



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

### Family Heritage Life Insurance Company of America

NAIC Group Code 0290 NAIC Company Code 77968 Employer's ID Number 34-1626521  
(Current) (Prior)

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

Country of Domicile United States of America

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

Incorporated/Organized 08/22/1989 Commenced Business 11/17/1989

Statutory Home Office 6001 East Royalton Road, Suite 200, Cleveland, OH, US 44147-3529  
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 6001 East Royalton Road, Suite 200  
(Street and Number) Cleveland, OH, US 44147-3529, 440-922-5200  
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Mail Address P.O. Box 470608, Cleveland, OH, US 44147-3529  
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 3700 South Stonebridge Drive  
(Street and Number) McKinney, TX, US 75070-8080, 469-617-4407  
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Internet Website Address https://home.globelifeinsurance.com/familyheritage

Statutory Statement Contact Brett Turner, 469-617-4407  
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#### OFFICERS

President Thomas Peter Kalmbach Secretary Joel Patrick Scarborough  
Treasurer Michael Shane Henrie Appointed Actuary Hongwei "David" Zhao

#### OTHER

Seamus Fitzpatrick, Division Senior Vice President Robert Edward Hensley, Divisional Senior Vice President Jon Andrew Adams #, Divisional Senior Vice President

#### DIRECTORS OR TRUSTEES

Thomas Peter Kalmbach Joel Patrick Scarborough Stafford Leroy Thompson, Jr. #  
Maria Rose Burnett Jon Andrew Adams Rebecca Evans Zorn

State of Texas SS  
County of Collin

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

Thomas Peter Kalmbach  
President

Michael Shane Henrie  
Treasurer

Joel Patrick Scarborough  
Secretary

Subscribed and sworn to before me this  
21st day of February, 2025

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

Michelle Batiste  
Notary Public  
January 12, 2028

## 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) .....	1,774,500,877		1,774,500,877	1,647,705,369
2. Stocks (Schedule D):				
2.1 Preferred stocks .....			0	0
2.2 Common stocks .....	4,395,500		4,395,500	2,975,100
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens .....	56,232,530		56,232,530	41,338,681
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 (\$ ..... (17,941,299) , Schedule E - Part 1), cash equivalents (\$ ..... 6,384,380 , Schedule E - Part 2) and short-term investments (\$ ..... 0 , Schedule DA) .....	(11,556,919)		(11,556,919)	238,923
6. Contract loans (including \$ ..... premium notes) .....	415,453		415,453	337,132
7. Derivatives (Schedule DB) .....			0	0
8. Other invested assets (Schedule BA) .....	199,999,399		199,999,399	136,861,192
9. Receivables for securities .....	70,021		70,021	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) .....	2,024,056,861	0	2,024,056,861	1,829,456,397
13. Title plants less \$ ..... charged off (for Title insurers only) .....			0	0
14. Investment income due and accrued .....	20,783,550		20,783,550	19,293,122
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection .....	13,489,728		13,489,728	12,749,566
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ ..... earned but unbilled premiums) .....	935,667		935,667	995,033
15.3 Accrued retrospective premiums (\$ ..... ) and contracts subject to redetermination (\$ ..... ) .....			0	0
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers .....	28,403		28,403	15,284
16.2 Funds held by or deposited with reinsured companies .....			0	0
16.3 Other amounts receivable under reinsurance contracts .....	10,916,912		10,916,912	0
17. Amounts receivable relating to uninsured plans .....			0	0
18.1 Current federal and foreign income tax recoverable and interest thereon .....	2,604,779		2,604,779	2,676,999
18.2 Net deferred tax asset .....	65,652,000	44,379,000	21,273,000	20,831,000
19. Guaranty funds receivable or on deposit .....	212,432		212,432	276,331
20. Electronic data processing equipment and software .....	7,252,711	6,963,372	289,339	236,485
21. Furniture and equipment, including health care delivery assets (\$ ..... ) .....	69,922	69,922	0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates .....			0	0
23. Receivables from parent, subsidiaries and affiliates .....	9,734		9,734	0
24. Health care (\$ ..... ) and other amounts receivable .....			0	0
25. Aggregate write-ins for other-than-invested assets .....	40,013,497	12,274,742	27,738,755	6,847,408
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25) .....	2,186,026,196	63,687,036	2,122,339,160	1,893,377,625
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts .....			0	0
28. Total (Lines 26 and 27)	2,186,026,196	63,687,036	2,122,339,160	1,893,377,625
<b>DETAILS OF WRITE-INS</b>				
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. Corporate Owned Life Insurance .....	20,273,385		20,273,385	
2502. Agents Balances .....	9,826,220	9,826,220	0	
2503. Admitted Disallowed IMR .....	7,465,370		7,465,370	6,847,408
2598. Summary of remaining write-ins for Line 25 from overflow page .....	2,448,522	2,448,522	0	0
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	40,013,497	12,274,742	27,738,755	6,847,408

