switzerland GmbH	100%	Non-Insurer	
	MFS International (Uruguay) II S.A.	100%	Non-Insurer	
	MFS International (Uruguay) S.A.	100%	Non-Insurer	
	MFS International Australia Pty Ltd	100%	Non-Insurer	
	MFS International Singapore Pte. Ltd.	100%	Non-Insurer	
	MFS Investment Management Company (LUX) S.à.r.l.	100%	Non-Insurer	
	MFS Investment Management K.K.	100%	Non-Insurer	
04-2864897	MFS Service Center, Inc.	100%	Non-Insurer	
04-3365782	Sun Life of Canada (U.S.) Holdings, Inc.	100%	Non-Insurer	
26-4312923	DailyFeats, Inc.	100%	Non-Insurer	
01-0483086	Disability Reinsurance Management Services, Inc.	100%	Non-Insurer	
61-0403075 64602 DE	Independence Life and Annuity Company	100%	Insurer	
46-1499557 15325 DE	Sun Life Financial (U.S.) Reinsurance Company II	100%	Insurer	

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14-1894634	Pinnacle Care International, Inc.	100%	Non-Insurer	
	Pinnacle Care International, LLC	100%	Non-Insurer	
59-0411385 68047 TX	Professional Insurance Company	100%	Insurer	
04-3292937	Sun Canada Financial Co.	100%	Non-Insurer	
06-1435452	Sun Life Administrators (U.S.), Inc.	100%	Non-Insurer	
85-2454037	Sun Life Financial (U.S.) Delaware Finance 2020, LLC	100%	Non-Insurer	
	Sun Life Financial (U.S.) Delaware Finance, LLC	100%	Non-Insurer	
26-1292779 13051 MI	Sun Life Financial (U.S.) Reinsurance Company	100%	Insurer	
26-3730703	Sun Life Financial (U.S.) Services Company, Inc.	100%	Non-Insurer	
41-1694906	The Premier Dental Group, Inc.	100%	Non-Insurer	
20-1750874	Landmark Dental Alliance, Inc.	100%	Non-Insurer	
04-2470476	Sun Life Financial Distributors, Inc.	100%	Non-Insurer	
	<b>Sun Life Global Investments Inc. – Foreign Operations</b>	100%	Non-Insurer	
	BK Canada Holdings Inc.	100%	Non-Insurer	
	BentallGreenOak (Canada) GP Ltd.	100%	Non-Insurer	
	BentallGreenOak (Canada) Limited Partnership	49%	Non-Insurer	
	0936543 BC Ltd.	100%	Non-Insurer	
	550 Burrard Street Ltd.	100%	Non-Insurer	
	10 Dundas Street Ltd.	100%	Non-Insurer	
	1090 Pender Properties Ltd.	100%	Non-Insurer	
	121 King Street West Ltd.	100%	Non-Insurer	
	1600 Rene-Levesque Ltd.	100%	Non-Insurer	
	2025 Willingdon Avenue Holdings Ltd.	100%	Non-Insurer	
	715-725 Eaton Way Holdings Ltd.	100%	Non-Insurer	
	787 Cliveden Place Holdings Ltd.	100%	Non-Insurer	
	8400 River Road Holdings Ltd.	100%	Non-Insurer	



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	Bentall Property Services (Ontario) Ltd.	100%	Non-Insurer	
	BentallGreenOak Canada Cold Storage GP Inc.	100%	Non-Insurer	
	BentallGreenOak Prime Canadian Property Fund GP Inc.	100%	Non-Insurer	
	BentallGreenOak Prime Canadian Property Pool GP Inc.	100%	Non-Insurer	
	BGO Canadian Value-Add Co-Investment GP Inc.	100%	Non-Insurer	
	BGO Canadian Value-Add GP Inc.	100%	Non-Insurer	
	BentallGreenOak Canadian Value-Add GP LP	100%	Non-Insurer	
	Oakland Square GP Inc.	90%	Non-Insurer	
	BGO Canadian Value-Add SLP LP	100%	Non-Insurer	
	BGO Canadian Value-Add Co-Investment LP	0.006%	Non-Insurer	
	BGO Capital (Canada) Inc.	100%	Non-Insurer	
	BGO Holdings (Cayman), LP	71%	Non-Insurer	1
98-1582942	BentallGreenOak Advisors (Hong Kong) Limited	100%	Non-Insurer	
98-1367181	BentallGreenOak Advisors (Korea) Limited	100%	Non-Insurer	
	BentallGreenOak China Holdings Limited	100%	Non-Insurer	
	BentallGreenOak Capital Partners (HK) Limited	100%	Non-Insurer	
	BentallGreenOak China Investment Advisers Limited	100%	Non-Insurer	
	BentallGreenOak China Investment II Limited	100%	Non-Insurer	
	BentallGreenOak China Investment Limited	100%	Non-Insurer	
	BentallGreenOak China Investors II Limited	100%	Non-Insurer	
	BentallGreenOak China Real Estate Fund II (A), L.P.	100%	Non-Insurer	
	BentallGreenOak China Investors III Limited	100%	Non-Insurer	
	BentallGreenOak China Real Estate Fund III L.P.	100%	Non-Insurer	
	BentallGreenOak CREF III (A) L.P.	100%	Non-Insurer	
	BentallGreenOak China Real Estate Investments Limited	100%	Non-Insurer	
	BentallGreenOak China Real Estate Investments, L.P.	100%	Non-Insurer	
	BentallGreenOak Investment Advisers Limited	100%	Non-Insurer	
	BentallGreenOak Management Consulting (Shanghai) Co., Limited	100%	Non-Insurer	

