



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

ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2024
OF THE CONDITION AND AFFAIRS OF THE

Catholic Ladies of Columbia

NAIC Group Code 0000 NAIC Company Code 56316 Employer's ID Number 31-4144574
(Current) (Prior) State of Domicile or Port of Entry OH

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

Country of Domicile United States of America

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

Incorporated/Organized 03/12/1897 Commenced Business 03/12/1897
Statutory Home Office 700 Taylor Road, Suite 280, Gahanna, OH, US 43230

(City or Town, State, County and Zip Code) (Area Code) (Telephone Number)

Mail Address 700 Taylor Road, Suite 280, Gahanna, OH, US 43230
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records _____ 700 Taylor Road, Suite 200
(Street and Number)
Gahanna, OH, US 43230 _____, _____ 800-845-0494
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Internet Website Address www.TheCLC.org

Statutory Statement Contact: Loni Perkins, 800-845-0484

Iperkins@theclc.org (Name) _____, (Area Code) (Telephone Number)
(E-mail Address) _____ 614-944-4743 (FAX Number)

OFFICERS

PRESIDENT FAIRY WAGNER SECRETARY CHARISSE SHICK
CHIEF OPERATING OFFICER LONI A. PERKINS VICE PRESIDENT LYDIA RALL

OTHER

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) 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.

FAIRY WAGNER
PRESIDENT

LONI A. PERKINS
CHIEF OPERATING OFFICER

CHARISSE SHICK
SECRETARY

Subscribed and sworn to before me this
day of

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

ASSETS

	Current Year			Prior Year
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
1. Bonds (Schedule D)	109,920,787		109,920,787	127,689,448
2. Stocks (Schedule D):				
2.1 Preferred stocks	1,365		1,365	1,177
2.2 Common stocks			0	0
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens			0	0
3.2 Other than first liens			0	0
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$ encumbrances)			0	0
4.2 Properties held for the production of income (less \$ encumbrances)			0	0
4.3 Properties held for sale (less \$ encumbrances)			0	0
5. Cash (\$ 405,513 , Schedule E - Part 1), cash equivalents (\$ 415,344 , Schedule E - Part 2) and short-term investments (\$, Schedule DA)	820,857		820,857	846,385
6. Contract loans (including \$ premium notes)	1,054,393		1,054,393	1,089,631
7. Derivatives (Schedule DB)			0	0
8. Other invested assets (Schedule BA)			0	0
9. Receivables for securities			0	0
10. Securities lending reinvested collateral assets (Schedule DL)			0	0
11. Aggregate write-ins for invested assets	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11)	111,797,401	0	111,797,401	129,626,640
13. Title plants less \$ charged off (for Title insurers only)			0	0
14. Investment income due and accrued	1,245,253		1,245,253	1,457,243
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection	7,673	3,148	4,525	4,600
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
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	2,082		2,082	3,748
21. Furniture and equipment, including health care delivery assets (\$)	12	12	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			0	0
25. Aggregate write-ins for other-than-invested assets	87,274	87,274	0	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	113,139,695	90,434	113,049,261	131,092,232
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts			0	0
28. Total (Lines 26 and 27)	113,139,695	90,434	113,049,261	131,092,232
DETAILS OF WRITE-INS				
1101.				
1102.				
1103.				
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)	0	0	0	0
2501. Prepaid 401K Contribution Fund			0	0
2502. Deposit	4,185	4,185	0	0
2503. Prepaid Dues / Insurance	83,089	83,089	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)	87,274	87,274	0	0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Catholic Ladies of Columbia
LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Year	2 Prior Year
1. Aggregate reserve for life contracts \$ 108,641,192 (Exh. 5, Line 9999999) less \$ included in Line 6.3 (including \$ Modco Reserve)	108,641,192	119,270,137
2. Aggregate reserve for accident and health contracts (including \$ Modco Reserve)	0	0
3. Liability for deposit-type contracts (Exhibit 7, Line 14, Col. 1) (including \$ Modco Reserve)	76,469	89,367
4. Contract claims:		
4.1 Life (Exhibit 8, Part 1, Line 4.4, Col. 1 less Col. 6)	1,216,538	1,927,162
4.2 Accident and health (Exhibit 8, Part 1, Line 4.4, Col. 6)	0	0
5. Policyholders' dividends/refunds to members \$ and coupons \$ due and unpaid (Exhibit 4, Line 10)	0	0
6. Provision for policyholders' dividends, refunds to members and coupons payable in following calendar year - estimated amounts:		
6.1 Policyholders' dividends and refunds to members apportioned for payment (including \$ Modco)	4,000	4,000
6.2 Policyholders' dividends and refunds to members not yet apportioned (including \$ Modco)	4,000	4,000
6.3 Coupons and similar benefits (including \$ Modco)	0	0
7. Amount provisionally held for deferred dividend policies not included in Line 6		
8. Premiums and annuity considerations for life and accident and health contracts received in advance less \$ discount; including \$ 0 accident and health premiums (Exhibit 1, Part 1, Col. 1, sum of lines 4 and 14)	4,314	10,641
9. Contract liabilities not included elsewhere:		
9.1 Surrender values on canceled contracts		
9.2 Provision for experience rating refunds, including the liability of \$ accident and health experience rating refunds of which \$ 0 is for medical loss ratio rebate per the Public Health Service Act		
9.3 Other amounts payable on reinsurance, including \$ assumed and \$ ceded	0	5,609,415
9.4 Interest maintenance reserve (IMR, Line 6)	38,272	45,465
10. Commissions to agents due or accrued-life and annuity contracts \$ accident and health \$ and deposit-type contract funds \$		
11. Commissions and expense allowances payable on reinsurance assumed		
12. General expenses due or accrued (Exhibit 2, Line 12, Col. 7)	4,741	8,996
13. Transfers to Separate Accounts due or accrued (net) (including \$ accrued for expense allowances recognized in reserves, net of reinsured allowances)		
14. Taxes, licenses and fees due or accrued, excluding federal income taxes (Exhibit 3, Line 9, Col. 6)	0	3,227
15.1 Current federal and foreign income taxes, including \$ on realized capital gains (losses)		
15.2 Net deferred tax liability		
16. Unearned investment income		
17. Amounts withheld or retained by reporting entity as agent or trustee	456,918	522,259
18. Amounts held for agents' account, including \$ agents' credit balances		
19. Remittances and items not allocated		
20. Net adjustment in assets and liabilities due to foreign exchange rates		
21. Liability for benefits for employees and agents if not included above		
22. Borrowed money \$ and interest thereon \$		
23. Dividends to stockholders declared and unpaid		
24. Miscellaneous liabilities:		
24.01 Asset valuation reserve (AVR, Line 16, Col. 7)	876,113	864,583
24.02 Reinsurance in unauthorized and certified (\$ 0) companies	0	0
24.03 Funds held under reinsurance treaties with unauthorized and certified (\$) reinsurers		
24.04 Payable to parent, subsidiaries and affiliates		
24.05 Drafts outstanding		
24.06 Liability for amounts held under uninsured plans		
24.07 Funds held under coinsurance		
24.08 Derivatives	0	0
24.09 Payable for securities		
24.10 Payable for securities lending		
24.11 Capital notes \$ and interest thereon \$		
25. Aggregate write-ins for liabilities	0	0
26. Total liabilities excluding Separate Accounts business (Lines 1 to 25)	111,318,556	128,355,252
27. From Separate Accounts Statement		
28. Total liabilities (Lines 26 and 27)	111,318,556	128,355,252
29. Common capital stock		
30. Preferred capital stock		
31. Aggregate write-ins for other-than-special surplus funds	0	0
32. Surplus notes	0	0
33. Gross paid in and contributed surplus (Page 3, Line 33, Col. 2 plus Page 4, Line 51.1, Col. 1)		
34. Aggregate write-ins for special surplus funds	0	0
35. Unassigned funds (surplus)	1,730,705	2,736,981
36. Less treasury stock, at cost:		
36.1 shares common (value included in Line 29 \$)		
36.2 shares preferred (value included in Line 30 \$)		
37. Surplus (Total Lines 31+32+33+34+35-36) (including \$ in Separate Accounts Statement)	1,730,705	2,736,981
38. Totals of Lines 29, 30 and 37 (Page 4, Line 55)	1,730,705	2,736,981
39. Totals of Lines 28 and 38 (Page 2, Line 28, Col. 3)	113,049,262	131,092,233
DETAILS OF WRITE-INS		
2501.		
2502.		
2503.		
2598. Summary of remaining write-ins for Line 25 from overflow page	0	0
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	0	0
3101.		
3102.		
3103.		
3198. Summary of remaining write-ins for Line 31 from overflow page	0	0
3199. Totals (Lines 3101 through 3103 plus 3198)(Line 31 above)	0	0
3401.		
3402.		
3403.		
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	0	0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Catholic Ladies of Columbia
SUMMARY OF OPERATIONS

	1 Current Year	2 Prior Year
1. Premiums and annuity considerations for life and accident and health contracts	17,178,661	13,127,101
2. Considerations for supplementary contracts with life contingencies	0	0
3. Net investment income (Exhibit of Net Investment Income, Line 17)	4,307,408	5,136,011
4. Amortization of Interest Maintenance Reserve (IMR, Line 5)	(129,483)	(12,670)
5. Separate Accounts net gain from operations excluding unrealized gains or losses	0	0
6. Commissions and expense allowances on reinsurance ceded (Exhibit 1, Part 2, Line 26.1, Col. 1)	188,305	.....
7. Reserve adjustments on reinsurance ceded	0	0
8. Miscellaneous Income:		
8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts	0	0
8.2 Charges and fees for deposit-type contracts	0	0
8.3 Aggregate write-ins for miscellaneous income	57,377	20,546
9. Total (Lines 1 to 8.3)	21,602,268	18,270,988
10. Death benefits	502,774	453,284
11. Matured endowments (excluding guaranteed annual pure endowments)	7,378	2,500
12. Annuity benefits (Exhibit 8, Part 2, Line 6.4, Cols. 4 + 5 minus Analysis of Operations Summary, Line 18, Col. 1)	30,778,062	27,433,715
13. Disability benefits and benefits under accident and health contracts	0	0
14. Coupons, guaranteed annual pure endowments and similar benefits	0	0
15. Surrender benefits and withdrawals for life contracts	114,792	106,179
16. Group conversions	0	0
17. Interest and adjustments on contract or deposit-type contract funds	13,617	20,178
18. Payments on supplementary contracts with life contingencies	0	0
19. Increase in aggregate reserves for life and accident and health contracts	(10,628,944)	(10,223,713)
20. Totals (Lines 10 to 19)	20,787,680	17,792,143
21. Commissions on premiums, annuity considerations, and deposit-type contract funds (direct business only) (Exhibit 1, Part 2, Line 31, Col. 1)	712,980	507,701
22. Commissions and expense allowances on reinsurance assumed (Exhibit 1, Part 2, Line 26.2, Col. 1)	0	.....
23. General insurance expenses and fraternal expenses (Exhibit 2, Line 10, Columns 1, 2, 3, 4 and 6)	1,005,507	1,001,709
24. Insurance taxes, licenses and fees, excluding federal income taxes (Exhibit 3, Line 7, Cols. 1 + 2 + 3 + 5)	29,296	40,034
25. Increase in loading on deferred and uncollected premiums	0	0
26. Net transfers to or (from) Separate Accounts net of reinsurance	0	0
27. Aggregate write-ins for deductions	0	0
28. Totals (Lines 20 to 27)	22,535,463	19,341,586
29. Net gain from operations before dividends to policyholders, refunds to members and federal income taxes (Line 9 minus Line 28)	(933,194)	(1,070,598)
30. Dividends to policyholders and refunds to members	0	0
31. Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30)	(933,194)	(1,070,598)
32. Federal and foreign income taxes incurred (excluding tax on capital gains)	0	0
33. Net gain from operations after dividends to policyholders, refunds to members and federal income taxes and before realized capital gains or (losses) (Line 31 minus Line 32)	(933,194)	(1,070,598)
34. Net realized capital gains (losses) (excluding gains (losses) transferred to the IMR) less capital gains tax of \$	0	.....
35. Net income (Line 33 plus Line 34)	(933,194)	(1,070,598)
CAPITAL AND SURPLUS ACCOUNT		
36. Capital and surplus, December 31, prior year (Page 3, Line 38, Col. 2)	2,736,980	3,542,851
37. Net income (Line 35)	(933,194)	(1,070,598)
38. Change in net unrealized capital gains (losses) less capital gains tax of \$	(55,185)	(1,098)
39. Change in net unrealized foreign exchange capital gain (loss) .....	.....	.....
40. Change in net deferred income tax .....	.....	.....
41. Change in nonadmitted assets	(6,367)	17,087
42. Change in liability for reinsurance in unauthorized and certified companies .....	.....	.....
43. Change in reserve on account of change in valuation basis (increase) or decrease	0	0
44. Change in asset valuation reserve	(11,529)	(109,310)
45. Change in treasury stock (Page 3, Lines 36.1 and 36.2, Col. 2 minus Col. 1)	0	0
46. Surplus (contributed to) withdrawn from Separate Accounts during period .....	.....	.....
47. Other changes in surplus in Separate Accounts Statement .....	.....	.....
48. Change in surplus notes .....	.....	.....
49. Cumulative effect of changes in accounting principles .....	.....	.....
50. Capital changes:		
50.1 Paid in .....	.....	.....
50.2 Transferred from surplus (Stock Dividend) .....	.....	.....
50.3 Transferred to surplus .....	.....	.....
51. Surplus adjustment:		
51.1 Paid in	0	0
51.2 Transferred to capital (Stock Dividend) .....	.....	.....
51.3 Transferred from capital .....	.....	.....
51.4 Change in surplus as a result of reinsurance .....	.....	358,048
52. Dividends to stockholders .....	.....	.....
53. Aggregate write-ins for gains and losses in surplus	0	0
54. Net change in capital and surplus for the year (Lines 37 through 53)	(1,006,276)	(805,871)
55. Capital and surplus, December 31, current year (Lines 36 + 54) (Page 3, Line 38)	1,730,704	2,736,980
DETAILS OF WRITE-INS		
08.301. Misc. Income	1,649	2,005
08.302. Annuity W/D Penalty	55,728	18,541
08.303. .....	.....	.....
08.398. Summary of remaining write-ins for Line 8.3 from overflow page	0	0
08.399. Totals (Lines 08.301 through 08.303 plus 08.398)(Line 8.3 above)	57,377	20,546
2701. Pension Benefits .....	.....	0
2702. .....	.....	.....
2703. .....	.....	.....
2798. Summary of remaining write-ins for Line 27 from overflow page	0	0
2799. Totals (Lines 2701 through 2703 plus 2798)(Line 27 above)	0	0
5301. CHANGE IN UNASSIGNED FUNDS – PENSION REPORTING .....	.....	0
5302. .....	.....	.....
5303. .....	.....	.....
5398. Summary of remaining write-ins for Line 53 from overflow page	0	0
5399. Totals (Lines 5301 through 5303 plus 5398)(Line 53 above)	0	0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Catholic Ladies of Columbia
CASH FLOW