**LIABILITIES, SURPLUS AND OTHER FUNDS**

	1 Current Year	2 Prior Year
1. Aggregate reserve for life contracts \$ ..... 22,121,340 (Exh. 5, Line 9999999) less \$ ..... included in Line 6.3 (including \$ ..... Modco Reserve) .....	22,121,340	19,963,987
2. Aggregate reserve for accident and health contracts (including \$ ..... 0 Modco Reserve) .....	1,794,127,395	1,637,964,523
3. Liability for deposit-type contracts (Exhibit 7, Line 14, Col. 1) (including \$ ..... Modco Reserve) .....	55,232,380	20,098,528
4. Contract claims:		
4.1 Life (Exhibit 8, Part 1, Line 4.4, Col. 1 less Col. 6) .....	979,000	979,000
4.2 Accident and health (Exhibit 8, Part 1, Line 4.4, Col. 6) .....	34,982,625	30,739,826
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) .....		
6.2 Policyholders' dividends and refunds to members not yet apportioned (including \$ ..... Modco) .....		
6.3 Coupons and similar benefits (including \$ ..... Modco) .....		
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) .....	0	0
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 \$ ..... 102,073 ceded .....	102,073	100,349
9.4 Interest maintenance reserve (IMR, Line 6) .....	0	0
10. Commissions to agents due or accrued-life and annuity contracts \$ ..... 49,764 accident and health \$ ..... 3,314,709 and deposit-type contract funds \$ .....	3,364,473	3,028,811
11. Commissions and expense allowances payable on reinsurance assumed .....		
12. General expenses due or accrued (Exhibit 2, Line 12, Col. 7) .....	4,211,034	3,115,028
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) .....	1,348,068	1,417,584
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 .....	134	1,547
18. Amounts held for agents' account, including \$ ..... agents' credit balances .....		1,549,775
19. Remittances and items not allocated .....	(336,541)	537,644
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 \$ ..... 23,000,000 and interest thereon \$ ..... 660,799 .....	23,660,799	
23. Dividends to stockholders declared and unpaid .....		
24. Miscellaneous liabilities:		
24.01 Asset valuation reserve (AVR, Line 16, Col. 7) .....	14,526,186	11,382,212
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 .....	61,667	736
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 .....		1,450,000
24.10 Payable for securities lending .....		
24.11 Capital notes \$ ..... and interest thereon \$ .....		
25. Aggregate write-ins for liabilities .....	3,127,947	2,561,218
26. Total liabilities excluding Separate Accounts business (Lines 1 to 25) .....	1,958,958,580	1,733,440,768
27. From Separate Accounts Statement .....		
28. Total liabilities (Lines 26 and 27) .....	1,958,958,580	1,733,440,768
29. Common capital stock .....	2,556,000	2,556,000
30. Preferred capital stock .....		
31. Aggregate write-ins for other-than-special surplus funds .....	0	0
32. Surplus notes .....	30,000,000	30,000,000
33. Gross paid in and contributed surplus (Page 3, Line 33, Col. 2 plus Page 4, Line 51.1, Col. 1) .....	77,647,000	77,647,000
34. Aggregate write-ins for special surplus funds .....	7,465,370	6,847,408
35. Unassigned funds (surplus) .....	45,712,210	42,886,449
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) .....	160,824,580	157,380,857
38. Totals of Lines 29, 30 and 37 (Page 4, Line 55) .....	163,380,580	159,936,857
39. Totals of Lines 28 and 38 (Page 2, Line 28, Col. 3) .....	2,122,339,160	1,893,377,625
<b>DETAILS OF WRITE-INS</b>		
2501. Unclaimed Property .....	3,127,947	2,561,218
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) .....	3,127,947	2,561,218
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. Admitted Disallowed IMR .....	7,465,370	6,847,408
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) .....	7,465,370	6,847,408