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	BentallGreenOak K.K.	100%	Non-Insurer	
98-1324508	BentallGreenOak Real Estate Advisors (Jersey) Limited	100%	Non-Insurer	
98-0688176	BentallGreenOak Real Estate Services Ltd.	100%	Non-Insurer	
98-0688174	BentallGreenOak Advisors (UK) LLP	100%	Non-Insurer	
98-1582921	BentallGreenOak Advisors (Italy) S.r.l.	100%	Non-Insurer	
98-1070246	BentallGreenOak Asset Management (Germany) GmbH	100%	Non-Insurer	
	BentallGreenOak Management Services S.à.r.l.	100%	Non-Insurer	
98-1367180	BentallGreenOak Real Estate Advisors (Spain) S.L.	100%	Non-Insurer	
32-0531897	Grafton Advisors (2006) LLP	0.01%	Non-Insurer	
98-1035902	GreenOak Euro RE Asset Management LLP	100%	Non-Insurer	
98-1525961	BentallGreenOak UK Secured Lending III Carry LP	100%	Non-Insurer	
98-1533529	BentallGreenOak UK Secured Lending III GP Ltd.	100%	Non-Insurer	
	BentallGreenOak UK Secured Lending IV GP Ltd.	100%	Non-Insurer	
98-1519068	BGO ACP Advisors Asia LLC	100%	Non-Insurer	
	BGO ACP Advisors Japan G.K.	100%	Non-Insurer	
	Godo Kaisha Lotus	1%	Non-Insurer	
98-1525974	BGO Asia III Advisors LLC	100%	Non-Insurer	
98-1582940	BGO Asia III Advisors Japan G.K.	100%	Non-Insurer	
	BGO Asia IV Advisor LLC	100%	Non-Insurer	
	BGO Asia IV Advisors Japan G.K.	50%	Non-Insurer	
	BGO Europe Funds GP Ltd.	100%	Non-Insurer	
	BGO Europe Secured Lending IV Carry, LP	100%	Non-Insurer	
	BGO Europe Secured Lending IV GP Holdings, LP	100%	Non-Insurer	
	BGO Europe Secured Lending IV GP S.à r.l.	100%	Non-Insurer	
	BGO Europe Secured Lending Side Car 1 GP Holdings, LP	100%	Non-Insurer	
	BGO Europe Secured Lending Co-investment 1 GP S.à r.l.	100%	Non-Insurer	
92-0245532	BGO Industrial Real Estate Income Trust, Inc.	100%	Non-Insurer	
92-0271363	BGO IREIT Operating Partnership LP	100%	Non-Insurer	