	1 Current Year	2 Prior Year
Cash from Operations		
1. Premiums collected net of reinsurance	17,173,149	13,122,769
2. Net investment income	5,218,418	5,892,156
3. Miscellaneous income	245,682	20,546
4. Total (Lines 1 through 3)	22,637,248	19,035,471
5. Benefit and loss related payments	37,736,664	27,820,135
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0
7. Commissions, expenses paid and aggregate write-ins for deductions	1,755,265	1,560,138
8. Dividends paid to policyholders	0	0
9. Federal and foreign income taxes paid (recovered) net of \$ tax on capital gains (losses)	0	0
10. Total (Lines 5 through 9)	39,491,929	29,380,273
11. Net cash from operations (Line 4 minus Line 10)	(16,854,680)	(10,344,802)
Cash from Investments		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds	17,187,351	10,020,057
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)	17,187,351	10,020,057
13. Cost of investments acquired (long-term only):		
13.1 Bonds	309,760	(45,701)
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)	309,760	(45,701)
14. Net increase/(decrease) in contract loans and premium notes	(35,238)	(52,842)
15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14)	16,912,829	10,118,601
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	(12,898)	(23,525)
16.5 Dividends to stockholders	0	0
16.6 Other cash provided (applied)	(70,781)	53,988
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)	(83,679)	30,463
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)	(25,530)	(195,739)
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year	846,383	1,042,122
19.2 End of year (Line 18 plus Line 19.1)	820,853	846,383

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

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ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Catholic Ladies of Columbia
ANALYSIS OF OPERATIONS BY LINES OF BUSINESS - SUMMARY

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Catholic Ladies of Columbia
ANALYSIS OF OPERATIONS BY LINES OF BUSINESS - INDIVIDUAL LIFE INSURANCE (b)

	1 Total	2 Industrial Life	3 Whole Life	4 Term Life	5 Indexed Life	6 Universal Life	7 Universal Life With Secondary Guarantees	8 Variable Life	9 Variable Universal Life	10 Credit Life (c)	11 Other Individual Life	12 YRT Mortality Risk Only
1. Premiums for life contracts ^(a)	187,686		154,206	33,480								
2. Considerations for supplementary contracts with life contingencies	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3. Net investment income	492,350		489,739	2,611								
4. Amortization of Interest Maintenance Reserve (IMR)	(14,800)		(14,722)	(78)								
5. Separate Accounts net gain from operations excluding unrealized gains or losses	0											
6. Commissions and expense allowances on reinsurance ceded	0											
7. Reserve adjustments on reinsurance ceded	0											
8. Miscellaneous Income:												
8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts	0		0	0	0	0	0	0	0	0	0	0
8.2 Charges and fees for deposit-type contracts	0		0	0	0	0	0	0	0	0	0	0
8.3 Aggregate write-ins for miscellaneous income	0		0	0	0	0	0	0	0	0	0	0
9. Totals (Lines 1 to 8.3)	665,235	0	629,223	36,013	0	0	0	0	0	0	0	0
10. Death benefits	502,774		502,774									
11. Matured endowments (excluding guaranteed annual pure endowments)	7,378		7,378									
12. Annuity benefits	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13. Disability benefits and benefits under accident and health contracts	0											
14. Coupons, guaranteed annual pure endowments and similar benefits	0											
15. Surrender benefits and withdrawals for life contracts	114,792		114,792									
16. Group conversions	0											
17. Interest and adjustments on contract or deposit-type contract funds	5,530		5,530									
18. Payments on supplementary contracts with life contingencies	0											
19. Increase in aggregate reserves for life and accident and health contracts	419,462		429,069	(9,607)								
20. Totals (Lines 10 to 19)	1,049,937	0	1,059,544	(9,607)	0	0	0	0	0	0	0	0
21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only)	29,996		29,834	162								XXX
22. Commissions and expense allowances on reinsurance assumed	0											
23. General insurance expenses	94,474		93,965	509								
24. Insurance taxes, licenses and fees, excluding federal income taxes	21,440		21,325	116								
25. Increase in loading on deferred and uncollected premiums	0											
26. Net transfers to or (from) Separate Accounts net of reinsurance	0		0	0	0	0	0	0	0	0	0	0
27. Aggregate write-ins for deductions	0	0	0	0	0	0	0	0	0	0	0	0
28. Totals (Lines 20 to 27)	1,195,847	0	1,204,668	(8,820)	0	0	0	0	0	0	0	0
29. Net gain from operations before dividends to policyholders, refunds to members and federal income taxes (Line 9 minus Line 28)	(530,612)	0	(575,445)	44,833	0	0	0	0	0	0	0	0
30. Dividends to policyholders and refunds to members	0											
31. Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30)	(530,612)	0	(575,445)	44,833	0	0	0	0	0	0	0	0
32. Federal income taxes incurred (excluding tax on capital gains)	0											
33. Net gain from operations after dividends to policyholders, refunds to members and federal income taxes and before realized capital gains or (losses) (Line 31 minus Line 32)	(530,612)	0	(575,445)	44,833	0	0	0	0	0	0	0	0
34. Policies/certificates in force end of year	0											
DETAILS OF WRITE-INS												
08.301.												
08.302.												
08.303.												
08.398. Summary of remaining write-ins for Line 8.3 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
08.399. Totals (Lines 08.301 through 08.303 plus 08.398) (Line 8.3 above)	0	0	0	0	0	0	0	0	0	0	0	0
2701.												
2702.												
2703.												
2798. Summary of remaining write-ins for Line 27 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
2799. Totals (Lines 2701 through 2703 plus 2798) (Line 27 above)	0	0	0	0	0	0	0	0	0	0	0	0

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

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

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

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Catholic Ladies of Columbia
ANALYSIS OF OPERATIONS BY LINES OF BUSINESS - GROUP LIFE INSURANCE (c)

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

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

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

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

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

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Catholic Ladies of Columbia
ANALYSIS OF OPERATIONS BY LINES OF BUSINESS - INDIVIDUAL ANNUITIES ^(a)

	1	Deferred				6	7
		2	3	4	5		
	Total	Fixed Annuities	Indexed Annuities	Variable Annuities with Guarantees	Variable Annuities Without Guarantees		
1. Premiums for individual annuity contracts	16,990,976	16,990,976					
2. Considerations for supplementary contracts with life contingencies	0	XXX	XXX	XXX	XXX		XXX
3. Net investment income	3,815,059	3,815,059					
4. Amortization of Interest Maintenance Reserve (IMR)	(114,682)	(114,682)					
5. Separate Accounts net gain from operations excluding unrealized gains or losses	0						
6. Commissions and expense allowances on reinsurance ceded	188,305	188,305					
7. Reserve adjustments on reinsurance ceded	0						
8. Miscellaneous Income:							
8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts	0						
8.2 Charges and fees for deposit-type contracts	0						
8.3 Aggregate write-ins for miscellaneous income	57,377	57,377	0	0	0	0	0
9. Totals (Lines 1 to 8.3)	20,937,034	20,937,034	0	0	0	0	0
10. Death benefits	0						
11. Matured endowments (excluding guaranteed annual pure endowments)	0						
12. Annuity benefits	30,778,084	30,778,084					
13. Disability benefits and benefits under accident and health contracts	0						
14. Coupons, guaranteed annual pure endowments and similar benefits	0						
15. Surrender benefits and withdrawals for life contracts	0						
16. Group conversions	0						
17. Interest and adjustments on contract or deposit-type contract funds	8,087	8,087					
18. Payments on supplementary contracts with life contingencies	0						
19. Increase in aggregate reserves for life and accident and health contracts	(11,048,406)	(11,048,406)					
20. Totals (Lines 10 to 19)	19,737,765	19,737,765	0	0	0	0	0
21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only)	682,985	682,985					
22. Commissions and expense allowances on reinsurance assumed	0						
23. General insurance expenses	743,841	743,841					
24. Insurance taxes, licenses and fees, excluding federal income taxes	3,022	3,022					
25. Increase in loading on deferred and uncollected premiums	0						
26. Net transfers to or (from) Separate Accounts net of reinsurance	0						
27. Aggregate write-ins for deductions	0	0	0	0	0	0	0
28. Totals (Lines 20 to 27)	21,167,613	21,167,613	0	0	0	0	0
29. Net gain from operations before dividends to policyholders, refunds to members and federal income taxes (Line 9 minus Line 28)	(230,579)	(230,579)	0	0	0	0	0
30. Dividends to policyholders and refunds to members	0						
31. Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30)	(230,579)	(230,579)	0	0	0	0	0
32. Federal income taxes incurred (excluding tax on capital gains)	0						
33. Net gain from operations after dividends to policyholders, refunds to members and federal income taxes and before realized capital gains or (losses) (Line 31 minus Line 32)	(230,579)	(230,579)	0	0	0	0	0
34. Policies/certificates in force end of year	0						
DETAILS OF WRITE-INS							
08.301. Annuity W/D Penalty	57,377	57,377					
08.302.							
08.303.							
08.398. Summary of remaining write-ins for Line 8.3 from overflow page	0	0	0	0	0	0	0
08.399. Totals (Lines 08.301 through 08.303 plus 08.398) (Line 8.3 above)	57,377	57,377	0	0	0	0	0
2701.							
2702.							
2703.							
2798. Summary of remaining write-ins for Line 27 from overflow page	0	0	0	0	0	0	0
2799. Totals (Lines 2701 through 2703 plus 2798) (Line 27 above)	0	0	0	0	0	0	0

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

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

Analysis of Operations by Lines of Business - Accident and Health
N O N E

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Catholic Ladies of Columbia
ANALYSIS OF INCREASE IN RESERVES DURING THE YEAR - INDIVIDUAL LIFE INSURANCE ^(a)

	1 Total	2 Industrial Life	3 Whole Life	4 Term Life	5 Indexed Life	6 Universal Life	7 Universal Life With Secondary Guarantees	8 Variable Life	9 Variable Universal Life	10 Credit Life ^(b) (N/A Fraternal)	11 Other Individual Life	12 YRT Mortality Risk Only
Involving Life or Disability Contingencies (Reserves) (Net of Reinsurance Ceded)												
1. Reserve December 31 of prior year	12,112,461	0	12,036,400	76,061	0	0	0	0	0	0	0	0
2. Tabular net premiums or considerations	125,344		104,195	21,149								
3. Present value of disability claims incurred	0											
4. Tabular interest	990,404		986,627	3,777								
5. Tabular less actual reserve released	0											
6. Increase in reserve on account of change in valuation basis	0											
6.1 Change in excess of VM-20 deterministic/stochastic reserve over net premium reserve	0	XXX								XXX		
7. Other increases (net)	0											
8. Totals (Lines 1 to 7)	13,228,209	0	13,127,222	100,987	0	0	0	0	0	0	0	0
9. Tabular cost	426,582		392,050	34,532								
10. Reserves released by death	158,746		158,746	0								
11. Reserves released by other terminations (net)	110,956		110,956	0								
12. Annuity, supplementary contract and disability payments involving life contingencies	0											
13. Net transfers to or (from) Separate Accounts	0											
14. Total Deductions (Lines 9 to 13)	696,284	0	661,752	34,532	0	0	0	0	0	0	0	0
15. Reserve December 31 of current year	12,531,925	0	12,465,470	66,455	0	0	0	0	0	0	0	0
Cash Surrender Value and Policy Loans												
16. CSV Ending balance December 31, current year	8,364,587		8,355,706	8,881								
17. Amount Available for Policy Loans Based upon Line 16 CSV	8,329,385		8,320,504	8,881								

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

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

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Catholic Ladies of Columbia
ANALYSIS OF INCREASE IN RESERVES DURING THE YEAR - GROUP LIFE INSURANCE ^(a)
(N/A Fraternal)

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

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

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

NONE

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Catholic Ladies of Columbia
ANALYSIS OF INCREASE IN RESERVES DURING THE YEAR - INDIVIDUAL ANNUITIES (a)

	1	Deferred				6	7
		2	3	4	5		
	Total	Fixed Annuities	Indexed Annuities	Variable Annuities with Guarantees	Variable Annuities without Guarantees		
Involving Life or Disability Contingencies (Reserves)							
(Net of Reinsurance Ceded)							
1. Reserve December 31 of prior year	107,355,885	107,355,885	0	0	0	0	0
2. Tabular net premiums or considerations	15,308,132	15,308,132					
3. Present value of disability claims incurred	XXX	XXX	XXX	XXX	XXX	XXX	XXX
4. Tabular interest	3,654,321	3,654,321					
5. Tabular less actual reserve released	560,428	560,428					
6. Increase in reserve on account of change in valuation basis	0						
7. Other increases (net)	450,000	450,000					
8. Totals (Lines 1 to 7)	127,328,766	127,328,766	0	0	0	0	0
9. Tabular cost	0						
10. Reserves released by death	XXX	XXX	XXX	XXX	XXX	XXX	XXX
11. Reserves released by other terminations (net)	0						
12. Annuity, supplementary contract and disability payments involving life contingencies	31,021,287	31,021,287					
13. Net transfers to or (from) Separate Accounts	0						
14. Total Deductions (Lines 9 to 13)	31,021,287	31,021,287	0	0	0	0	0
15. Reserve December 31 of current year	96,307,479	96,307,479	0	0	0	0	0
Cash Surrender Value and Policy Loans							
16. CSV Ending balance December 31, current year	0						
17. Amount Available for Policy Loans Based upon Line 16 CSV	0						

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

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Catholic Ladies of Columbia
ANALYSIS OF INCREASE IN RESERVES DURING THE YEAR - GROUP ANNUITIES ^(a)
(N/A Fraternal)

	1 Total	Deferred				6 Life Contingent Payout (Immediate and Annuitizations)	7 Other Annuities
		2 Fixed Annuities	3 Indexed Annuities	4 Variable Annuities with Guarantees	5 Variable Annuities without Guarantees		
Involving Life or Disability Contingencies (Reserves) (Net of Reinsurance Ceded)							
1. Reserve December 31 of prior year							
2. Tabular net premiums or considerations							
3. Present value of disability claims incurred							
4. Tabular interest							
5. Tabular less actual reserve released							
6. Increase in reserve on account of change in valuation basis							
7. Other increases (net)							
8. Totals (Lines 1 to 7)							
9. Tabular cost							
10. Reserves released by death							
11. Reserves released by other terminations (net)							
12. Annuity, supplementary contract and disability payments involving life contingencies							
13. Net transfers to or (from) Separate Accounts							
14. Total Deductions (Lines 9 to 13)							
15. Reserve December 31 of current year							
Cash Surrender Value and Policy Loans							
16. CSV Ending balance December 31, current year							
17. Amount Available for Policy Loans Based upon Line 16 CSV							

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

NONE

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Catholic Ladies of Columbia
EXHIBIT OF NET INVESTMENT INCOME

		1 Collected During Year	2 Earned During Year
1. U.S. Government bonds		(a)	
1.1 Bonds exempt from U.S. tax		(a)	
1.2 Other bonds (unaffiliated)		(a)	4,533,454
1.3 Bonds of affiliates		(a)	
2.1 Preferred stocks (unaffiliated)		(b)	165
2.11 Preferred stocks of affiliates		(b)	
2.2 Common stocks (unaffiliated)			
2.21 Common stocks of affiliates			
3. Mortgage loans		(c)	
4. Real estate		(d)	
5. Contract loans		50,508	50,508
6. Cash, cash equivalents and short-term investments		(e)	5,862
7. Derivative instruments		(f)	
8. Other invested assets			
9. Aggregate write-ins for investment income		0	0
10. Total gross investment income		4,801,978	4,590,030
11. Investment expenses			(g)
12. Investment taxes, licenses and fees, excluding federal income taxes			(g)
13. Interest expense			(h)
14. Depreciation on real estate and other invested assets			(i)
15. Aggregate write-ins for deductions from investment income			0
16. Total deductions (Lines 11 through 15)			282,622
17. Net investment income (Line 10 minus Line 16)			4,307,408
DETAILS OF WRITE-INS			
0901.			
0902.			
0903.			
0998. Summary of remaining write-ins for Line 9 from overflow page		0	0
0999. Totals (Lines 0901 through 0903 plus 0998) (Line 9, above)		0	0
1501.			
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 \$ 59,386 accrual of discount less \$ 758,406 amortization of premium and less \$ 0 paid for accrued interest on purchases.