**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Family Heritage Life Insurance Company of America**  
**SUMMARY OF OPERATIONS**

	1 Current Year	2 Prior Year
1. Premiums and annuity considerations for life and accident and health contracts .....	447,481,322	403,567,310
2. Considerations for supplementary contracts with life contingencies .....	0	0
3. Net investment income (Exhibit of Net Investment Income, Line 17) .....	86,159,367	71,769,653
4. Amortization of Interest Maintenance Reserve (IMR, Line 5) .....	(1,257,118)	(1,080,688)
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) .....	(453,581)	609,501
7. Reserve adjustments on reinsurance ceded .....	0	0
8. Miscellaneous Income:		
8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts .....	0	0
8.2 Charges and fees for deposit-type contracts .....	0	0
8.3 Aggregate write-ins for miscellaneous income .....	0	0
9. Total (Lines 1 to 8.3) .....	531,929,990	474,865,776
10. Death benefits .....	802,012	906,115
11. Matured endowments (excluding guaranteed annual pure endowments) .....	0	0
12. Annuity benefits (Exhibit 8, Part 2, Line 6.4, Cols. 4 + 5 minus Analysis of Operations Summary, Line 18, Col. 1) .....	0	0
13. Disability benefits and benefits under accident and health contracts .....	137,410,454	121,873,298
14. Coupons, guaranteed annual pure endowments and similar benefits .....	0	0
15. Surrender benefits and withdrawals for life contracts .....	583,906	370,983
16. Group conversions .....	0	0
17. Interest and adjustments on contract or deposit-type contract funds .....	2,297,816	1,796
18. Payments on supplementary contracts with life contingencies .....	0	0
19. Increase in aggregate reserves for life and accident and health contracts .....	158,320,225	145,815,548
20. Totals (Lines 10 to 19) .....	299,414,413	268,967,740
21. Commissions on premiums, annuity considerations, and deposit-type contract funds (direct business only) (Exhibit 1, Part 2, Line 31, Col. 1) .....	101,678,527	93,145,911
22. Commissions and expense allowances on reinsurance assumed (Exhibit 1, Part 2, Line 26.2, Col. 1) .....	0	0
23. General insurance expenses and fraternal expenses (Exhibit 2, Line 10, Columns 1, 2, 3, 4 and 6) .....	54,102,013	47,763,827
24. Insurance taxes, licenses and fees, excluding federal income taxes (Exhibit 3, Line 7, Cols. 1 + 2 + 3 + 5) .....	9,541,392	8,791,802
25. Increase in loading on deferred and uncollected premiums .....	9,474	19,383
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) .....	464,745,819	418,688,663
29. Net gain from operations before dividends to policyholders, refunds to members and federal income taxes (Line 9 minus Line 28) .....	67,184,171	56,177,113
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) .....	67,184,171	56,177,113
32. Federal and foreign income taxes incurred (excluding tax on capital gains) .....	13,927,080	12,289,938
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) .....	53,257,091	43,887,175
34. Net realized capital gains (losses) (excluding gains (losses) transferred to the IMR) less capital gains tax of \$ (243,548) (excluding taxes of \$ (498,439) transferred to the IMR) .....	(415,881)	(8,020,106)
35. Net income (Line 33 plus Line 34) .....	52,841,210	35,867,069
<b>CAPITAL AND SURPLUS ACCOUNT</b>		
36. Capital and surplus, December 31, prior year (Page 3, Line 38, Col. 2) .....	159,936,857	156,091,401
37. Net income (Line 35) .....	52,841,210	35,867,069
38. Change in net unrealized capital gains (losses) less capital gains tax of \$ (63,000) .....	(236,968)	1,342,549
39. Change in net unrealized foreign exchange capital gain (loss) .....	0	0
40. Change in net deferred income tax .....	6,812,000	5,543,000
41. Change in nonadmitted assets .....	(16,961,476)	3,446,483
42. Change in liability for reinsurance in unauthorized and certified companies .....	0	0
43. Change in reserve on account of change in valuation basis (increase) or decrease .....	0	0
44. Change in asset valuation reserve .....	(3,143,974)	2,607,718
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 .....	0	0
47. Other changes in surplus in Separate Accounts Statement .....	0	0
48. Change in surplus notes .....	0	0
49. Cumulative effect of changes in accounting principles .....	0	0
50. Capital changes:		
50.1 Paid in .....	0	0
50.2 Transferred from surplus (Stock Dividend) .....	0	0
50.3 Transferred to surplus .....	0	0
51. Surplus adjustment:		
51.1 Paid in .....	0	0
51.2 Transferred to capital (Stock Dividend) .....	0	0
51.3 Transferred from capital .....	0	0
51.4 Change in surplus as a result of reinsurance .....	0	0
52. Dividends to stockholders .....	(35,867,069)	(44,961,363)
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) .....	3,443,723	3,845,456
55. Capital and surplus, December 31, current year (Lines 36 + 54) (Page 3, Line 38) .....	163,380,580	159,936,857
<b>DETAILS OF WRITE-INS</b>		
08.301. ....	0	0
08.302. ....	0	0
08.303. ....	0	0
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) .....	0	0
2701. ....	0	0
2702. ....	0	0
2703. ....	0	0
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. ....	0	0
5302. ....	0	0
5303. ....	0	0
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 Family Heritage Life Insurance Company of America  
**CASH FLOW**