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

Federal ID#	Entity Name	% of Voting Shares	Insurer / Non-Insurer	Note
88-3753331	BGO Genesis Holding LLC	56.522%	Non-Insurer	
88-3683270	NP BGO NTR Portfolio LLC	60.53%	Non-Insurer	
	BGO Real Estate Advisors K.K.	100%	Non-Insurer	
98-1525991	BGO WELPUT Carry GP Limited	100%	Non-Insurer	
	BGO WELPUT Carry LLC	100%	Non-Insurer	
98-1525996	BGO WELPUT Carry LP	100%	Non-Insurer	
98-1331621	GO Grafton Finance Ltd.	100%	Non-Insurer	
98-1331651	GO Grafton Holdings Ltd.	100%	Non-Insurer	
32-0531897	Grafton Advisors (2006) LLP	99.99%	Non-Insurer	
98-1405886	GreenOak India Investment Advisors Private Limited	99.99%	Non-Insurer	
	BGO Hamilton Value-Add Multi-Family GP Inc.	100%	Non-Insurer	
	BGO Luxembourg Holdings Ltd.	100%	Non-Insurer	
	BentallGreenOak (Luxembourg) G.P. S.à.r.l.	100%	Non-Insurer	
	BGO Prime GP Holdco Inc.	100%	Non-Insurer	
	10 Ronrose Drive GP Inc.	100%	Non-Insurer	
	1183504 B.C. Ltd.	100%	Non-Insurer	
	121 King Street West I GP Inc.	100%	Non-Insurer	
	121 King Street West II GP Inc.	100%	Non-Insurer	
	121 King Street West III GP Inc.	100%	Non-Insurer	
	13th Avenue SE GP Inc.	100%	Non-Insurer	
	13th Avenue SW GP Inc.	100%	Non-Insurer	
	1600 Rene-Levesque GP Inc.	100%	Non-Insurer	
	18 Parkshore Drive GP Inc.	100%	Non-Insurer	
	1855 and 1875 Buckhorn Gate GP Inc.	100%	Non-Insurer	
	2-8 St. Thomas Street GP Inc.	100%	Non-Insurer	
	2-8 St. Thomas Holdings Inc.	50%	Non-Insurer	
	290-300 King George Road GP Inc.	100%	Non-Insurer	
	5140 North Fraser Way Holding Ltd.	100%	Non-Insurer	

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

Federal ID#	Entity Name	% of Voting Shares	Insurer / Non-Insurer	Note
	52nd Street Business Centre GP Inc.	100%	Non-Insurer	
	Airport 407 Business Campus GP Inc.	100%	Non-Insurer	
	BentallGreenOak Prime Canadian Investments I GP Inc.	100%	Non-Insurer	
	BentallGreenOak Prime Canadian Investments II GP Inc.	100%	Non-Insurer	
	BentallGreenOak Prime Investments Trustee Inc.	100%	Non-Insurer	
	BK Prime Alberta I GP Inc.	100%	Non-Insurer	
	BK Prime British Columbia I GP Inc.	100%	Non-Insurer	
	BK Prime False Creek Residences GP Inc.	100%	Non-Insurer	
	BK Prime Foothills North GP Inc.	100%	Non-Insurer	
	BK Prime Ontario I GP Inc.	100%	Non-Insurer	
	BK Prime Quebec I GP Inc.	100%	Non-Insurer	
	600 de Maisonneuve Ltée/600 de Maisonneuve Ltd.	100%	Non-Insurer	
	7277733 Canada Inc.	50%	Non-Insurer	
	Capilano Business Park II GP Inc.	100%	Non-Insurer	
	CareLife Fleetwood GP Inc.	100%	Non-Insurer	
	CareLife Maple Ridge GP Inc.	100%	Non-Insurer	
	Champlain Square GP Inc.	100%	Non-Insurer	
	Churchill 403 Business Campus GP Inc.	100%	Non-Insurer	
	Dalhousie Station GP Inc.	100%	Non-Insurer	
	Gateway Business Campus GP Inc.	100%	Non-Insurer	
	H Business Park (A&B) GP Inc.	100%	Non-Insurer	
	H Business Park (G&H) GP Inc.	100%	Non-Insurer	
	Hillside Centre I GP Inc.	100%	Non-Insurer	
	Hillside Centre II GP Inc.	100%	Non-Insurer	
	Mission Hill GP Inc.	100%	Non-Insurer	
	Pearson Corporate Centre GP Inc.	100%	Non-Insurer	
	Peterborough Retail Portfolio GP Inc.	100%	Non-Insurer	
	PG Village Shopping Centre GP Inc.	100%	Non-Insurer	