(b) Includes \$ 0 accrual of discount less \$ 0 amortization of premium and less \$ 0 paid for accrued dividends on purchases.

(c) Includes \$ 0 accrual of discount less \$ 0 amortization of premium and less \$ 0 paid for accrued interest on purchases.

(d) Includes \$ for company's occupancy of its own buildings; and excludes \$ interest on encumbrances.

(e) Includes \$ accrual of discount less \$ amortization of premium and less \$ paid for accrued interest on purchases.

(f) Includes \$ accrual of discount less \$ amortization of premium.

(g) Includes \$ investment expenses and \$ investment taxes, licenses and fees, excluding federal income taxes, attributable to Segregated and Separate Accounts.

(h) Includes \$ interest on surplus notes and \$ interest on capital notes.

(i) Includes \$ 0 depreciation on real estate and \$ depreciation on other invested assets.

EXHIBIT OF CAPITAL GAINS (LOSSES)

	1	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	0	0	0	0
1.1 Bonds exempt from U.S. tax			0		
1.2 Other bonds (unaffiliated)	(136,677)	0	(136,677)	(55,373)	0
1.3 Bonds of affiliates	0	0	0	0	0
2.1 Preferred stocks (unaffiliated)	0	0	0	188	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		
4. Real estate			0		
5. Contract loans			0		
6. Cash, cash equivalents and short-term investments			0		
7. Derivative instruments			0		
8. Other invested assets			0	0	0
9. Aggregate write-ins for capital gains (losses)	0	0	0	0	0
10. Total capital gains (losses)	(136,677)	0	(136,677)	(55,185)	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

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Catholic Ladies of Columbia

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

	1 Total	2 Individual Life	3 Group Life	4 Individual Annuities	5 Group Annuities	6 Accident & Health	7 Fraternal	8 Other Lines of Business
FIRST YEAR (other than single)								
1. Uncollected	0							
2. Deferred and accrued	0							
3. Deferred , accrued and uncollected:								
3.1 Direct	0							
3.2 Reinsurance assumed	0							
3.3 Reinsurance ceded	0							
3.4 Net (Line 1 + Line 2)	0	0	0	0	0	0	0	0
4. Advance	0							
5. Line 3.4 - Line 4	0	0	0	0	0	0	0	0
6. Collected during year:								
6.1 Direct	18,735,627	6,806		18,728,821				
6.2 Reinsurance assumed	0							
6.3 Reinsurance ceded	1,737,845			1,737,845				
6.4 Net	16,997,781	6,806	0	16,990,976	0	0	0	0
7. Line 5 + Line 6.4	16,997,781	6,806	0	16,990,976	0	0	0	0
8. Prior year (uncollected + deferred and accrued - advance)	0	0	0	0	0	0	0	0
9. First year premiums and considerations:								
9.1 Direct	16,997,781	6,806		16,990,976				
9.2 Reinsurance assumed	0							
9.3 Reinsurance ceded	0							
9.4 Net (Line 7 - Line 8)	16,997,781	6,806	0	16,990,976	0	0	0	0
SINGLE								
10. Single premiums and considerations:								
10.1 Direct	26,633	26,633						
10.2 Reinsurance assumed	0							
10.3 Reinsurance ceded	0							
10.4 Net	26,633	26,633	0	0	0	0	0	0
RENEWAL								
11. Uncollected	7,673	7,673						
12. Deferred and accrued	0							
13. Deferred, accrued and uncollected:								
13.1 Direct	7,673	7,673						
13.2 Reinsurance assumed	0							
13.3 Reinsurance ceded	0							
13.4 Net (Line 11 + Line 12)	7,673	7,673	0	0	0	0	0	0
14. Advance	4,314	4,314						
15. Line 13.4 - Line 14	3,359	3,359	0	0	0	0	0	0
16. Collected during year:								
16.1 Direct	184,937	184,937						
16.2 Reinsurance assumed	0							
16.3 Reinsurance ceded	34,944	34,944						
16.4 Net	149,993	149,993	0	0	0	0	0	0
17. Line 15 + Line 16.4	153,353	153,353	0	0	0	0	0	0
18. Prior year (uncollected + deferred and accrued - advance)	(894)	(894)	0	0	0	0	0	0
19. Renewal premiums and considerations:								
19.1 Direct	189,191	189,191						
19.2 Reinsurance assumed	0							
19.3 Reinsurance ceded	34,944	34,944						
19.4 Net (Line 17 - Line 18)	154,247	154,247	0	0	0	0	0	0
TOTAL								
20. Total premiums and annuity considerations:								
20.1 Direct	17,213,605	222,629	0	16,990,976	0	0	0	0
20.2 Reinsurance assumed	0	0	0	0	0	0	0	0
20.3 Reinsurance ceded	34,944	34,944	0	0	0	0	0	0
20.4 Net (Lines 9.4 + 10.4 + 19.4)	17,178,661	187,686	0	16,990,976	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Catholic Ladies of Columbia

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

	1 Total	2 Individual Life	3 Group Life	4 Individual Annuities	5 Group Annuities	6 Accident & Health	7 Fraternal	8 Other Lines of Business
POLICYHOLDERS' DIVIDENDS, REFUNDS TO MEMBERS AND COUPONS APPLIED (included in Part 1)								
21. To pay renewal premiums	0							
22. All other	0							
REINSURANCE COMMISSIONS AND EXPENSE ALLOWANCES INCURRED								
23. First year (other than single):								
23.1 Reinsurance ceded	188,305			188,305				
23.2 Reinsurance assumed	0							
23.3 Net ceded less assumed	188,305	0	0	188,305	0	0	0	0
24. Single:								
24.1 Reinsurance ceded	0							
24.2 Reinsurance assumed	0							
24.3 Net ceded less assumed	0	0	0	0	0	0	0	0
25. Renewal:								
25.1 Reinsurance ceded	0							
25.2 Reinsurance assumed	0							
25.3 Net ceded less assumed	0	0	0	0	0	0	0	0
26. Totals:								
26.1 Reinsurance ceded (Page 6, Line 6)	188,305	0	0	188,305	0	0	0	0
26.2 Reinsurance assumed (Page 6, Line 22)	0	0	0	0	0	0	0	0
26.3 Net ceded less assumed	188,305	0	0	188,305	0	0	0	0
COMMISSIONS INCURRED (direct business only)								
27. First year (other than single)	699,013	20,936		678,076				
28. Single	2,428	2,428						
29. Renewal	11,540	6,631		4,908				
30. Deposit-type contract funds	0							
31. Totals (to agree with Page 6, Line 21)	712,980	29,995	0	682,985	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Catholic Ladies of Columbia
EXHIBIT 2 - GENERAL EXPENSES

	Insurance			5	6	7			
	1	Accident and Health							
		2	3						
	Life	Cost Containment	All Other	All Other Lines of Business	Investment	Fraternal			
1. Rent	67,492					11,910			
2. Salaries and wages	306,627					87,608			
3.11 Contributions for benefit plans for employees	86,688					43,804			
3.12 Contributions for benefit plans for agents						21,672			
3.21 Payments to employees under non-funded benefit plans						108,360			
3.22 Payments to agents under non-funded benefit plans						0			
3.31 Other employee welfare						0			
3.32 Other agent welfare						0			
4.1 Legal fees and expenses	45,753					8,074			
4.2 Medical examination fees	5,877					5,877			
4.3 Inspection report fees						0			
4.4 Fees of public accountants and consulting actuaries	114,223					114,223			
4.5 Expense of investigation and settlement of policy claims						0			
5.1 Traveling expenses	9,163					9,163			
5.2 Advertising	5,500					5,500			
5.3 Postage, express, telegraph and telephone	49,948					8,814			
5.4 Printing and stationery						58,762			
5.5 Cost or depreciation of furniture and equipment	2,996					0			
5.6 Rental of equipment	6,119					2,996			
5.7 Cost or depreciation of EDP equipment and software						6,119			
6.1 Books and periodicals						0			
6.2 Bureau and association fees	8,527					1,505			
6.3 Insurance, except on real estate	22,153					3,909			
6.4 Miscellaneous losses						0			
6.5 Collection and bank service charges	4,304					4,304			
6.6 Sundry general expenses	11,005					11,005			
6.7 Group service and administration fees						0			
6.8 Reimbursements by uninsured plans	6,870					6,870			
7.1 Agency expense allowance						0			
7.2 Agents' balances charged off (less \$ recovered)						0			
7.3 Agency conferences other than local meetings						0			
8.1 Official publication (Fraternal Benefit Societies Only)	XXX	XXX	XXX	XXX	XXX	17,580			
8.2 Expense of supreme lodge meetings (Fraternal Benefit Societies Only)	XXX	XXX	XXX	XXX	XXX	17,580			
9.1 Real estate expenses						0			
9.2 Investment expenses not included elsewhere					235,796	235,796			
9.3 Aggregate write-ins for expenses	85,069	0	0	0	0	6,121			
10. General expenses incurred	888,314	0	0	0	279,600	(b) 167,193			
11. General expenses unpaid Dec. 31, prior year	8,996					(a) 1,285,107			
12. General expenses unpaid Dec. 31, current year	4,741					8,996			
13. Amounts receivable relating to uninsured plans, prior year						4,741			
14. Amounts receivable relating to uninsured plans, current year						0			
15. General expenses paid during year (Lines 10+11-12-13-14)	842,569	0	0	0	279,600	167,193			
						1,289,362			
DETAILS OF WRITE-INS									
09.301. Marketing & Director Expense						19,274			
09.302. Computer & Data Processing						65,795			
09.303. Fraternal Activities, Donations						5,796			
09.398. Summary of remaining write-ins for Line 9.3 from overflow page	0	0	0	0	0	5,796			
09.399. Totals (Lines 09.301 through 09.303 plus 09.398) (Line 9.3 above)	85,069	0	0	0	0	6,121			
						91,190			

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

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

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

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

	Insurance			4	5	6			
	1	Accident and Health							
		Life							
1. Real estate taxes						0			
2. State insurance department licenses and fees	1,710					2,012			
3. State taxes on premiums						0			
4. Other state taxes, including \$ for employee benefits	87					87			
5. U.S. Social Security taxes	22,664					30,219			
6. All other taxes						0			
7. Taxes, licenses and fees incurred	24,461	0	0			32,318			
8. Taxes, licenses and fees unpaid Dec. 31, prior year	3,227					3,227			
9. Taxes, licenses and fees unpaid Dec. 31, current year						0			
10. Taxes, licenses and fees paid during year (Lines 7 + 8 - 9)	27,688	0	0	3,022		4,835			
						35,545			

EXHIBIT 4 - DIVIDENDS OR REFUNDS

	1	2
1. Applied to pay renewal premiums		
2. Applied to shorten the endowment or premium-paying period		
3. Applied to provide paid-up additions		
4. Applied to provide paid-up annuities		
5. Total Lines 1 through 4	0	0
6. Paid in cash		
7. Left on deposit		
8. Aggregate write-ins for dividend or refund options	0	0
9. Total Lines 5 through 8	0	0
10. Amount due and unpaid		
11. Provision for dividends or refunds payable in the following calendar year		4,000
12. Terminal dividends		
13. Provision for deferred dividend contracts		
14. Amount provisionally held for deferred dividend contracts not included in Line 13		
15. Total Lines 10 through 14	4,000	0
16. Total from prior year		4,000
17. Total dividends or refunds (Lines 9 + 15 - 16)	0	0
DETAILS OF WRITE-INS		
0801.		
0802.		
0803.		
0898. Summary of remaining write-ins for Line 8 from overflow page	0	0
0899. Totals (Lines 0801 through 0803 plus 0898) (Line 8 above)	0	0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Catholic Ladies of Columbia
EXHIBIT 5 - AGGREGATE RESERVE FOR LIFE CONTRACTS

1 Valuation Standard	2 Total ^(a)	3 Industrial	4 Ordinary	5 Credit (Group and Individual)	6 Group
0100001. AE 3%	1,304		1,304		
0100002. 1941 CSO 2.5%	165,438		165,438		
0100003. 1980 CSO 6.0%	2,949,640		2,949,640		
0100004. 1980 CSO 5.5%	3,013,304		3,013,304		
0100005. 1980 CSO 5.0%	328,341		328,341		
0100006. 1980 CSO 4.5%	2,550,370		2,550,370		
0100007. 2001 CSO 4.0%	1,257,778		1,257,778		
0100008. 2001 CSO 3.5%	1,271,459		1,271,459		
0100009. 2017 CSO 3.5%	72,614		72,614		
0100010. 2017 CSO 3.0%	699,691		699,691		
0100011. Unearned Premium Reserve	37,864		37,864		
0199997. Totals (Gross)	12,347,803	0	12,347,803	0	0
0199998. Reinsurance ceded	15,333		15,333		
0199999. Life Insurance: Totals (Net)	12,332,470	0	12,332,470	0	0
0200001. Annuities - Deferred	102,944,194	XXX	102,944,194	XXX	
0200002. Annuities - Immediate	43,185	XXX	43,185	XXX	
0299997. Totals (Gross)	102,987,379	XXX	102,987,379	XXX	0
0299998. Reinsurance ceded	7,429,490	XXX	7,429,490	XXX	
0299999. Annuities: Totals (Net)	95,557,889	XXX	95,557,889	XXX	0
0399998. Reinsurance ceded	0				
0399999. SCWLC: Totals (Net)	0	0	0	0	0
0400001. ADB	833		833		
0499997. Totals (Gross)	833	0	833	0	0
0499998. Reinsurance ceded	0				
0499999. Accidental Death Benefits: Totals (Net)	833	0	833	0	0
0599998. Reinsurance ceded	0				
0599999. Disability-Active Lives: Totals (Net)	0	0	0	0	0
0699998. Reinsurance ceded	0				
0699999. Disability-Disabled Lives: Totals (Net)	0	0	0	0	0
0700001. Asset Adequacy Testing	750,000		750,000		
0799997. Totals (Gross)	750,000	0	750,000	0	0
0799998. Reinsurance ceded	0				
0799999. Miscellaneous Reserves: Totals (Net)	750,000	0	750,000	0	0
.....
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.....
9999999. Totals (Net) - Page 3, Line 1	108,641,192	0	108,641,192	0	0

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

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Catholic Ladies of Columbia
EXHIBIT 5 - INTERROGATORIES

1.1 Has the reporting entity ever issued both participating and non-participating contracts? Yes [] No [X]
 1.2 If not, state which kind is issued.
 PARTICIPATING
 2.1 Does the reporting entity at present issue both participating and non-participating contracts? Yes [] No [X]
 2.2 If not, state which kind is issued.
 PARTICIPATING
 3. Does the reporting entity at present issue or have in force contracts that contain non-guaranteed elements? Yes [X] No []
 If so, attach a statement that contains the determination procedures, answers to the interrogatories and an actuarial opinion as described in the instructions.
 4. Has the reporting entity any assessment or stipulated premium contracts in force? Yes [] No [X]
 If so, state:
 4.1 Amount of insurance? \$ 0
 4.2 Amount of reserve? \$ 0
 4.3 Basis of reserve:

 4.4 Basis of regular assessments:

 4.5 Basis of special assessments:

 4.6 Assessments collected during the year \$ 0
 5. If the contract loan interest rate guaranteed in any one or more of its currently issued contracts is less than 5%, not in advance, state the contract loan rate guarantees on any such contracts.