	1 Current Year	2 Prior Year
<b>Cash from Operations</b>		
1. Premiums collected net of reinsurance .....	436,890,437	402,280,721
2. Net investment income .....	77,888,596	62,255,228
3. Miscellaneous income .....	(1,453,581)	609,501
4. Total (Lines 1 through 3) .....	513,325,452	465,145,450
5. Benefit and loss related payments .....	136,879,081	119,704,147
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts .....	0	0
7. Commissions, expenses paid and aggregate write-ins for deductions .....	166,168,770	150,661,382
8. Dividends paid to policyholders .....	0	0
9. Federal and foreign income taxes paid (recovered) net of \$ ..... tax on capital gains (losses) .....	13,112,873	9,283,009
10. Total (Lines 5 through 9) .....	316,160,724	279,648,538
11. Net cash from operations (Line 4 minus Line 10) .....	197,164,728	185,496,912
<b>Cash from Investments</b>		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds .....	85,816,932	48,023,935
12.2 Stocks .....	0	0
12.3 Mortgage loans .....	0	0
12.4 Real estate .....	0	0
12.5 Other invested assets .....	3,018,484	19,768,767
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) .....	88,835,416	67,792,702
13. Cost of investments acquired (long-term only):		
13.1 Bonds .....	203,049,200	178,881,592
13.2 Stocks .....	1,197,600	1,208,400
13.3 Mortgage loans .....	14,819,201	38,266,536
13.4 Real estate .....	0	0
13.5 Other invested assets .....	70,802,560	24,961,661
13.6 Miscellaneous applications .....	0	0
13.7 Total investments acquired (Lines 13.1 to 13.6) .....	289,868,561	243,318,189
14. Net increase/(decrease) in contract loans and premium notes .....	78,321	67,289
15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14) .....	(201,111,466)	(175,592,776)
<b>Cash from Financing and Miscellaneous Sources</b>		
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 .....	23,000,000	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities .....	35,133,852	20,098,528
16.5 Dividends to stockholders .....	35,867,069	44,961,363
16.6 Other cash provided (applied) .....	(30,115,887)	6,446,262
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6) .....	(7,849,104)	(18,416,573)
<b>RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS</b>		
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) .....	(11,795,842)	(8,512,437)
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year .....	238,923	8,751,360
19.2 End of year (Line 18 plus Line 19.1) .....	(11,556,919)	238,923

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

20.0001. Bond for bond exchanges excluded from investments sold and investments acquired .....	6,393,380
20.0002. Unsettled bond purchases excluded from investments acquired and miscellaneous proceeds .....	1,450,000
20.0003. Non-cash market value adjustment excluded from Investment income and miscellaneous proceeds .....	273,385
20.0004. Unsettled bond sales excluded from investments sold and miscellaneous applications .....	70,021
20.0005. Non-cash stock dividends excluded from net investment income and investments acquired .....	222,800
	90,600

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Family Heritage Life Insurance Company of America