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

Federal ID#	Entity Name	% of Voting Shares	Insurer / Non-Insurer	Note
	Precidio Court and Corporation Drive GP Inc.	100%	Non-Insurer	
	Viceroy Road Portfolio GP Inc.	100%	Non-Insurer	
	West Pender II GP Inc.	100%	Non-Insurer	
	Westpen 10 Dundas GP Inc.	100%	Non-Insurer	
	Westpen North Hill GP Inc.	100%	Non-Insurer	
	White Oaks Mall I GP Inc.	100%	Non-Insurer	
	White Oaks Mall II GP Inc.	100%	Non-Insurer	
	Yellowhead Crossing I GP Inc.	100%	Non-Insurer	
	Yellowhead Crossing II GP Inc.	100%	Non-Insurer	
	Yellowhead Crossing Development Ltd.	50%	Non-Insurer	
	Yellowhead Crossing III GP Inc.	100%	Non-Insurer	
	Yellowhead Crossing Development Ltd.	50%	Non-Insurer	
	BGO Real Property Services (Canada) Inc.	100%	Non-Insurer	
	BK Prime False Creek Residences Holdings Ltd.	100%	Non-Insurer	
	BKHY Upper Holdco Inc.	100%	Non-Insurer	
	BKHY Lower Holdco Inc.	100%	Non-Insurer	
	BentallGreenOak High Yield Canadian Property Fund I Limited Partnership	16.11%	Non-Insurer	
	Capilano Business Park Holdings Ltd.	100%	Non-Insurer	
	High Plains Boulevard Holdings Ltd.	100%	Non-Insurer	
	Hillside Centre Holdings Inc.	100%	Non-Insurer	
	HYPF Fund I GP Inc.	100%	Non-Insurer	
	HYPF Fund I GP Limited Partnership	0.01%	Non-Insurer	
	HYPF Fund I GP Limited Partnership	99.99%	Non-Insurer	
	BentallGreenOak High Yield Canadian Property Fund I Limited Partnership	0.001%	Non-Insurer	
	P&T Shopping Centre Holdings Ltd.	100%	Non-Insurer	
	Parkgate Village Holdings Ltd.	100%	Non-Insurer	
	SynchroSERV Inc.	100%	Non-Insurer	
	SynchroSERV Limited Partnership	0.01%	Non-Insurer	

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

Federal ID#	Entity Name	% of Voting Shares	Insurer / Non-Insurer	Note
	SynchroSERV Limited Partnership	99.99%	Non-Insurer	
	White Oaks Mall Holdings Ltd.	100%	Non-Insurer	
88-4283363	Crescent Private Credit Income Corp.	69.942%	Non-Insurer	
99-0540777	CPCI CA Lending LLC	100%	Non-Insurer	
	CPCI Funding SPV, LLC	100%	Non-Insurer	
	CPCI Universal Equity, Inc.	100%	Non-Insurer	
98-1531426	GO Epsilon GP, LLC	100%	Non-Insurer	
98-1531437	GO Epsilon, LP	50%	Non-Insurer	
98-1521151	GO Epsilon HoldCo I S.à r.l.	100%	Non-Insurer	
98-1606070	GO Epsilon AcquiCo A-B S.à r.l.	100%	Non-Insurer	
98-1606072	GO Epsilon AcquiCo A-L S.à r.l.	100%	Non-Insurer	
98-1521714	GO Epsilon AcquiCo A-O S.à r.l.	100%	Non-Insurer	
	MEP Global Holdings GP Inc.	100%	Non-Insurer	
	MEP Global Holdings LP	0.01%	Non-Insurer	
	MEP Global Holdings Inc.	100%	Non-Insurer	
	MEP Canada-B Holdings ULC	100%	Non-Insurer	
	MEP Global Holdings LP	3.356%	Non-Insurer	
	MEP Global Holdings LP	28.561%	Non-Insurer	
	BentallGreenOak (Canada) Limited Partnership	7%	Non-Insurer	
	SLC AM Parent Inc.	100%	Non-Insurer	
	SLC Asset Management ULC	50%	Non-Insurer	
	SLC Asset Management ULC	50%	Non-Insurer	
	SLC Canada CAV Corp.	100%	Non-Insurer	
	SLGI Asset Management Inc.	100%	Non-Insurer	
	Excel Funds Management Inc.	100%	Non-Insurer	
	Excel Investment Counsel Inc.	100%	Non-Insurer	
	Sun Life Capital Management (Canada) Inc.	100%	Non-Insurer	
	BGO Mortgage Services Canada Inc.	100%	Non-Insurer	