 6. Does the reporting entity hold reserves for any annuity contracts that are less than the reserves that would be held on a standard basis? Yes [] No [X]
 6.1 If so, state the amount of reserve on such contracts on the basis actually held: \$ 0
 6.2 That would have been held (on an exact or approximate basis) using the actual ages of the annuitants; the interest rate(s) used in 6.1; and the same mortality basis used by the reporting entity for the valuation of comparable annuity benefits issued to standard lives. If the reporting entity has no comparable annuity benefits for standard lives to be valued, the mortality basis shall be the table most recently approved by the state of domicile for valuing individual annuity benefits: \$ 0
 Attach statement of methods employed in their valuation.
 7. Does the reporting entity have any Synthetic GIC contracts or agreements in effect as of December 31 of the current year? Yes [] No [X]
 7.1 If yes, state the total dollar amount of assets covered by these contracts or agreements \$ 0
 7.2 Specify the basis (fair value, amortized cost, etc.) for determining the amount:

 7.3 State the amount of reserves established for this business: \$ 0
 7.4 Identify where the reserves are reported in the blank:

 8. Does the reporting entity have any Contingent Deferred Annuity contracts or agreements in effect as of December 31 of the current year? Yes [] No [X]
 8.1 If yes, state the total dollar amount of account value covered by these contracts or agreements: \$ 0
 8.2 State the amount of reserves established for this business: \$ 0
 8.3 Identify where the reserves are reported in the blank:

 9. Does the reporting entity have any Guaranteed Lifetime Income Benefit contracts, agreements or riders in effect as of December 31 of the current year? Yes [] No [X]
 9.1 If yes, state the total dollar amount of any account value associated with these contracts, agreements or riders: \$ 0
 9.2 State the amount of reserves established for this business: \$ 0
 9.3 Identify where the reserves are reported in the blank:

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

1 Description of Valuation Class	Valuation Basis		4 Increase in Actuarial Reserve Due to Change
	2 Changed From	3 Changed To	
NONE			
9999999 - Total (Column 4, only)			

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

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

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

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

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Catholic Ladies of Columbia

EXHIBIT 7 - DEPOSIT TYPE CONTRACTS

	1 Total	2 Guaranteed Interest Contracts	3 Annuities Certain	4 Supplemental Contracts	5 Dividend Accumulations or Refunds	6 Premium and Other Deposit Funds
1. Balance at the beginning of the year before reinsurance	89,367	0	50,445	0	38,922	0
2. Deposits received during the year	0					
3. Investment earnings credited to the account	9,979		8,044		1,935	
4. Other net change in reserves	0					
5. Fees and other charges assessed	0					
6. Surrender charges	0					
7. Net surrender or withdrawal payments	22,877		22,371		506	
8. Other net transfers to or (from) Separate Accounts	0					
9. Balance at the end of current year before reinsurance (Lines 1+2+3+4-5-6-7-8) (a)	76,469	0	36,118	0	40,351	0
10. Reinsurance balance at the beginning of the year	0	0	0	0	0	0
11. Net change in reinsurance assumed	0					
12. Net change in reinsurance ceded	0					
13. Reinsurance balance at the end of the year (Lines 10+11-12)	0	0	0	0	0	0
14. Net balance at the end of current year after reinsurance (Lines 9 + 13)	76,469	0	36,118	0	40,351	0

(a) FHLB Funding Agreements:

1. Reported as GICs (captured in column 2) \$
2. Reported as Annuities Certain (captured in column 3) \$
3. Reported as Supplemental Contracts (captured in column 4) \$
4. Reported as Dividend Accumulations or Refunds (captured in column 5) \$
5. Reported as Premium or Other Deposit Funds (captured in column 6) \$
6. Total Reported as Deposit-Type Contracts (captured in column 1): (Sum of Lines 1 through 5) . \$

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Catholic Ladies of Columbia
EXHIBIT 8 - CLAIMS FOR LIFE AND ACCIDENT AND HEALTH CONTRACTS

PART 1 - Liability End of Current Year

	1 Total	2 Individual Life	3 Group Life	4 Individual Annuities	5 Group Annuities	6 Accident & Health	7 Fraternal	8 Other Lines of Business
1. Due and unpaid:								
1.1 Direct	1,196,538	120,564		1,075,974				
1.2 Reinsurance assumed	0	0						
1.3 Reinsurance ceded	0	0						
1.4 Net	1,196,538	120,564	0	1,075,974	0	0	0	0
2. In course of settlement:								
2.1 Resisted	0	0						
2.11 Direct	0	0						
2.12 Reinsurance assumed	0	0						
2.13 Reinsurance ceded	0	0						
2.14 Net	0	(b) 0	(b) 0	(b) 0	0	0	0	0
2.2 Other	0	0						
2.21 Direct	0	0						
2.22 Reinsurance assumed	0	0						
2.23 Reinsurance ceded	0	0						
2.24 Net	0	(b) 0	(b) 0	(b) 0	0	(b) 0	0	0
3. Incurred but unreported:								
3.1 Direct	20,000	20,000						
3.2 Reinsurance assumed	0	0						
3.3 Reinsurance ceded	0	0						
3.4 Net	20,000	(b) 20,000	(b) 0	(b) 0	0	(b) 0	0	0
4. TOTALS	1,216,538	140,564	0	1,075,974	0	0	0	0
4.1 Direct	1,216,538	140,564	0	1,075,974	0	0	0	0
4.2 Reinsurance assumed	0	0	0	0	0	0	0	0
4.3 Reinsurance ceded	0	0	0	0	0	0	0	0
4.4 Net	1,216,538	(a) 140,564	(a) 0	1,075,974	0	0	0	0

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

(b) Include only portion of disability and accident and health claim liabilities applicable to assumed "accrued" benefits. Reserves (including reinsurance assumed and net of reinsurance ceded) for unaccrued benefits for

Individual Life \$ Group Life \$, and Individual Annuities \$

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

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Catholic Ladies of Columbia

EXHIBIT 8 - CLAIMS FOR LIFE AND ACCIDENT AND HEALTH CONTRACTS**PART 2 - Incurred During the Year**

	1 Total	2 Individual Life (a)	3 Group Life (b)	4 Individual Annuities	5 Group Annuities	6 Accident & Health	7 Fraternal	8 Other Lines of Business
1. Settlements During the Year:								
1.1 Direct	31,991,460	430,239		31,561,221				
1.2 Reinsurance assumed	0							
1.3 Reinsurance ceded	0							
1.4 Net	(c) 31,991,460	430,239	0	31,561,221	0	0	0	0
2. Liability December 31, current year from Part 1:								
2.1 Direct	1,216,538	140,564	0	1,075,974	0	0	0	0
2.2 Reinsurance assumed	0	0	0	0	0	0	0	0
2.3 Reinsurance ceded	0	0	0	0	0	0	0	0
2.4 Net	1,216,538	140,564	0	1,075,974	0	0	0	0
3. Amounts recoverable from reinsurers December 31, current year	0							
4. Liability December 31, prior year:								
4.1 Direct	1,927,162	68,029	0	1,859,133	0	0	0	0
4.2 Reinsurance assumed	0	0	0	0	0	0	0	0
4.3 Reinsurance ceded	0	0	0	0	0	0	0	0
4.4 Net	1,927,162	68,029	0	1,859,133	0	0	0	0
5. Amounts recoverable from reinsurers December 31, prior year	0							
6. Incurred Benefits								
6.1 Direct	31,280,836	502,774	0	30,778,062	0	0	0	0
6.2 Reinsurance assumed	0	0	0	0	0	0	0	0
6.3 Reinsurance ceded	0	0	0	0	0	0	0	0
6.4 Net	31,280,836	502,774	0	30,778,062	0	0	0	0

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

\$..... in Line 6.1, and \$ 7,378 in Line 6.4.

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

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

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

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Catholic Ladies of Columbia
EXHIBIT OF NON-ADMITTED ASSETS

	1 Current Year Total Nonadmitted Assets	2 Prior Year Total Nonadmitted Assets	3 Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1. Bonds (Schedule D) .....	.....	.....	0
2. Stocks (Schedule D):			
2.1 Preferred stocks .....	.....	.....	0
2.2 Common stocks .....	.....	.....	0
3. Mortgage loans on real estate (Schedule B):			
3.1 First liens .....	.....	.....	0
3.2 Other than first liens.....	.....	.....	0
4. Real estate (Schedule A):			
4.1 Properties occupied by the company .....	.....	.....	0
4.2 Properties held for the production of income.....	.....	.....	0
4.3 Properties held for sale .....	.....	.....	0
5. Cash (Schedule E - Part 1), cash equivalents (Schedule E - Part 2) and short-term investments (Schedule DA) .....	.....	.....	0
6. Contract loans .....	.....	.....	0
7. Derivatives (Schedule DB) .....	.....	.....	0
8. Other invested assets (Schedule BA) .....	.....	.....	0
9. Receivables for securities .....	.....	.....	0
10. Securities lending reinvested collateral assets (Schedule DL) .....	.....	.....	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
14. Investment income due and accrued .....	.....	.....	0
15. Premiums and considerations:			
15.1 Uncollected premiums and agents' balances in the course of collection	3,148	3,887	739
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due .....	.....	.....	0
15.3 Accrued retrospective premiums and contracts subject to redetermination .....	.....	.....	0
16. Reinsurance:			
16.1 Amounts recoverable from reinsurers .....	.....	.....	0
16.2 Funds held by or deposited with reinsured companies .....	.....	.....	0
16.3 Other amounts receivable under reinsurance contracts .....	.....	.....	0
17. Amounts receivable relating to uninsured plans .....	.....	.....	0
18.1 Current federal and foreign income tax recoverable and interest thereon .....	.....	.....	0
18.2 Net deferred tax asset .....	.....	.....	0
19. Guaranty funds receivable or on deposit .....	.....	.....	0
20. Electronic data processing equipment and software .....	.....	.....	0
21. Furniture and equipment, including health care delivery assets	12	1,342	1,330
22. Net adjustment in assets and liabilities due to foreign exchange rates .....	.....	.....	0
23. Receivables from parent, subsidiaries and affiliates .....	.....	.....	0
24. Health care and other amounts receivable .....	.....	.....	0
25. Aggregate write-ins for other-than-invested assets	87,274	78,838	(8,436)
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	90,434	84,067	(6,367)
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts .....	.....	.....	0
28. Total (Lines 26 and 27)	90,434	84,067	(6,367)
DETAILS OF WRITE-INS			
1101. .....	.....	.....	0
1102. .....	.....	.....	0
1103. .....	.....	.....	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. Prepaid Pension .....	.....	.....	0
2502. Prepaid Expenses & Deposits	4,185	4,185	0
2503. Prepaid Insurance	83,089	74,653	(8,436)
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)	87,274	78,838	(8,436)

NOTES TO FINANCIAL STATEMENTS

Note 1 – Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

	SSAP #	F/S Page	F/S Line #	Current Year to Date	2023
NET INCOME					
(1) Catholic Ladies of Columbia Company state basis (Page 4, Line 35, Columns 1 & 3)	XXX	XXX	XXX	\$ (933,194)	\$ (1,070,599)
(2) State Prescribed Practices that are an increase/(decrease) from NAIC SAP				\$	\$
(3) State Permitted Practices that are an increase/(decrease) from NAIC SAP				\$	\$
(4) NAIC SAP (1 – 2 – 3 = 4)	XXX	XXX	XXX	\$ (933,194)	\$ (1,070,599)
SURPLUS					
(5) Catholic Ladies of Columbia Company state basis (Page 3, line 38, Columns 1 & 2)	XXX	XXX	XXX	\$ 1,730,705	\$ 2,736,981
(6) State Prescribed Practices that are an increase/(decrease) from NAIC SAP				\$	\$
(7) State Permitted Practices that are an increase/(decrease) from NAIC SAP				\$	\$
(8) NAIC SAP (5 – 6 – 7 = 8)	XXX	XXX	XXX	\$ 1,730,705	\$ 2,736,981

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

No significant changes

C. Accounting Policy

- (1) Basis for Short-Term Investments
No significant changes
- (2) Basis for Bonds, Mandatory Convertible Securities, SVO-Identified Investments and Amortization Method
Bonds: Not backed by other loans at amortized cost using the interest method: Loan-backed bonds and structured securities at amortized cost using the interest method including anticipated prepayments at the date of purchase; significant changes in estimated cash flows from the original purchase assumptions are accounted for using the composite method. Bonds rated NAIC Class 6 are valued at market.
- (3) Basis for Common Stocks
No significant changes
- (4) Basis for Preferred Stocks
No significant changes
- (5) Basis for Mortgage Loans
No significant changes
- (6) Basis for Loan-Backed Securities and Adjustment Methodology
Bonds: Not backed by other loans at amortized cost using the interest method: Loan-backed bonds and structured securities at amortized cost using the interest method including anticipated prepayments at the date of purchase; significant changes in estimated cash flows from the original purchase assumptions are accounted for using the composite method. Bonds rated NAIC Class 6 are valued at market.
- (7) Accounting Policies for Investments in Subsidiaries, Controlled and Affiliated Entities
No significant changes
- (8) Accounting Policies for Investments in Joint Ventures, Partnerships and Limited Liability Entities
No significant changes
- (9) Accounting Policies for Derivatives
No significant changes
- (10) Anticipated Investment Income Used in Premium Deficiency Calculation
No significant changes
- (11) Management's Policies and Methodologies for Estimating Liabilities for Losses and Loss/Claim Adjustment Expenses
No significant changes
- (12) Changes in the Capitalization Policy and Predefined Thresholds from Prior Period
No significant changes
- (13) Method Used to Estimate Pharmaceutical Rebate Receivables
No significant changes

D. Going Concern

N/A

Note 2 – Accounting Changes and Corrections of Errors

No significant changes

Note 3 – Business Combinations and Goodwill

No significant changes

Note 4 – Discontinued Operations

No significant changes

Note 5 – Investments

A. Mortgage Loans, including Mezzanine Real Estate Loans

NOTES TO FINANCIAL STATEMENTS

No significant changes

B. Debt Restructuring

No significant changes

C. Reverse Mortgages

No significant changes

D. Loan-Backed Securities

(4) All impaired securities (fair value is less than cost or amortized cost) for which an other-than-temporary impairment has not been recognized in earnings as a realized loss (including securities with a recognized other-than-temporary impairment for non-interest related declines when a non-recognized interest related impairment remains):

a. The aggregate amount of unrealized losses:	1. Less than 12 Months	\$ 576.02
	2. 12 Months or Longer	\$ 60,539.06
b. The aggregate related fair value of securities with unrealized losses:	1. Less than 12 Months	\$ 92,202.00
	2. 12 Months or Longer	\$ 428,519.14

E. Dollar Repurchase Agreements and/or Securities Lending Transactions

No significant changes

F. Repurchase Agreements Transactions Accounted for as Secured Borrowing

No significant changes

G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing

No significant changes

H. Repurchase Agreements Transactions Accounted for as a Sale

No significant changes

I. Reverse Repurchase Agreements Transactions Accounted for as a Sale

No significant changes

J. Real Estate

No significant changes

K. Low-Income Housing Tax Credits (LIHTC)

No significant changes

L. Restricted Assets

No significant changes

M. Working Capital Finance Investments

No significant changes

N. Offsetting and Netting of Assets and Liabilities

No significant changes

O. 5GI Securities

No significant changes

P. Short Sales

No significant changes

Q. Prepayment Penalty and Acceleration Fees

General Account

1) Number of Cusips	19
2) Aggregate Amount of Investment Income	\$ 78,867.95

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

No significant changes

S. Aggregate Collateral Loans by Qualifying Investment Collateral

NOTES TO FINANCIAL STATEMENTS

Not applicable

Note 6 – Joint Ventures, Partnerships and Limited Liability Companies

No significant changes

Note 7 – Investment Income

No significant changes

Note 8 – Derivative Instruments

No significant changes

Note 9 – Income Taxes

No significant changes

Note 10 – Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties

No significant changes

Note 11 – Debt

A. Debt Including Capital Notes

No significant changes

B. FHLB (Federal Home Loan Bank) Agreements

No significant changes

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

A. Defined Benefit Plan

The society no longer sponsors non-contributory defined benefit pension plans covering U.S. employees as of December 31, 2021.