## **ANALYSIS OF OPERATIONS BY LINES OF BUSINESS - SUMMARY**

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Family Heritage Life Insurance Company of America  
**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 <sup>(a)</sup> .....	6,614,542		6,614,542									
2. Considerations for supplementary contracts with life contingencies .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3. Net investment income .....	1,071,400		1,071,400									
4. Amortization of Interest Maintenance Reserve (IMR) .....	(15,632)	0	(15,632)									
5. Separate Accounts net gain from operations excluding unrealized gains or losses .....	0											
6. Commissions and expense allowances on reinsurance ceded .....	63		63									
7. Reserve adjustments on reinsurance ceded .....	0											
8. Miscellaneous Income:												
8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts .....	0											
8.2 Charges and fees for deposit-type contracts .....	0			0	0	0	0	0	0	0	0	0
8.3 Aggregate write-ins for miscellaneous income .....	0	0	0	0	0	0	0	0	0	0	0	0
9. Totals (Lines 1 to 8.3) .....	7,670,373	0	7,670,373	0	0	0	0	0	0	0	0	0
10. Death benefits .....	802,012		802,012									
11. Matured endowments (excluding guaranteed annual pure endowments) .....	0											
12. Annuity benefits .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13. Disability benefits and benefits under accident and health contracts .....	0											
14. Coupons, guaranteed annual pure endowments and similar benefits .....	0											
15. Surrender benefits and withdrawals for life contracts .....	583,906		583,906									
16. Group conversions .....	0											
17. Interest and adjustments on contract or deposit-type contract funds .....	29,327		29,327									
18. Payments on supplementary contracts with life contingencies .....	0											
19. Increase in aggregate reserves for life and accident and health contracts .....	2,157,353		2,157,353									
20. Totals (Lines 10 to 19) .....	3,572,598	0	3,572,598	0	0	0	0	0	0	0	0	0
21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only) .....	1,854,289		1,854,289									XXX
22. Commissions and expense allowances on reinsurance assumed .....	0											
23. General insurance expenses .....	1,180,116		1,180,116									
24. Insurance taxes, licenses and fees, excluding federal income taxes .....	143,122		143,122									
25. Increase in loading on deferred and uncollected premiums .....	9,474		9,474									
26. Net transfers to or (from) Separate Accounts net of reinsurance .....	0											
27. Aggregate write-ins for deductions .....	0	0	0	0	0	0	0	0	0	0	0	0
28. Totals (Lines 20 to 27) .....	6,759,599	0	6,759,599	0	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) .....	910,774	0	910,774	0	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) .....	910,774	0	910,774	0	0	0	0	0	0	0	0	0
32. Federal income taxes incurred (excluding tax on capital gains) .....	188,801		188,801									
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) .....	721,973	0	721,973	0	0	0	0	0	0	0	0	0
34. Policies/certificates in force end of year .....	0											
<b>DETAILS OF WRITE-INS</b>												
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.)

Analysis of Operations by Lines of Business - Group Life Insurance  
**N O N E**

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

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

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Family Heritage Life Insurance Company of America