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

Federal ID#	Entity Name	% of Voting Shares	Insurer / Non-Insurer	Note
	SLC Management Canadian Commercial Mortgage GP Inc.	100%	Non-Insurer	
	SLC Management Canadian Commercial Mortgage Fund	0.01%	Non-Insurer	
	SLC Management Core FI GP Inc.	100%	Non-Insurer	
	SLC Management Long Term Core FI GP Inc.	100%	Non-Insurer	
	SLC Management Long Term PFIP GP Inc.	100%	Non-Insurer	
	SLC Management PFIP GP Inc.	100%	Non-Insurer	
	SLC Management Private Fixed Income Plus Fund	0.01%	Non-Insurer	
	SLC Management Short Term PFIP GP Inc.	100%	Non-Insurer	
	Sun Life Investment Management Asia Limited	100%	Non-Insurer	
38-1082080 80802 (CN)	<b>Sun Life Assurance Company of Canada</b> (including the United States Branch) – United States Operations	100%	Insurer	
87-3420237	BentallGreenOak US Lending A LP	12.47%	Non-Insurer	
87-3482375	BentallGreenOak US Lending REIT LLC	72.02%	Non-Insurer	
87-3284912	BGO US Lending Holdco A LLC	100%	Non-Insurer	
87-3141011	BGO US Lending Originator LLC	100%	Non-Insurer	
	BGO US Lending HRI Loan Pledgor LLC	100%	Non-Insurer	
	BGO US Lending HRI Loan Seller LLC	100%	Non-Insurer	
92-2735171	BGO US Lending Pledgor II LLC	100%	Non-Insurer	
92-2735498	BGO US Lending Seller II LLC	100%	Non-Insurer	
92-2716523	BGO US Lending Pledgor III LLC	100%	Non-Insurer	
92-2716702	BGO US Lending Seller III LLC	100%	Non-Insurer	
87-3284912	BGO US Lending Seller I LLC	100%	Non-Insurer	
	Crescent Credit Solutions IXB, SCSp	5.882%	Non-Insurer	
88-4283363	Crescent Private Credit Income Corp.	17.486%	Non-Insurer	
87-3206988	Crescent Syndicated Credit Solutions Fund, L.P.	47.583%	Non-Insurer	
13-3830846	Dental Health Alliance, L.L.C.	100%	Non-Insurer	
59-3063687	Denticare of Alabama, Inc.	100%	Insurer	
	SL BBCML Holdings Inc.	100%	Non-Insurer	

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

Federal ID#	Entity Name	% of Voting Shares	Insurer / Non-Insurer	Note
	SLA US Holdco, Inc.	100%	Non-Insurer	
85-3460829	SLA US Real Estate Holdings, Inc.	100%	Non-Insurer	
45-2424030	Solidify Software, LLC	100%	Non-Insurer	
06-0893662 80926 MI	Sun Life and Health Insurance Company (U.S.)	100%	Insurer	
	Sun Life Financial International Holdings (MC), LLC	100%	Non-Insurer	
33-0360239	UDC Dental California, Inc.	100%	Non-Insurer	
74-2609036 52022 OH	UDC Ohio, Inc.	100%	Insurer	
58-1099945	Union Security DentalCare of Georgia, Inc.	100%	Non-Insurer	
52-1565653 11244 NJ	Union Security DentalCare of New Jersey, Inc.	100%	Insurer	
86-0517444 47708 AZ	United Dental Care of Arizona, Inc.	100%	Insurer	
86-0631335 52032 CO	United Dental Care of Colorado, Inc.	100%	Insurer	
75-2481527 47044 MO	United Dental Care of Missouri, Inc.	100%	Insurer	
86-0384270 47042 NM	United Dental Care of New Mexico, Inc.	100%	Insurer	
75-2076282 95142 TX	United Dental Care of Texas, Inc.	100%	Insurer	
38-1082080 80802 (CN)	<b>Sun Life Assurance Company of Canada</b> – Foreign Operations	100%	Insurer	
	10851744 Canada Inc.	100%	Non-Insurer	
	11096800 Canada Inc.	100%	Non-Insurer	
	1250 RLB GP Inc.	100%	Non-Insurer	
	1250 RLB Limited Partnership	0.01%	Non-Insurer	
	1250 RLB Limited Partnership	99.99%	Non-Insurer	
	15651948 Canada Inc.	100%	Non-Insurer	
	188 St. Lands Ltd.	100%	Non-Insurer	