(1) Change in Benefit Obligation

No significant changes

(2) Change in Plan Assets

No significant changes

(3) Funded Status

No significant changes

(4) Components of Net Periodic Benefit Cost

	Pension Benefits		Post Retirement Benefits		Special or Contractual Benefits per SSAP No. 11	
	Current Year to Date	2023	Current Year to Date	2023	Current Year to Date	2023
a. Service cost	\$	\$	\$	\$	\$	\$
b. Interest cost						
c. Expected Return on plan assets						
d. Transition asset or obligation						
e. Gains and losses						
f. Prior service cost or credit						
g. Gain or loss recognized due to a settlement curtailment						
h. Total net periodic benefit cost	\$	\$	\$	\$	\$	\$

(5) Amounts in Unassigned Funds (Surplus) Recognized as Components of Net Period Benefit Cost

No significant changes

(6) Amounts in Unassigned Funds (Surplus) That Have Not Yet Been Recognized as Components of Net Period Benefit Cost

No significant changes

(7) Weighted Average Assumptions Used to Determine Net Periodic Benefit Cost as of Current Period

No significant changes

(8) Accumulated Benefit Obligation for Defined Benefit Pension Plans

No significant changes

(9) For Postretirement Benefits Other Than Pensions, the Assumed Health Care Cost Trend Rate(s)

No significant changes

(10) Estimated Future Payments, Which Reflect Unexpected Future Service

No significant changes

(11) Estimate of Contributions Expected to be Paid to the Plan

NOTES TO FINANCIAL STATEMENTS

- No significant changes
- (12) Amounts and Types of Securities Included in Plan Assets
 - No significant changes
- (13) Alternative Method Used to Amortize Prior Service Amounts or Net Gains and Losses
 - No significant changes
- (14) Substantive Comment Used to Account for Benefit Obligations
 - No significant changes
- (15) Cost of Providing Special or Contractual Termination Benefits Recognized
 - No significant changes
- (16) Reasons for Significant Gains/Losses Related to Changes in Defined Benefit Obligation and any Other Significant Change in the Benefit Obligations Assets Not Otherwise Apparent
 - No significant changes
- (17) Accumulated Postretirement and Pension Benefit Obligation and Fair Value of Plan Assets for Defined Postretirement and Pension Benefit Plans
 - No significant changes
- (18) Full Transition Surplus Impact of SSAP 102
 - No significant changes

- B. Investment Policies and Strategies
 - No significant changes
- C. Fair Value of Plan Assets
 - No significant changes
- D. Basis Used to Determine Expected Long-Term Rate-of-Return
 - No significant changes
- E. Defined Contribution Plans
 - No significant changes
- F. Multiemployer Plans
 - No significant changes
- G. Consolidated/Holding Company Plans
 - No significant changes
- H. Postemployment Benefits and Compensated Absences
 - No significant changes
- I. Impact of Medicare Modernization Act on Postretirement Benefits (INT 04-17)
 - No significant changes

Note 13 – Capital and Surplus, Shareholder’s Dividend Restrictions and Quasi-Reorganizations

No significant changes

Note 14 – Liabilities, Contingencies and Assessments

No significant changes

Note 15 – Leases

No significant changes

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

No significant changes

Note 17 – Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

- A. Transfers of Receivables Reported as Sales N/A
- B. Transfer and Servicing of Financial Assets N/A
- C. Wash Sales N/A

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

No significant changes

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

No significant changes

NOTES TO FINANCIAL STATEMENTS

Note 20 – Fair Value Measurements

A. Fair Value Measurements

(1) Fair Value Measurements at Reporting Date

Description for Each Type of Asset or Liability	Level 1	Level 2	Level 3	Net Asset Value (NAV)	Total
Assets at Fair Value					
PREFERRED STOCK – INDUSTRIAL & MISCELLANEOUS	\$	\$ 43,216.00	\$	\$	\$ 43,216.00
CASH AND CASH EQUIVALENTS – U.S. GOVERNMENT OBLIGATIONS	\$ 415,343.69	\$	\$	\$	\$ 415,343.69
Total	\$ 415,343.69	\$ 43,216.00	\$	\$	\$ 458,559.69
Liabilities at Fair Value					
	\$	\$	\$	\$	\$
Total	\$	\$	\$	\$	\$

(2) Fair Value Measurements in (Level 3) of the Fair Value Hierarchy

Description	Beginning Balance	Transfers Into Level 3	Transfers Out of Level 3	Total Gains and (Losses) Included in Net Income	Total Gains and (Losses) Included in Surplus	Purchases	Issuances	Sales	Settlements	Ending Balance as of Current Period
a. Assets	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
Total	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
b. Liabilities	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
Total	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$

(3) Policies when Transfers Between Levels are Recognized

NONE.

(4) Description of Valuation Techniques and Inputs Used in Fair Value Measurement

NONE.

(5) Fair Value Disclosures for Derivative Assets and Liabilities

NONE.

B. Fair Value Reporting under SSAP 100 and Other Accounting Pronouncements

C. Fair Value Level

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Not Practicable (Carrying Value)
BOND	92,683,160.03	109,394,323.98	0	92,683,160.03	0	0	0
CMO	477,505.14	483,246.87	0	477,505.14	0	0	0
MBS	43,216.00	43,216.00	0	43,216.00	0	0	0
PERPETUAL PREFERRED STOCK	1,365	1,365	0	1,365	0	0	0
COMMON STOCK	0	0	0	0	0	0	0
CASH AND CASH EQUIV.	415,343.69	415,343.69	415,343.69	0	0	0	0

D. Not Practicable to Estimate Fair Value N/A

Type of Class or Financial Instrument	Carrying Value	Effective Interest Rate	Maturity Date	Explanation
	\$			

E. NAV Practical Expedient Investments N/A

Note 21 – Other Items

A. Unusual or Infrequent Items

The Society (“Cedant”) entered into a Coinsurance treaty with Heritage Life Insurance Company (“Reinsurer”), an authorized reinsurer, as of January 1, 2024. The treaty reinsures 80% of new business flows. The Reinsurer will pay the Cedant a prorate administration fee of \$3.33 per policy on a monthly basis, as the Cedant will retain management of the policies. The agreement calls for a monthly settlement of the activity of the business block; 80% of claims will be reimbursed.

B. Troubled Debt Restructuring Debtors

NONE

C. Other Disclosures

NONE

D. Business Interruption Insurance Recoveries

NOTES TO FINANCIAL STATEMENTS

The Company does not believe it has any assets which may become uncollectible which have not already been disclosed and non-admitted in this statement.

- E. State Transferable and Non-Transferable Tax Credits
NONE
- F. Subprime Mortgage Related Risk Exposure
NONE
- G. Retained Assets
NONE
- H. Insurance-Linked Securities (ILS) Contracts
Not applicable
- I. The Amount that Could be Realized on Life Insurance Where the Reporting Entity is Owner and Beneficiary or has Otherwise Obtained Rights to Control the Policy
Not applicable
- J. Reporting entities admitting net negative (disallowed) IMR are required to complete the following disclosures in the quarterly and annual financial statements.
Not applicable

Note 22 – Events Subsequent

Subsequent events have been considered through for these statutory financial statements which are to be issued on. There were no events occurring subsequent to the end of the quarter that merited recognition or disclosure in these statements.

Note 23 – Reinsurance

- A. Ceded Reinsurance Report

Section 1 – General Interrogatories

- (1) Are any of the reinsurers listed in 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]
- (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]

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]
- (2) Does the reporting entity have any reinsurance agreements in effect such that the amount of losses paid or accrued through the statement date 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]

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. \$ -
- (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 [X] No []

If yes, what is the amount of reinsurance credits, whether an asset or a reduction of liability, taken for such new agreements or amendments? **\$1,639,180**

- B. Uncollectible Reinsurance
NONE
- C. Commutation of Ceded Reinsurance Reflected in Income and Expenses
NONE
- D. Certified Reinsurer Rating Downgraded or Status Subject to Revocation
NONE
- E. Reinsurance of variable annuity contracts/certificates with an affiliated captive reinsurer
NONE
- F. Reinsurance Agreement with Affiliated Captive Reinsurer
NONE
- G. Ceding Entities That Utilize Captive Reinsurers to Assume Reserves Subject to the XXX/AXXX Captive Framework
NONE
- H. Reinsurance Credits
NONE

NOTES TO FINANCIAL STATEMENTS

Note 24 – Retrospectively Rated Contracts and Contracts Subject to Redetermination

- A. Method Used by the Reporting Entity to Estimate Accrued Retrospective Premium Adjustments
Not applicable
- B. Disclose Whether Accrued Retrospective Premiums are Recorded Through Written Premium or as an Adjustment to Earned Premium
Not applicable
- C. Disclose the Amount of Net Premiums Written Subject to Retrospective Rating Features
Not applicable
- D. Medical Loss Ratio Rebates Required Pursuant to the Public Health Service Act
Not applicable
- E. Risk Sharing Provisions of the Affordable Care Act N/A
 - (1) Did the reporting entity write accident and health insurance premium which is subject to the Affordable Care Act risk sharing provisions? NO

Note 25 – Change in Incurred Losses and Loss Adjustment Expenses

- A. Change in Incurred Losses and Loss Adjustment Expenses
None - The Society has no change in incurred losses or loss adjustment expenses.
- B. Information about Significant Changes in Methodologies and Assumptions

Note 26 – Intercompany Pooling Arrangements

No significant changes

Note 27 – Structured Settlements

No significant changes

Note 28 – Health Care Receivables

No significant changes

Note 29 – Participating Policies

No significant changes

Note 30 – Premium Deficiency Reserves

No significant changes

Note 31 – Reserves for Life Contracts and Deposit-Type Contracts

No significant changes

Note 32 – Analysis of Annuity Actuarial Reserves and Deposit Liabilities by Withdrawal Characteristics

A. INDIVIDUAL ANNUITIES:	General Accounts	Separate Account with Guarantees	Separate Account Nonguaranteed	Total	% of Total
1. Subject to Discretionary Withdrawal: (a) With market value adjustment	\$	\$	\$	\$	%
(b) At book value less current surrender charge of 5% or more	24,858,205			24,858,205	23.78%
(c) At fair value					%
(d) Total with market value adjustment or at fair value (total of a through c)	\$ 24,858,205	\$	\$	24,858,205	23.78%
(e) At book value without adjustment (minimal or no charge or adjustment)	79,633,960			79,633,960	76.18%
2. Not subject to discretionary withdrawal	43,185			43,185	0.04%
3. Total (gross: direct + assumed)	104,535,350			104,535,350	100.0%
4. Reinsurance ceded	7,429,490			7,429,490	
5. Total (net)* (3) - (4)	\$ 97,105,861	\$	\$	\$ 97,105,861	

NOTES TO FINANCIAL STATEMENTS

6. Amount included in A(1)b above that will move to A(1)e for the first time within the year after the statement date	\$ 1,072,381	\$	\$	\$ 1,072,381	
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C.	DEPOSIT-TYPE CONTRACTS (no life contingencies)	General Accounts	Separate Account with Guarantees	Separate Account Nonguaranteed	Total	% of Total
1.	Subject to Discretionary Withdrawal:					%
(a)	With market value adjustment	\$	\$	\$	\$	%
(b)	At book value less current surrender charge of 5% or more					%
(c)	At fair value					%
(d)	Total with market value adjustment or at fair value (total of a through c)	\$	\$	\$	\$	%
(e)	At book value without adjustment (minimal or no charge or adjustment)	76,468			76,468	100.0%
2.	Not subject to discretionary withdrawal					%
3.	Total (gross: direct + assumed)	76,468			76,468	100.0%
4.	Reinsurance ceded					
5.	Total (net) (3) - (4)	\$ 76,468	\$	\$	\$ 76,468	
6.	Amount included in C(1)b above that will move to C(1)e for the first time within the year after the statement date	\$	\$	\$	\$	

D. Reconciliation of Total Annuity Actuarial Reserves and Deposit Fund Liabilities Amounts

Life and Accident & Health Annual Statement		Amount
(1)	Exhibit 5, Annuities section, Total (net)	\$ 97,105,861
(2)	Exhibit 5, Supplementary contracts with life contingencies section, Total (net)	
(3)	Exhibit 7, Deposit-type contracts, Line 14, Column 1	76,468
(4)	Subtotal	\$ 97,182,329
Separate Accounts Statement:		
(5)	Exhibit 3, Line 0299999, Column 2	\$
(6)	Exhibit 3, Line 0399999, Column 2	
(7)	Policyholder dividend and coupon accumulations	
(8)	Policyholder premiums	
(9)	Guaranteed interest contracts	
(10)	Other contract deposit funds	
(11)	Subtotal	\$
(12)	Combined Total	\$ 97,182,329

Note 33 – Analysis of Life Actuarial Reserves by Withdrawal Characteristics

A. General Account

1. Subject to discretionary withdrawal, surrender values, or policy loans:

	Account Value	Cash Value	Reserve
a. Term Policies with Cash Value	\$	\$ 8,881	\$ 17,275
b. Universal Life			
c. Universal Life with Secondary Guarantees			
d. Indexed Universal Life			
e. Indexed Universal Life with Secondary Guarantees			
f. Indexed Life			
g. Other Permanent Cash Value Life Insurance		8,355,706	12,281,349
h. Variable Life			
i. Variable Universal Life			
j. Miscellaneous Reserves			

2. Not subject to discretionary withdrawal or no cash values:

a. Term Policies without Cash Value	XXX	XXX	\$ 49,179
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NOTES TO FINANCIAL STATEMENTS

b. Accidental Death Benefits	XXX	XXX	833
c. Disability – Active Lives	XXX	XXX	
d. Disability – Disabled Lives	XXX	XXX	
e. Miscellaneous Reserves	XXX	XXX	

B. Separate Account with Guarantees

Not applicable

Note 34 – Premium and Annuity Considerations Deferred and Uncollected

A. Deferred and uncollected life insurance premiums and annuity considerations as of end of December 31, 2024 were:

	Gross	Net of Loading
(1) Industrial	\$	\$
(2) Ordinary new business		
(3) Ordinary renewal	7,673	7,673
(4) Credit life		
(5) Group life		
(6) Group annuity		
(7) Totals	\$ 7,673	\$ 7,673

Note 35 – Separate Accounts

No significant changes

Note 36 – Loss/Claim Adjustment Expenses

No significant changes

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Catholic Ladies of Columbia
GENERAL INTERROGATORIES

**PART 1 - COMMON INTERROGATORIES
 GENERAL**

1.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? Yes [] No [X]
 If yes, complete Schedule Y, Parts 1, 1A, 2 and 3.

1.2 If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations? Yes [] No [] N/A [X]

1.3 State Regulating?

1.4 Is the reporting entity publicly traded or a member of a publicly traded group? Yes [] No [X]

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

2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? Yes [] 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. 12/31/2020

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. 12/31/2020

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). 05/25/2022

3.4 By what department or departments?

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 [X] No [] N/A []

3.6 Have all of the recommendations within the latest financial examination report been complied with? Yes [X] No [] N/A []

4.1 During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity) receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:
 4.11 sales of new business? Yes [] No [X]
 4.12 renewals? 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? Yes [] No [X]
 4.22 renewals? Yes [] No [X]

5.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? Yes [] No [X]
 If yes, complete and file the merger history data file with the NAIC.

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

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 [] No [X]

7.2 If yes,
 7.21 State the percentage of foreign control 0.0 %
 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
.....

**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Catholic Ladies of Columbia
GENERAL INTERROGATORIES**

8.1 Is the company a subsidiary of a depository institution holding company (DIHC) or a DIHC itself, regulated by the Federal Reserve Board? Yes [] No [X]
 8.2 If the response to 8.1 is yes, please identify the name of the DIHC.

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

8.4 If response to 8.3 is yes, please provide below the names and 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
.....

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 the Federal Reserve Board's capital rule? Yes [] No [] N/A [X]

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

HOSACK, SPECHT, MUETZEL & WOOD LLP 2 PENN CENTER WEST, STE 326 PITTSBURGH, PA 15276

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?
 L. Allen Bailey, FSA, MAAA, Allen Bailey & Associates, Inc. 6907 Capital of Texas Hwy N. Suite 210, Austin, TX 78731

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 \$ 0

12.2 If yes, provide explanation

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

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

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

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? Yes [X] No []

- a. Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
- b. Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
- c. Compliance with applicable governmental laws, rules and regulations;
- d. The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
- e. Accountability for adherence to the code.

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

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

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

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

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

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Catholic Ladies of Columbia
GENERAL INTERROGATORIES

15.1 Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance where the issuing or confirming bank is not on the SVO Bank List? Yes [] No [X]

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

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

BOARD OF DIRECTORS

16. Is the purchase or sale of all investments of the reporting entity passed upon either by the board of directors or a subordinate committee thereof? Yes [X] No []

17. Does the reporting entity keep a complete permanent record of the proceedings of its board of directors and all subordinate committees thereof? Yes [X] No []

18. Has the reporting entity an established procedure for disclosure to its board of directors or trustees of any material interest or affiliation on the part of any of its officers, directors, trustees or responsible employees that is in conflict 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.....	\$
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.

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

INVESTMENT

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

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Catholic Ladies of Columbia
GENERAL INTERROGATORIES

25.02 If no, give full and complete information, relating thereto

.....

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

.....

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

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

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

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

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

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

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

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

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

26.21 Subject to repurchase agreements	\$ 0
26.22 Subject to reverse repurchase agreements	\$ 0
26.23 Subject to dollar repurchase agreements	\$ 0
26.24 Subject to reverse dollar repurchase agreements	\$ 0
26.25 Placed under option agreements	\$ 0
26.26 Letter stock or securities restricted as to sale - excluding FHLB Capital Stock	\$ 0
26.27 FHLB Capital Stock	\$ 0
26.28 On deposit with states	\$ 0
26.29 On deposit with other regulatory bodies	\$ 0
26.30 Pledged as collateral - excluding collateral pledged to an FHLB	\$ 0
26.31 Pledged as collateral to FHLB - including assets backing funding agreements	\$ 0
26.32 Other	\$ 0

26.3 For category (26.26) provide the following:

1 Nature of Restriction	2 Description	3 Amount
.....

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

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

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

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

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

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

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:

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

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

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

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

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

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

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Catholic Ladies of Columbia
GENERAL INTERROGATORIES

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

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

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

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

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

29.05 Investment management – Identify all investment advisors, investment managers, broker/dealers, including individuals that have the authority to make investment decisions on behalf of the reporting entity. 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
.....

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 [X] No []

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 [X] No []

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

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

30.2 If yes, complete the following schedule:

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

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

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

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Catholic Ladies of Columbia
GENERAL INTERROGATORIES

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

	1 Statement (Admitted) Value	2 Fair Value	3 Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
31.1 Bonds	109,920,787	93,203,881	(16,716,906)
31.2 Preferred stocks	1,365	1,365	0
31.3 Totals	109,922,152	93,205,246	(16,716,906)

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

Brokers, Custodians, Broker Statements

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 []

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 [] 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 []

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

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

Yes [] No [] N/A []

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38.1 Does the reporting entity directly hold cryptocurrencies? Yes [] No [X]

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 [X]

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 Yes [] No [X]
39.22 Immediately converted to U.S. dollars Yes [] No [X]

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? \$

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
.....

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

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
.....

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

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
.....

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Catholic Ladies of Columbia
GENERAL INTERROGATORIES

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

Life, Accident and Health Companies/Fraternal Benefit Societies:

1.1 Does the reporting entity have any direct Medicare Supplement Insurance in force? Yes [] No [X]

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

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. \$

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 Current Year	2 Prior Year
2.1 Premium Numerator	.....	0
2.2 Premium Denominator	17,178,661	13,127,101
2.3 Premium Ratio (2.1/2.2)	0.000	0.000
2.4 Reserve Numerator	.....	.....
2.5 Reserve Denominator	109,857,730	121,197,299
2.6 Reserve Ratio (2.4/2.5)	0.000	0.000

3.1 Does this reporting entity have Separate Accounts? Yes [] No [X]

3.2 If yes, has a Separate Accounts statement been filed with this Department? Yes [] No [] N/A [X]

3.3 What portion of capital and surplus funds of the reporting entity covered by assets in the Separate Accounts statement, is not currently distributable from the Separate Accounts to the general account for use by the general account? \$

3.4 State the authority under which Separate Accounts are maintained:
.....

3.5 Was any of the reporting entity's Separate Accounts business reinsured as of December 31? Yes [] No [X]

3.6 Has the reporting entity assumed by reinsurance any Separate Accounts business as of December 31? Yes [] No [X]

3.7 If the reporting entity has assumed Separate Accounts business, how much, if any, reinsurance assumed receivable for reinsurance of Separate Accounts reserve expense allowances is included as a negative amount in the liability for "Transfers to Separate Accounts due or accrued (net)"? \$

4. For reporting entities having sold annuities to another insurer where the insurer purchasing the annuities has obtained a release of liability from the claimant (payee) as the result of the purchase of an annuity from the reporting entity only:

4.1 Amount of loss reserves established by these annuities during the current year: \$

4.2 List the name and location of the insurance company purchasing the annuities and the statement value on the purchase date of the annuities.

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

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GENERAL INTERROGATORIES

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

5.1 Do you act as a custodian for health savings accounts? Yes [] No [X]

5.2 If yes, please provide the amount of custodial funds held as of the reporting date. \$

5.3 Do you act as an administrator for health savings accounts? Yes [] No [X]

5.4 If yes, please provide the balance of funds administered as of the reporting date. \$

6.1 Are any of the captive affiliates reported on Schedule S, Part 3, authorized reinsurers? Yes [] No [] N/A [X]

6.2 If the answer to 6.1 is yes, please provide the following:

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

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

7.1 Direct Premium Written	\$	187,686
7.2 Total Incurred Claims	\$	502,774
7.3 Number of Covered Lives .....	.....	6,867

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

8. Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states? Yes [X] No []

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

9. Reporting entities admitting net negative (disallowed) interest maintenance reserve (IMR) attest to the following:

- Fixed income investments generating IMR losses comply with the reporting entity's documented investment or liability management policies.
- IMR losses for fixed income related derivatives are all in accordance with prudent and documented risk management procedures, in accordance with a reporting entity's derivative use plans and reflect symmetry with historical treatment in which unrealized derivative gains were reversed to IMR and amortized in lieu of being recognized as realized gains upon derivative termination.
- Any deviation to (a) was either because of a temporary and transitory timing issue or related to a specific event, such as a reinsurance transaction, that mechanically made the cause of IMR losses not reflective of reinvestment activities.
- Asset sales that were generating admitted negative IMR were not compelled by liquidity pressures (e.g., to fund significant cash outflows including, but not limited to excess withdrawals and collateral calls).

Is the reporting entity admitting net negative (disallowed) IMR in accordance with these criteria? Yes [] No [] N/A []

10. Provide the current-year amounts at risk for the following categories.

<u>Individual and Industrial Life</u>	Amount at Risk
10.01 Modified Coinsurance Assumed Reserves	\$
10.02 Modified Coinsurance Ceded Reserves	\$

<u>Individual and Industrial Life Policies With Pricing Flexibility</u>	Amount at Risk
10.03 Net Amount (Direct + Assumed - Ceded) in Force	\$
10.04 Exhibit 5 Life Reserves (Direct + Assumed - Ceded)	\$
10.05 Separate Account Exhibit 3 Life Reserves (Direct + Assumed - Ceded)	\$
10.06 Net Modified Coinsurance Reserves (Assumed - Ceded)	\$
10.07 Life Reserves (10.04 + 10.05 + 10.06)	\$
10.08 Life Net Amount at Risk (10.03 - 10.07)	\$

<u>Individual and Industrial Term Life Policies Without Pricing Flexibility</u>	Amount at Risk
10.09 Net Amount (Direct + Assumed - Ceded) in Force	\$
10.10 Exhibit 5 Life Reserves (Direct + Assumed - Ceded)	\$
10.11 Separate Account Exhibit 3 Life Reserves (Direct + Assumed - Ceded)	\$
10.12 Net Modified Coinsurance Reserves (Assumed - Ceded)	\$
10.13 Life Reserves (10.10 + 10.11 + 10.12)	\$
10.14 Life Net Amount at Risk (10.09 - 10.13)	\$

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Catholic Ladies of Columbia
GENERAL INTERROGATORIES

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

<u>Group and Credit Life (Excluding FEGLI/SGLI)</u>	Amount at Risk
10.15 Modified Coinsurance Assumed Reserves	\$
10.16 Modified Coinsurance Ceded Reserves	\$
 <u>Group and Credit Term Life (Excluding FEGLI/SGLI) with Remaining Rate Terms 36 Months and Under</u>	 Amount of Risk
10.17 Net Amount (Direct + Assumed - Ceded) in Force	\$
10.18 Exhibit 5 Life Reserves (Direct + Assumed - Ceded)	\$
10.19 Separate Account Exhibit 3 Life Reserves (Direct + Assumed - Ceded)	\$
10.20 Net Modified Coinsurance Reserves (Assumed - Ceded)	\$
10.21 Life Reserves (10.18 + 10.19 + 10.20)	\$
10.22 Life Net Amount at Risk (10.17 - 10.21)	\$
 <u>Group and Credit Term Life (Excluding FEGLI/SGLI) with Remaining Rate Terms Over 36 Months</u>	 Amount of Risk
10.23 Net Amount (Direct + Assumed - Ceded) in Force	\$
10.24 Exhibit 5 Life Reserves (Direct + Assumed - Ceded)	\$
10.25 Separate Account Exhibit 3 Life Reserves (Direct + Assumed - Ceded)	\$
10.26 Net Modified Coinsurance Reserves (Assumed - Ceded)	\$
10.27 Life Reserves (10.24 + 10.25 + 10.26)	\$
10.28 Life Net Amount at Risk (10.23 - 10.27)	\$
 <u>Group and Credit Permanent Life (Excluding FEGLI/SGLI) with Pricing Flexibility</u>	 Amount of Risk
10.29 Net Amount (Direct + Assumed - Ceded) in Force	\$
10.30 Exhibit 5 Life Reserves (Direct + Assumed - Ceded)	\$
10.31 Separate Account Exhibit 3 Life Reserves (Direct + Assumed - Ceded)	\$
10.32 Net Modified Coinsurance Reserves (Assumed - Ceded)	\$
10.33 Life Reserves (10.30 + 10.31 + 10.32)	\$
10.34 Life Net Amount at Risk (10.29 - 10.33)	\$

Life, Accident and Health Companies Only:

11.1 Are personnel or facilities of this reporting entity used by another entity or entities or are personnel or facilities of another entity or entities used by this reporting entity (except for activities such as administration of jointly underwritten group contracts and joint mortality or morbidity studies)?	Yes <input type="checkbox"/> No <input type="checkbox"/>		
11.2 Net reimbursement of such expenses between reporting entities:			
	11.21 Paid		
	11.22 Received		
12.1 Does the reporting entity write any guaranteed interest contracts?	Yes <input type="checkbox"/> No <input type="checkbox"/>		
12.2 If yes, what amount pertaining to these lines is included in:			
	12.21 Page 3, Line 1		
	12.22 Page 4, Line 1		
13. For stock reporting entities only:			
13.1 Total amount paid in by stockholders as surplus funds since organization of the reporting entity:	\$		
14. Total dividends paid stockholders since organization of the reporting entity:			
	14.11 Cash		
	14.12 Stock		
15.1 Does the reporting entity reinsurance any Workers' Compensation Carve-Out business defined as:	Yes <input type="checkbox"/> No <input type="checkbox"/>		
Reinsurance (including retrocessional reinsurance) assumed by life and health insurers of medical, wage loss and death benefits of the occupational illness and accident exposures, but not the employers liability exposures, of business originally written as workers' compensation insurance.			
15.2 If yes, has the reporting entity completed the Workers' Compensation Carve-Out Supplement to the Annual Statement?	Yes <input type="checkbox"/> No <input type="checkbox"/>		
15.3 If 15.1 is yes, the amounts of earned premiums and claims incurred in this statement are:			
	1 Reinsurance Assumed	2 Reinsurance Ceded	3 Net Retained
15.31 Earned premium
15.32 Paid claims
15.33 Claim liability and reserve (beginning of year)
15.34 Claim liability and reserve (end of year)
15.35 Incurred claims