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

Federal ID#	Entity Name	% of Voting Shares	Insurer / Non-Insurer	Note
	2475 Eglinton Ave W (Skyrise 2) Canada Inc.	100%	Non-Insurer	
	25 Nicholas Avenue (Evolv) Canada Inc.	100%	Non-Insurer	
	6965083 Canada Inc.	100%	Non-Insurer	
	7037457 Canada Inc.	100%	Non-Insurer	
	7647930 Canada Inc.	100%	Non-Insurer	
	Annemasse Boishriand Holdings L.P.	1%	Non-Insurer	
	8750840 Canada Inc.	100%	Non-Insurer	
	90 Harbour Limited Partnership	30%	Non-Insurer	
	One York Street Inc.	100%	Non-Insurer	
	901 King West Nominee Inc.	50%	Non-Insurer	
	Annemasse Boishriand Holdings L.P.	99%	Non-Insurer	
	Faubourg Boishriand Shopping Centre G.P. Inc.	50%	Non-Insurer	
	Faubourg Boishriand Shopping Centre L.P.	0.002%	Non-Insurer	
	Faubourg Boishriand Shopping Centre L.P.	49.999%	Non-Insurer	
	Faubourg Boishriand Shopping Centre Holdings Inc.	100%	Non-Insurer	
	Atlas Senior Loan Fund XXII, Ltd.	75.7%	Non-Insurer	
	Atlas Senior Loan Fund XXIII, Ltd.	60%	Non-Insurer	
	Atlas Senior Loan Fund XXIV, Ltd.	70.4%	Non-Insurer	
	BentallGreenOak Asia Core Plus Partnership, LP	9.835%	Non-Insurer	
	BentallGreenOak Canadian Value-Add LP	42.857%	Non-Insurer	
	BGO Canadian Value-Add Co-Investment LP	49.997%	Non-Insurer	
	BGO Hamilton Value-Add Multi-Family LP	40%	Non-Insurer	
	Oakland Square LP	90%	Non-Insurer	
	BentallGreenOak Europe Core Plus Logistics SCSp SICAV-RAIF	12.77%	Non-Insurer	
	BentallGreenOak High Yield Canadian Property Fund I Limited Partnership	10.88%	Non-Insurer	
	BestServe Financial Limited	100%	Non-Insurer	
	Canadian Environmental Energy Corporation	32.22%	Non-Insurer	
	CH 2 Holdings Ltd.	35%	Non-Insurer	

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

Federal ID#	Entity Name	% of Voting Shares	Insurer / Non-Insurer	Note
	CH 3 Holdings Ltd.	35%	Non-Insurer	
	CH 4 Holdings Ltd.	35%	Non-Insurer	
	Country Lane Enterprises Ltd.	100%	Non-Insurer	
98-1536219	Crescent Credit Opportunities Fund AIF, SCSp	13.524%	Non-Insurer	
	Dialogue Health Technologies Inc.	100%	Non-Insurer	
	Dialogue Health Technologies Australia Pty Ltd	100%	Non-Insurer	
	e-Hub Health Pty Ltd	100%	Non-Insurer	
	Optima Global Health Inc.	100%	Non-Insurer	
	Tictrac Limited	100%	Non-Insurer	
	Hullmark Sun Life (100 Broadview) LP	50%	Non-Insurer	
	Hullmark Sun Life (100 Broadview) Ltd.	50%	Non-Insurer	
	Hullmark Sun Life (340 Dufferin) LP	50%	Non-Insurer	
	Hullmark Sun Life (360 Dufferin) LP	50%	Non-Insurer	
	Hullmark Sun Life (376 Dufferin) LP	50%	Non-Insurer	
	Hullmark Sun Life (545 King) LP	50%	Non-Insurer	
	Hullmark Sun Life (545 King) Ltd.	50%	Non-Insurer	
	Hullmark Sun Life (619 Queen) LP	50%	Non-Insurer	
	Hullmark Sun Life (619 Queen) Ltd.	50%	Non-Insurer	
	Hullmark Sun Life (Atlantic) LP	50%	Non-Insurer	
	Hullmark Sun Life (Atlantic) Ltd.	50%	Non-Insurer	
	Menkes Waterfront Holdings Inc.	50%	Non-Insurer	
	PT. Cakrawala Solusi Lintas	47.24%	Insurer	
	PT. Sun Life Financial Indonesia	95.87%	Insurer	
	PT. Sun Life Indonesia Services	100%	Non-Insurer	
	PT. Cakrawala Solusi Lintas	52.76%	Insurer	
	PT. Sun Life Financial Indonesia	4.13%	Insurer	
	Simpill Health Group Inc.	31.02%	Non-Insurer	
	SL Insurance (Hungary) Finance No. 2 Kft	100%	Non-Insurer	

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

Federal ID#	Entity Name	% of Voting Shares	Insurer / Non-Insurer	Note
	SLC Management Canadian Commercial Mortgage Fund	84.001%	Non-Insurer	
	SLC Management Canadian Long Duration Overlay Fund	50.017%	Non-Insurer	
	SLC Management Core Plus Bond Fund	100%	Non-Insurer	
	SLC Management Long Core Plus Bond Fund	100%	Non-Insurer	
	SLC Management Long Corporate Bond Fund	7.249%	Non-Insurer	
98-1637634	SLC Management Multi-Asset Credit Fund LP	100%	Non-Insurer	
87-3346872	SLC Management MAC Investments LP	95%	Non-Insurer	
87-3448094	SLC Management MAC US Intermediate LLC	100%	Non-Insurer	
87-3368919	SLC Management MAC US Investments LLC	95%	Non-Insurer	
	SLC Management Private Fixed Income Plus Fund	17.215%	Non-Insurer	
	Southpointe Common Corp.	33.33%	Non-Insurer	
	Southpointe Plaza Inc.	33.33%	Non-Insurer	
	Sun Life (India) AMC Investments Inc.	100%	Non-Insurer	
	Aditya Birla Sun Life AMC Limited	30%	Non-Insurer	
	Aditya Birla Sun Life AMC (Mauritius) Limited	100%	Non-Insurer	
	Aditya Birla Sun Life Asset Management Company Ltd.	100%	Non-Insurer	
	Aditya Birla Sun Life Asset Management Company Pte. Ltd.	100%	Non-Insurer	
	India Advantage Fund Limited	100%	Non-Insurer	
	Aditya Birla Sun Life Trustee Private Limited	49%	Non-Insurer	
	Sun Life (Ireland) Finance No. 2 Limited	100%	Non-Insurer	
	Sun Life (Singapore) Support Center Pte. Ltd.	100%	Non-Insurer	
	Sun Life Canada Securities Inc.	100%	Non-Insurer	
	Sun Life Capital Trust	100%	Non-Insurer	
	Sun Life Consultancy and Management (Beijing) Co., Ltd.	100%	Non-Insurer	
	Sun Life Everbright Life Insurance Company Limited	24.99%	Insurer	
	Sun Life Everbright Asset Management Co., Ltd.	99%	Non-Insurer	
	Sun Life Financial (India) Insurance Investments Inc.	100%	Non-Insurer	
	Aditya Birla Sun Life Insurance Company Limited	49%	Insurer	

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP  
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Federal ID#	Entity Name	% of Voting Shares	Insurer / Non-Insurer	Note
	Aditya Birla Sun Life Pension Fund Management Limited	100%	Non-Insurer	
	Sun Life Financial Asia Services Limited	100%	Non-Insurer	
	Sun Life Financial Distributors (Canada) Inc.	100%	Non-Insurer	
	Sun Life Financial Investment Services (Canada) Inc.	100%	Non-Insurer	
	Sun Life Financial Investments (Bermuda) Ltd.	100%	Non-Insurer	
	Sun Life Financial of Canada (U.K.) Overseas Investments Limited	100%	Non-Insurer	
	Sun Life Financial Trust Inc.	100%	Non-Insurer	
	Sun Life Global Solutions Private Limited	100%	Non-Insurer	
	Sun Life Hong Kong Limited	100%	Insurer	
	BentallGreenOak Asia Core Plus Partnership, LP	3.278%	Non-Insurer	
	Bowtie Life Insurance Company Limited	49.99%	Insurer	
	Bowtie Singapore Pte. Ltd.	100%	Non-Insurer	
	Bowtie Vietnam Company Limited	100%	Non-Insurer	
	Bowtie x JP Partners Medical Centre Limited	65%	Non-Insurer	
	Claim Technology Services Limited	100%	Non-Insurer	
	Crescent Credit Solutions IXB, SCSp	3.529%	Non-Insurer	
98-1774767	Helios Real Estate Fund L.P.	100%	Non-Insurer	
	InfraRed Infrastructure VI (1) LP	1.64%	Non-Insurer	
	Sun Life Asset Management (HK) Limited	100%	Non-Insurer	
	Sun Life Financial Holdings (HK) Limited	100%	Non-Insurer	
	Sun Life Hong Kong Services Limited	100%	Non-Insurer	
	Delightful Wealth Management Limited	14.99%	Insurer	
	Sun Life Investment Holdings (HK) Limited	100%	Non-Insurer	
	Sun Life Management Holdings (HK) Limited	100%	Non-Insurer	
	Sun Life Pension Trust Limited	100%	Non-Insurer	
	Sun Life Trustee Company Limited	100%	Non-Insurer	
	Sun Life Information Services Canada, Inc.	100%	Non-Insurer	
	Sun Life Information Services Ireland Limited	100%	Non-Insurer	