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Catholic Ladies of Columbia
GENERAL INTERROGATORIES

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

15.4 If reinsurance assumed included amounts with attachment points below \$1,000,000, the distribution of the amounts reported in Lines 15.31 and 15.34 for Column (1) are:

	Attachment Point	1 Earned Premium	2 Claim Liability and Reserve
15.41	<\$25,000		
15.42	\$25,000 - \$9,999		
15.43	\$100,000 - \$99,999		
15.44	\$250,000 - \$99,999		
15.45	\$1,000,000 or more		

15.5 What portion of earned premium reported in 15.31, Column 1 was assumed from pools? \$

Fraternal Benefit Societies Only:

16. Is the reporting entity organized and conducted on the lodge system, with ritualistic form of work and representative form of government? Yes [X] No []

17. How often are meetings of the subordinate branches required to be held?
Monthly

18. How are the subordinate branches represented in the supreme or governing body?
By Board of Directors

19. What is the basis of representation in the governing body?
The Board of Directors Comprised of 7 Members

20.1 How often are regular meetings of the governing body held?
Quarterly

20.2 When was the last regular meeting of the governing body held?

20.3 When and where will the next regular or special meeting of the governing body be held?
April 2024

20.4 How many members of the governing body attended the last regular meeting? 7

20.5 How many of the same were delegates of the subordinate branches? 0

21. How are the expenses of the governing body defrayed?
General Funds

22. When and by whom are the officers and directors elected?
Voted on by All Benefit Members at Annual Meeting

23. What are the qualifications for membership?
Roman Catholics, Their Family & Friends, Plus Good Health & Moral Character

24. What are the limiting ages for admission?
18 and up

25. What is the minimum and maximum insurance that may be issued on any one life?
None

26. Is a medical examination required before issuing a benefit certificate to applicants? Yes [X] No []

27. Are applicants admitted to membership without filing an application with and becoming a member of a local branch by ballot and initiation? Yes [] No [X]

28.1 Are notices of the payments required sent to the members? Yes [X] No [] N/A []

28.2 If yes, do the notices state the purpose for which the money is to be used? Yes [] No [X]

29. What proportion of first and subsequent year's payments may be used for management expenses?
29.11 First Year 0.0 %
29.12 Subsequent Years 0.0 %

30.1 Is any part of the mortuary, disability, emergency or reserve fund, or the accretions from or payments for the same, used for expenses? Yes [] No [X]

30.2 If so, what amount and for what purpose? \$

31.1 Does the reporting entity pay an old age disability benefit? Yes [] No [X]

31.2 If yes, at what age does the benefit commence? 0

32.1 Has the constitution or have the laws of the reporting entity been amended during the year? Yes [] No [X]

32.2 If yes, when?

33. Have you filed with this Department all forms of benefit certificates issued, a copy of the constitution and all of the laws, rules and regulations in force at the present time? Yes [X] No []

34.1 State whether all or a portion of the regular insurance contributions were waived during the current year under premium-paying certificates on account of meeting attained age or membership requirements? Yes [X] No []

34.2 If so, was an additional reserve included in Exhibit 5? Yes [] No [X] N/A []

34.3 If yes, explain

35.1 Has the reporting entity reinsured, amalgamated with, or absorbed any company, order, society, or association during the year? Yes [] No [X]

35.2 If yes, was there any contract agreement, or understanding, written or oral, expressed or implied, by means of which any officer, director, trustee, or any other person, or firm, corporation, society or association, received or is to receive any fee, commission, emolument, or compensation of any nature whatsoever in connection with, on an account of such reinsurance, amalgamation, absorption, or transfer of membership or funds? Yes [] No [] N/A [X]

36. Has any present or former officer, director, trustee, incorporator, or any other persons, or any firm, corporation, society or association, any claims of any nature whatsoever against this reporting entity, which is not included in the liabilities on Page 3 of this statement? Yes [] No [X]

37.1 Does the reporting entity have outstanding assessments in the form of liens against policy benefits that have increased surplus? Yes [X] No []

37.2 If yes, what is the date of the original lien and the total outstanding balance of liens that remain in surplus?

Date	Outstanding Lien Amount
12/01/2008	1,013,802

NONE

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Catholic Ladies of Columbia
FIVE-YEAR HISTORICAL DATA

Show amounts in whole dollars only, no cents; show percentages to one decimal place, i.e. 17.6.
\$000 omitted for amounts of life insurance

	1 2024	2 2023	3 2022	4 2021	5 2020
Life Insurance in Force (Exhibit of Life Insurance)					
1. Ordinary - whole life and endowment (Line 34, Col. 4)	39,763	45,508	44,100	43,678	42,827
2. Ordinary - term (Line 21, Col. 4, less Line 34, Col. 4)	26,721	20,122	18,939	17,561	17,609
3. Credit life (Line 21, Col. 6)	0	0	0	0	0
4. Group, excluding FEGLI/SGLI (Line 21, Col. 9 less Lines 43 & 44, Col. 4)	0	0	0	0	0
5. Industrial (Line 21, Col. 2)	0	0	0	0	0
6. FEGLI/SGLI (Lines 43 & 44, Col. 4)	0	0	0	0	0
7. Total (Line 21, Col. 10)	66,484	65,630	63,039	61,239	60,436
7.1 Total in force for which VM-20 deterministic/stochastic reserves are calculated					
New Business Issued (Exhibit of Life Insurance)					
8. Ordinary - whole life and endowment (Line 34, Col. 2)	13,787	646	846	460	0
9. Ordinary - term (Line 2, Col. 4, less Line 34, Col. 2)	1,275	1,310	4,120	1,635	1,736
10. Credit life (Line 2, Col. 6)	0	0	0	0	0
11. Group (Line 2, Col. 9)	0	0	0	0	0
12. Industrial (Line 2, Col. 2)	0	0	0	0	0
13. Total (Line 2, Col. 10)	15,062	1,956	4,966	2,095	1,736
Premium Income - Lines of Business (Exhibit 1 - Part 1)					
14. Individual life (Line 20.4, Col. 2)	187,686	280,733	0	0	0
15. Group life (Line 20.4, Col. 3)	0	0	0	0	0
16. Individual annuities (Line 20.4, Col. 4)	16,990,976	12,846,368	15,944,502	12,002,539	14,180,166
17. Group annuities (Line 20.4, Col. 5)	0	0	0	0	0
18. Accident & Health (Line 20.4, Col. 6)	0	0	0	0	0
19. Other lines of business (Line 20.4, Col. 8)	0	0	0	0	0
20. Total	17,178,661	13,127,101	15,944,502	12,002,539	14,180,166
Balance Sheet (Pages 2 & 3)					
21. Total admitted assets excluding Separate Accounts business (Page 2, Line 26, Col. 3)	113,049,261	131,092,232	141,880,372	138,820,359	135,449,041
22. Total liabilities excluding Separate Accounts business (Page 3, Line 26)	111,318,556	128,355,252	138,337,521	134,556,311	131,303,850
23. Aggregate life reserves (Page 3, Line 1)	108,641,192	119,270,137	135,461,313	132,526,854	127,816,977
23.1 Excess VM-20 deterministic/stochastic reserve over NPR related to Line 7.1					
24. Aggregate A & H reserves (Page 3, Line 2)	0	0	0	0	0
25. Deposit-type contract funds (Page 3, Line 3)	76,469	89,367	112,892	130,197	95,981
26. Asset valuation reserve (Page 3, Line 24.01)	876,113	864,583	755,273	599,476	524,039
27. Capital (Page 3, Lines 29 and 30)	0	0	0	0	0
28. Surplus (Page 3, Line 37)	1,730,705	2,736,981	3,542,851	4,264,047	4,145,191
Cash Flow (Page 5)					
29. Net Cash from Operations (Line 11)	(16,854,680)	(10,344,802)	3,974,950	3,744,722	6,816,436
Risk-Based Capital Analysis					
30. Total adjusted capital	2,606,818	3,601,564	4,300,124	4,865,523	4,671,230
31. Authorized control level risk - based capital	1,992,646	1,207,225	1,338,875	1,273,716	1,118,276
Percentage Distribution of Cash, Cash Equivalents and Invested Assets (Page 2, Col. 3) (Line No. /Page 2, Line 12, Col. 3) x 100.0					
32. Bonds (Line 1)	98.3	98.5	98.4	98.5	98.0
33. Stocks (Lines 2.1 and 2.2)	0.0	0.0	0.0	0.1	0.4
34. Mortgage loans on real estate(Lines 3.1 and 3.2)	0.0	0.0	0.0	0.0	0.0
35. Real estate (Lines 4.1, 4.2 and 4.3)	0.0	0.0	0.0	0.0	0.0
36. Cash, cash equivalents and short-term investments (Line 5)	0.7	0.7	0.7	0.5	0.7
37. Contract loans (Line 6)	0.9	0.8	0.8	0.9	0.9
38. Derivatives (Page 2, Line 7)	0.0	0.0	0.0	0.0	0.0
39. Other invested assets (Line 8)	0.0	0.0	0.0	0.0	0.0
40. Receivables for securities (Line 9)	0.0	0.0	0.0	0.0	0.0
41. Securities lending reinvested collateral assets (Line 10)	0.0	0.0	0.0	0.0	0.0
42. Aggregate write-ins for invested assets (Line 11)	0.0	0.0	0.0	0.0	0.0
43. Cash, cash equivalents and invested assets (Line 12)	100.0	100.0	100.0	100.0	100.0
Investments in Parent, Subsidiaries and Affiliates					
44. Affiliated bonds (Schedule D Summary, Line 12, Col. 1)					
45. Affiliated preferred stocks (Schedule D Summary, Line 18, Col. 1)					
46. Affiliated common stocks (Schedule D Summary Line 24, Col. 1),					
47. Affiliated short-term investments (subtotal included in Schedule DA Verification, Col. 5, Line 10)	0	0	0	0	0
48. Affiliated mortgage loans on real estate					
49. All other affiliated					
50. Total of above Lines 44 to 49	0	0	0	0	0
51. Total Investment in Parent included in Lines 44 to 49 above					

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Catholic Ladies of Columbia
FIVE-YEAR HISTORICAL DATA

(Continued)

	1 2024	2 2023	3 2022	4 2021	5 2020
Total Nonadmitted and Admitted Assets					
52. Total nonadmitted assets (Page 2, Line 28, Col. 2).....	90,434	84,067	101,155	25,532	137,379
53. Total admitted assets (Page 2, Line 28, Col. 3)	113,049,261	131,092,232	141,880,372	138,820,359	135,449,041
Investment Data					
54. Net investment income (Exhibit of Net Investment Income).....	4,307,408	5,136,011	5,363,838	5,248,439	5,658,486
55. Realized capital gains (losses) (Page 4, Line 34, Column 1)			32,334	(32,596)	(431,993)
56. Unrealized capital gains (losses) (Page 4, Line 38, Column 1)	(55,185)	(1,098)	(18,734)	18,734	47,355
57. Total of above Lines 54, 55 and 56	4,252,223	5,134,913	5,377,438	5,234,577	5,273,848
Benefits and Reserve Increases (Page 6)					
58. Total contract/certificate benefits - life (Lines 10, 11, 12, 13, 14 and 15, Col. 1 minus Lines 10, 11, 12, 13, 14 and 15, Cols. 6, 7 and 8)	31,403,029	27,995,678	17,526,829	11,275,083	13,156,670
59. Total contract/certificate benefits - A & H (Lines 13 & 14, Col. 6)	0	0			
60. Increase in life reserves - other than group and annuities (Line 19, Col. 2)	419,462	(39,542)	405,703	156,922	47,003
61. Increase in A & H reserves (Line 19, Col. 6)					
62. Dividends to policyholders and refunds to members (Line 30, Col. 1)	0	0			
Operating Percentages					
63. Insurance expense percent (Page 6, Col. 1, Lines 21, 22 & 23, less Line 6)/(Page 6, Col. 1, Line 1 plus Exhibit 7, Col. 2, Line 2) x 100.0	8.9	11.5	10.1	10.5	10.4
64. Lapse percent (ordinary only) [(Exhibit of Life Insurance, Col. 4, Lines 14 & 15) / 1/2 (Exhibit of Life Insurance, Col. 4, Lines 1 & 21)] x 100.0	0.4	0.4	1.1	1.5	0.4
65. A & H loss percent (Schedule H, Part 1, Lines 5 and 6, Col. 2)	0.0	0.0			
66. A & H cost containment percent (Schedule H, Pt. 1, Line 4, Col. 2)					
67. A & H expense percent excluding cost containment expenses (Schedule H, Pt. 1, Line 10, Col. 2)					
A & H Claim Reserve Adequacy					
68. Incurred losses on prior years' claims - comprehensive group health (Sch. H, Part 3, Line 3.1 Col. 3)				XXX	XXX
69. Prior years' claim liability and reserve - comprehensive group health (Sch. H, Part 3, Line 3.2 Col. 3)				XXX	XXX
70. Incurred losses on prior years' claims-health other than comprehensive group health (Sch. H, Part 3, Line 3.1 Col. 1 less Col. 3)	0	0		XXX	XXX
71. Prior years' claim liability and reserve-health other than comprehensive group health (Sch. H, Part 3, Line 3.2 Col. 1 less Col. 3)	0	0		XXX	XXX
Net Gains From Operations After Dividends to Policyholders, Refunds to Members, Federal Income Taxes and Before Realized Capital Gains or (Losses) by Lines of Business (Page 6.x, Line 33)					
72. Individual industrial life (Page 6.1, Col. 2)	0				
73. Individual whole life (Page 6.1, Col. 3)	(575,445)	76,098	(169,300)		
74. Individual term life (Page 6.1, Col. 4)	44,833	47,094	40,973		
75. Individual indexed life (Page 6.1, Col. 5)	0				
76. Individual universal life (Page 6.1, Col. 6)	0				
77. Individual universal life with secondary guarantees (Page 6.1, Col. 7)	0				
78. Individual variable life (Page 6.1, Col. 8)	0				
79. Individual variable universal life (Page 6.1, Col. 9)	0				
80. Individual credit life (Page 6.1, Col. 10)	0				
81. Individual other life (Page 6.1, Col. 11)	0				
82. Individual YRT mortality risk only (Page 6.1, Col. 12)	0				
83. Group whole life (Page 6.2, Col. 2)					
84. Group term life (Page 6.2, Col. 3)					
85. Group universal life (Page 6.2, Col. 4)					
86. Group variable life (Page 6.2, Col. 5)					
87. Group variable universal life (Page 6.2, Col. 6)					
88. Group credit life (Page 6.2, Col. 7)					
89. Group other life (Page 6.2, Col. 8)					
90. Group YRT mortality risk only (Page 6.2, Col. 9)					
91. Individual deferred fixed annuities (Page 6.3, Col. 2)	(230,579)	(996,352)	(183,673)		
92. Individual deferred indexed annuities (Page 6.3, Col. 3)	0				
93. Individual deferred variable annuities with guarantees (Page 6.3, Col. 4)	0				
94. Individual deferred variable annuities without guarantees (Page 6.3, Col. 5)	0				
95. Individual life contingent payout (immediate and annuitization) (Page 6.3, Col. 6)	0				
96. Individual other annuities (Page 6.3, Col. 7)	0				
97. Group deferred fixed annuities (Page 6.4, Col. 2)					
98. Group deferred indexed annuities (Page 6.4, Col. 3)					
99. Group deferred variable annuities with guarantees (Page 6.4, Col. 4)					
100. Group deferred variable annuities without guarantees (Page 6.4, Col. 5)					
101. Group life contingent payout (immediate and annuitization) (Page 6.4, Col. 6)					
102. Group other annuities (Page 6.4, Col. 7)					
103. A & H-comprehensive individual (Page 6.5, Col. 2)					
104. A & H-comprehensive group (Page 6.5, Col. 3)					
105. A & H-Medicare supplement (Page 6.5, Col. 4)					
106. A & H-vision only (Page 6.5, Col. 5)					
107. A & H-dental only (Page 6.5, Col. 6)					
108. A & H-Federal employees health benefits plan (Page 6.5, Col. 7)					
109. A & H-Title XVIII Medicare (Page 6.5, Col. 8)					
110. A & H-Title XIX Medicaid (Page 6.5, Col. 9)					
111. A & H-credit (Page 6.5, Col. 10)					
112. A & H-disability income (Page 6.5, Col. 11)					
113. A & H-long-term care (Page 6.5, Col. 12)					
114. A & H-other (Page 6.5, Col. 13)					
115. Aggregates of all other lines of business (Page 6, Col. 8)	0	0	(191,376)		
116. Fraternal (Page 6, Col. 7)	(172,029)	(197,440)	(503,376)		
117. Total (Page 6, Col. 1)	(933,220)	(1,070,600)	(503,376)		