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP  
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Federal ID#	Entity Name	% of Voting Shares	Insurer / Non-Insurer	Note
	Sun Life Insurance (Canada) Limited	100%	Insurer	
	12723603 Canada Inc.	100%	Non-Insurer	
	BentallGreenOak Asia Core Plus Partnership, LP	11.474%	Non-Insurer	
	BGO GCP Photo Investments LLC	100%	Non-Insurer	
	Godo Kaisha Lotus	99%	Non-Insurer	
	BentallGreenOak Europe Core Plus Logistics SCSp SICAV-RAIF	8.51%	Non-Insurer	
87-3712150	BGO Prime Industrial Development Feeder LLC	3.703%	Non-Insurer	
	Crescent Credit Solutions IXB, SCSp	2.353%	Non-Insurer	
	InfraRed Energy Transition Fund B LP	6.98%	Non-Insurer	
	InfraRed European Infrastructure Income 4 (1) LP	3.52%	Non-Insurer	
	InfraRed Infrastructure VI (1) LP	3.28%	Non-Insurer	
	SLI General Partner Limited	100%	Non-Insurer	
	SLI Investments LP	0.1%	Non-Insurer	
	SLI Investments LP	99.9%	Non-Insurer	
	6425411 Canada Inc.	100%	Non-Insurer	
	Sun Life Investments LLC	100%	Non-Insurer	
85-3387044	SLI US Real Estate Holdings, Inc.	100%	Non-Insurer	
	Sun Life Investment Holdings GP Inc.	100%	Non-Insurer	
	Sun Life Investment Holdings Limited Partnership	0.01%	Non-Insurer	
	Sun Life Investment Holdings Limited Partnership	99.99%	Non-Insurer	
	InfraRed European Infrastructure Income 4 (1) LP	8.22%	Non-Insurer	
	SLA Investment Holdings (U.S.) Inc.	100%	Non-Insurer	
	Sun Life Investment Holdings LP Inc.	100%	Non-Insurer	
87-3712150	BGO Prime Industrial Development Feeder LLC	14.813%	Non-Insurer	
	InfraRed Energy Transition Fund B LP	16.29%	Non-Insurer	
	InfraRed Infrastructure VI (1) LP	7.66%	Non-Insurer	
	Sun Life Malaysia Assurance Berhad	49%	Insurer	
	Sun Life Malaysia Takaful Berhad	49%	Insurer	

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Federal ID#	Entity Name	% of Voting Shares	Insurer / Non-Insurer	Note
	Sun Life of Canada (Netherlands) B.V.	100%	Non-Insurer	
	Sun Life Financial Philippine Holding Company, Inc.	100%	Non-Insurer	
	Sun Life Grepa Financial, Inc.	49%	Insurer	
	Grepa Realty Holdings Corporation	51%	Non-Insurer	
	Grepalife Asset Management Corporation	100%	Non-Insurer	
	Sun Life Investment Management and Trust Corporation	100%	Non-Insurer	
	Sun Life of Canada (Philippines), Inc.	100%	Insurer	
	Sun Life Asset Management Company, Inc.	100%	Non-Insurer	
	Sun Life Prosperity Achiever Fund 2028, Inc.	100%	Non-Insurer	
	Sun Life Prosperity Achiever Fund 2038, Inc.	100%	Non-Insurer	
	Sun Life Prosperity Achiever Fund 2048, Inc.	100%	Non-Insurer	
	Sun Life Prosperity Dollar Wellspring Fund, Inc.	20.41%	Non-Insurer	
	Sun Life Prosperity GS Fund, Inc.	17.44%	Non-Insurer	
	Sun Life Prosperity Peso Voyager Feeder Fund, Inc.	100%	Non-Insurer	
	Sun Life Prosperity Philippine Stock Index Fund, Inc.	12.14%	Non-Insurer	
	Sun Life Prosperity World Equity Index Feeder Fund, Inc.	100%	Non-Insurer	
	Sun Life Prosperity World Income Fund, Inc.	100%	Non-Insurer	
	Sun Life Financial Plans, Inc.	100%	Non-Insurer	
	Sun Life Vietnam Insurance Company Limited	100%	Insurer	

<sup>1</sup> BGO Holdings (Cayman), LP is ultimately owned 51.2% by Sun Life Financial Inc. through BK Canada Holding Inc.’s holding of 68.98% and MEP Global Holdings LP’s holding of 9.85% of Class A-2 interests in BentallGreenOak (Canada) Limited Partnership.

<sup>2</sup> Oregon Community Dental Care (“OCDC”) does not issue voting securities and control of OCDC is by way of appointment of directors. DentaQuest Care Group Management, LLC appoints all directors of OCDC.

<sup>3</sup> The entity is an excluded asset as per the Sun Life-Crescent agreement. Economics benefits, if any, are to CCG Legacy Holdings, not Crescent Capital Group LP. The asset is excluded from Sun Life's consolidated financial statements.