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

Yes [] No []

If no, please explain:

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Catholic Ladies of Columbia

EXHIBIT OF LIFE INSURANCE

(\$000 Omitted for Amounts of Life Insurance)

	Industrial		Ordinary		Credit Life (Group and Individual)		Group		10 Total Amount of Insurance	
	1 Number of Policies	2 Amount of Insurance	3 Number of Policies	4 Amount of Insurance	5 Number of Individual Policies and Group Certificates	6 Amount of Insurance	Number of			
							7 Policies	8 Certificates		
1. In force end of prior year .....	.0	0	7,002	65,630	0	0	0	0	65,630
2. Issued during year	0	0	90	15,062		0	0	0	15,062	
3. Reinsurance assumed									0	
4. Revived during year									0	
5. Increased during year (net)			(95)	(3,351)					(3,351)	
6. Subtotals, Lines 2 to 5	0	0	(5)	11,711	0	0	0	0	11,711	
7. Additions by dividends during year	XXX.		XXX.		XXX.		XXX.	XXX.	0	
8. Aggregate write-ins for increases	0	0	0	0	0	0	0	0	0	
9. Totals (Lines 1 and 6 to 8)	0	0	6,997	77,341	0	0	0	0	77,341	
Deductions during year:										
10. Death			78	4,371			XXX.		4,371	
11. Maturity			4	7			XXX.		7	
12. Disability							XXX.		0	
13. Expiry									0	
14. Surrender			48	241					241	
15. Lapse									0	
16. Conversion							XXX.	XXX.	0	
17. Decreased (net)				6,238			XXX.	XXX.	6,238	
18. Reinsurance									0	
19. Aggregate write-ins for decreases	0	0	0	0	0	0	0	0	0	
20. Totals (Lines 10 to 19)	0	0	130	10,857	0	0	0	0	10,857	
21. In force end of year (b) (Line 9 minus Line 20)	0	0	6,867	66,484	0	0	0	0	66,484	
22. Reinsurance ceded end of year	XXX.		XXX.	8,431	XXX.		XXX.	XXX.	8,431	
23. Line 21 minus Line 22	XXX	0	XXX	58,053	XXX	(a) 0	XXX	XXX	58,053	
DETAILS OF WRITE-INS										
0801.										
0802.										
0803.										
0898. Summary of remaining write-ins for Line 8 from overflow page	0	0	0	0	0	0	0	0	0	
0899. TOTALS (Lines 0801 through 0803 plus 0898) (Line 8 above)	0	0	0	0	0	0	0	0	0	
1901.										
1902.										
1903.										
1998. Summary of remaining write-ins for Line 19 from overflow page	0	0	0	0	0	0	0	0	0	
1999. TOTALS (Lines 1901 through 1903 plus 1998) (Line 19 above)	0	0	0	0	0	0	0	0	0	

Life, Accident and Health Companies Only:

(a) Group \$; Individual \$

Fraternal Benefit Societies Only:

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

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

If not, how are such expenses met?

.....

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Catholic Ladies of Columbia

EXHIBIT OF LIFE INSURANCE

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

ADDITIONAL INFORMATION ON INSURANCE IN FORCE END OF YEAR

	Industrial		Ordinary	
	1 Number of Policies	2 Amount of Insurance	3 Number of Policies	4 Amount of Insurance
24. Additions by dividends	XXX		XXX	
25. Other paid-up insurance			6,149	33,638
26. Debit ordinary insurance	XXX	XXX		

ADDITIONAL INFORMATION ON ORDINARY INSURANCE

Term Insurance Excluding Extended Term Insurance	Issued During Year (Included in Line 2)		In Force End of Year (Included in Line 21)	
	1 Number of Policies	2 Amount of Insurance	3 Number of Policies	4 Amount of Insurance
27. Term policies - decreasing				
28. Term policies - other	10	1,275	443	26,625
29. Other term insurance - decreasing	XXX		XXX	
30. Other term insurance	XXX		XXX	
31. Totals (Lines 27 to 30)	10	1,275	443	26,625
Reconciliation to Lines 2 and 21:				
32. Term additions	XXX		XXX	
33. Totals, extended term insurance	XXX	XXX	57	97
34. Totals, whole life and endowment	80	13,787	6,367	39,763
35. Totals (Lines 31 to 34)	90	15,062	6,867	66,485

CLASSIFICATION OF AMOUNT OF INSURANCE BY PARTICIPATING STATUS

	Issued During Year (Included in Line 2)		In Force End of Year (Included in Line 21)	
	1 Non-Participating	2 Participating	3 Non-Participating	4 Participating
36. Industrial				
37. Ordinary		15,062		66,485
38. Credit Life (Group and Individual)				
39. Group				
40. Totals (Lines 36 to 39)	0	15,062	0	66,485

ADDITIONAL INFORMATION ON CREDIT LIFE AND GROUP INSURANCE

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

ADDITIONAL ACCIDENTAL DEATH BENEFITS

46. Amount of additional accidental death benefits in force end of year under ordinary policies	262
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BASIS OF CALCULATION OF ORDINARY TERM INSURANCE

47. State basis of calculation of (47.1) decreasing term insurance contained in Family Insurance, Mortgage Protection, etc., policies and riders and of (47.2) term insurance on wife and children under Family, Parent and Child, etc., policies and riders	47.1	47.2

POLICIES WITH DISABILITY PROVISIONS

Disability Provisions	Industrial		Ordinary		Credit		Group	
	1 Number of Policies	2 Amount of Insurance	3 Number of Policies	4 Amount of Insurance	5 Number of Policies	6 Amount of Insurance	7 Number of Certificates	8 Amount of Insurance
48. Waiver of Premium			5	275				
49. Disability Income			XXX	XXX				
50. Extended Benefits								
51. Other								
52. Total	0	(a)	0	5 (a)	275	0 (a)	0	0 (a)

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

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

SUPPLEMENTARY CONTRACTS

	Ordinary		Group	
	1 Involving Life Contingencies	2 Not Involving Life Contingencies	3 Involving Life Contingencies	4 Not Involving Life Contingencies
1. In force end of prior year	0	113	0	0
2. Issued during year				
3. Reinsurance assumed				
4. Increased during year (net)				
5. Total (Lines 1 to 4)	0	113	0	0
Deductions during year:				
6. Decreased (net)		5		
7. Reinsurance ceded				
8. Totals (Lines 6 and 7)	0	5	0	0
9. In force end of year (line 5 minus line 8)	0	108	0	0
10. Amount on deposit		(a) 40,352		(a)
11. Income now payable				
12. Amount of income payable	(a)	(a) 22,878	(a)	(a)

ANNUITIES

	Ordinary		Group	
	1 Immediate	2 Deferred	3 Contracts	4 Certificates
1. In force end of prior year	114	3,218	0	0
2. Issued during year		257		
3. Reinsurance assumed				
4. Increased during year (net)				
5. Totals (Lines 1 to 4)	114	3,475	0	0
Deductions during year:				
6. Decreased (net)	5	84		
7. Reinsurance ceded				
8. Totals (Lines 6 and 7)	5	84	0	0
9. In force end of year (line 5 minus line 8)	109	3,391	0	0
Income now payable:				
10. Amount of income payable	(a) 22,878	XXX	XXX	(a)
Deferred fully paid:				
11. Account balance	XXX	(a) 18,951,532	XXX	(a)
Deferred not fully paid:				
12. Account balance	XXX	(a) 88,780,609	XXX	(a)

ACCIDENT AND HEALTH INSURANCE

	Group		Credit		Other	
	1 Certificates	2 Premiums in Force	3 Policies	4 Premiums in Force	5 Policies	6 Premiums in Force
1. In force end of prior year						
2. Issued during year						
3. Reinsurance assumed						
4. Increased during year (net)	XXX	XXX	XXX	XXX		XXX
5. Totals (Lines 1 to 4)	XXX	XXX	XXX	XXX		XXX
Deductions during year:						
6. Conversions	XXX	XXX	XXX	XXX	XXX	XXX
7. Decreased (net)	XXX	XXX	XXX	XXX	XXX	XXX
8. Reinsurance ceded	XXX	XXX	XXX	XXX	XXX	XXX
9. Totals (Lines 6 to 8)	XXX	XXX	XXX	XXX	XXX	XXX
10. In force end of year (line 5 minus line 9)	(a)		(a)			(a)

DEPOSIT FUNDS AND DIVIDEND ACCUMULATIONS

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

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

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Catholic Ladies of Columbia
SCHEDULE T - PREMIUMS AND ANNUITY CONSIDERATIONS ^(b)

Allocated by States and Territories

States, Etc.	Active Status (a)	Life Contracts		Direct Business Only		Total Columns 2 through 5 (b)	Deposit-Type Contracts
		2	3	4	5		
		Life Insurance Premiums	Annuity Considerations	Accident and Health Insurance Premiums, Including Policy, Membership and Other Fees	Other Considerations		
1. Alabama	AL	N.	0	0			0
2. Alaska	AK	N.	0	0			0
3. Arizona	AZ	N.	0	0			0
4. Arkansas	AR	N.	0	0			0
5. California	CA	N.	0	0			0
6. Colorado	CO	N.	0	0			0
7. Connecticut	CT	N.	0	0			0
8. Delaware	DE	N.	0	0			0
9. District of Columbia	DC	N.	0	0			0
10. Florida	FL	N.	0	0			0
11. Georgia	GA	N.	0	0			0
12. Hawaii	HI	N.	0	0			0
13. Idaho	ID	N.	0	0			0
14. Illinois	IL	N.	0	0			0
15. Indiana	IN	L.	0	5,900	0	0	5,900
16. Iowa	IA	N.	0	0			0
17. Kansas	KS	N.	0	0			0
18. Kentucky	KY	L.	5,076	380,512	0	0	385,588
19. Louisiana	LA	N.	0	0			0
20. Maine	ME	N.	0	0			0
21. Maryland	MD	N.	0	0			0
22. Massachusetts	MA	N.	0	0			0
23. Michigan	MI	L.	22,095	4,877,903	0	0	4,899,998
24. Minnesota	MN	N.	0	0			0
25. Mississippi	MS	N.	0	0			0
26. Missouri	MO	N.	0	0			0
27. Montana	MT	N.	0	0			0
28. Nebraska	NE	N.	0	0			0
29. Nevada	NV	N.	0	0			0
30. New Hampshire	NH	N.	0	0			0
31. New Jersey	NJ	N.	0	0			0
32. New Mexico	NM	N.	0	0			0
33. New York	NY	N.	0	0			0
34. North Carolina	NC	N.	0	0			0
35. North Dakota	ND	N.	0	0			0
36. Ohio	OH	L.	160,515	11,726,660	0	0	11,887,176
37. Oklahoma	OK	N.	0	0			0
38. Oregon	OR	N.	0	0			0
39. Pennsylvania	PA	N.	0	0			0
40. Rhode Island	RI	N.	0	0			0
41. South Carolina	SC	N.	0	0			0
42. South Dakota	SD	N.	0	0			0
43. Tennessee	TN	N.	0	0			0
44. Texas	TX	N.	0	0			0
45. Utah	UT	N.	0	0			0
46. Vermont	VT	N.	0	0			0
47. Virginia	VA	N.	0	0			0
48. Washington	WA	N.	0	0			0
49. West Virginia	WV	N.	0	0			0
50. Wisconsin	WI	N.	0	0			0
51. Wyoming	WY	N.	0	0			0
52. American Samoa	AS	N.	0	0			0
53. Guam	GU	N.	0	0			0
54. Puerto Rico	PR	N.	0	0			0
55. U.S. Virgin Islands	VI	N.	0	0			0
56. Northern Mariana Islands	MP	N.	0	0			0
57. Canada	CAN	N.	0	0			0
58. Aggregate Other Alien	OT	XXX.	0	0	0	0	0
59. Subtotal		XXX.	187,686	16,990,976	0	0	17,178,661
90. Reporting entity contributions for employee benefits plans		XXX.					0
91. Dividends or refunds applied to purchase paid-up additions and annuities		XXX.					0
92. Dividends or refunds applied to shorten endowment or premium paying period		XXX.					0
93. Premium or annuity considerations waived under disability or other contract provisions		XXX.					0
94. Aggregate or other amounts not allocable by State		XXX.	0	0	0	0	0
95. Totals (Direct Business)		XXX.	187,686	16,990,976	0	0	17,178,661
96. Plus reinsurance assumed		XXX.					0
97. Totals (All Business)		XXX.	187,686	16,990,976	0	0	17,178,661
98. Less reinsurance ceded		XXX.					0
99. Totals (All Business) less Reinsurance Ceded		XXX	187,686	16,990,976	(c)	0	17,178,661
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
58999. Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)		XXX	0	0	0	0	0
9401.		XXX.					
9402.		XXX.					
9403.		XXX.					
9498. Summary of remaining write-ins for Line 94 from overflow page		XXX.	0	0	0	0	0
9499. Totals (Lines 9401 through 9403 plus 9498)(Line 94 above)		XXX	0	0	0	0	0

(a) Active Status Counts:

1. L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG 4 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 53
 3. E - Eligible - Reporting entities eligible or approved to write surplus lines in the state 0

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

(c) Column 4 should balance with Exhibit 1, Lines 6.4, 10.4 and 16.4, Col. 6, or with Schedule H, Part 1, Line 1, indicate which:

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

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Catholic Ladies of Columbia
OVERFLOW PAGE FOR WRITE-INS

Additional Write-ins for Exhibit 2 Line 9.3

	Insurance				5 Investment	6 Fraternal	7 Total			
	1 Life	Accident and Health		4 All Other Lines of Business						
		2 Cost Containment	3 All Other							
09.304. Education & Training							325			
09.397. Summary of remaining write-ins for Line 9.3 from overflow page	0	0	0	0	0	325	325			