**ANALYSIS OF OPERATIONS BY LINES OF BUSINESS - ACCIDENT AND HEALTH (a)**

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	11	12	13
		2	3										
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health
1. Premiums for accident and health contracts .....	440,866,780												440,866,780
2. Considerations for supplementary contracts with life contingencies .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3. Net investment income .....	85,087,967												85,087,967
4. Amortization of Interest Maintenance Reserve (IMR) .....	(1,241,486)												(1,241,486)
5. Separate Accounts net gain from operations excluding unrealized gains or losses .....	0												
6. Commissions and expense allowances on reinsurance ceded .....	(453,644)												(453,644)
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 .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
8.3 Aggregate write-ins for miscellaneous income .....	0	0	0	0	0	0	0	0	0	0	0	0	0
9. Totals (Lines 1 to 8.3) .....	524,259,617	0	0	0	0	0	0	0	0	0	0	0	524,259,617
10. Death benefits .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
11. Matured endowments (excluding guaranteed annual pure endowments) .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
12. Annuity benefits .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13. Disability benefits and benefits under accident and health contracts .....	137,410,454												137,410,454
14. Coupons, guaranteed annual pure endowments and similar benefits .....	0												
15. Surrender benefits and withdrawals for life contracts .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
16. Group conversions .....	0												
17. Interest and adjustments on contract or deposit-type contract funds .....	2,268,489												2,268,489
18. Payments on supplementary contracts with life contingencies .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
19. Increase in aggregate reserves for life and accident and health contracts .....	156,162,872												156,162,872
20. Totals (Lines 10 to 19) .....	295,841,815	0	0	0	0	0	0	0	0	0	0	0	295,841,815
21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only) .....	99,824,238												99,824,238
22. Commissions and expense allowances on reinsurance assumed .....	0												
23. General insurance expenses .....	52,921,897												52,921,897
24. Insurance taxes, licenses and fees, excluding federal income taxes .....	9,398,270												9,398,270
25. Increase in loading on deferred and uncollected premiums .....	0												
26. Net transfers to or (from) Separate Accounts net of reinsurance .....	0												
27. Aggregate write-ins for deductions .....	0	0	0	0	0	0	0	0	0	0	0	0	0
28. Totals (Lines 20 to 27) .....	457,986,220	0	0	0	0	0	0	0	0	0	0	0	457,986,220
29. Net gain from operations before dividends to policyholders, and refunds to members and federal income taxes (Line 9 minus Line 28) .....	66,273,397	0	0	0	0	0	0	0	0	0	0	0	66,273,397
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) .....	66,273,397	0	0	0	0	0	0	0	0	0	0	0	66,273,397
32. Federal income taxes incurred (excluding tax on capital gains) .....	13,738,279												13,738,279
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) .....	52,535,118	0	0	0	0	0	0	0	0	0	0	0	52,535,118
34. Policies/certificates in force end of year .....	0												
<b>DETAILS OF WRITE-INS</b>													
08.301. ....													
08.302. ....													
08.303. ....													
08.398. Summary of remaining write-ins for Line 8.3 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0	0
08.399. Totals (Lines 08.301 through 08.303 plus 08.398) (Line 8.3 above) .....	0	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	0
2799. Totals (Lines 2701 through 2703 plus 2798) (Line 27 above) .....	0	0	0	0	0	0	0	0	0	0	0	0	0

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

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Family Heritage Life Insurance Company of America  
**ANALYSIS OF INCREASE IN RESERVES DURING THE YEAR - INDIVIDUAL LIFE INSURANCE <sup>(a)</sup>**

	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 <sup>(b)</sup> (N/A Fraternal)	11 Other Individual Life	12 YRT Mortality Risk Only
<b>Involving Life or Disability Contingencies (Reserves)</b> (Net of Reinsurance Ceded)												
1. Reserve December 31 of prior year .....	19,963,987	0	19,963,987	0	0	0	0	0	0	0	0	0
2. Tabular net premiums or considerations .....	4,481,676		4,481,676									
3. Present value of disability claims incurred .....	0											
4. Tabular interest .....	779,936		779,936									
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) .....	25,225,599	0	25,225,599	0	0	0	0	0	0	0	0	0
9. Tabular cost .....	1,602,732		1,602,732									
10. Reserves released by death .....	170,014		170,014									
11. Reserves released by other terminations (net) .....	1,331,513		1,331,513									
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) .....	3,104,259	0	3,104,259	0	0	0	0	0	0	0	0	0
15. Reserve December 31 of current year .....	22,121,340	0	22,121,340	0	0	0	0	0	0	0	0	0
<b>Cash Surrender Value and Policy Loans</b>												
16. CSV Ending balance December 31, current year .....	9,293,019		9,293,019									
17. Amount Available for Policy Loans Based upon Line 16 CSV .....	9,293,019		9,293,019									

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

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

Analysis of Increase in Reserves During the Year - Group Life Insurance  
**N O N E**

Analysis of Increase in Reserves During the Year - Individual Annuities  
**N O N E**

Analysis of Increase in Reserves During the Year - Group Annuities  
**N O N E**

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Family Heritage Life Insurance Company of America  
**EXHIBIT OF NET INVESTMENT INCOME**

	1 Collected During Year	2 Earned During Year
1. U.S. Government bonds .....	(a) ..... 940,877	944,554
1.1 Bonds exempt from U.S. tax .....	(a) ..... 0	0
1.2 Other bonds (unaffiliated) .....	(a) ..... 79,515,406	80,100,255
1.3 Bonds of affiliates .....	(a) ..... 0	0
2.1 Preferred stocks (unaffiliated) .....	(b) ..... 0	0
2.11 Preferred stocks of affiliates .....	(b) ..... 0	0
2.2 Common stocks (unaffiliated) .....	223,227	223,227
2.21 Common stocks of affiliates .....	0	0
3. Mortgage loans .....	(c) ..... 3,953,485	4,090,359
4. Real estate .....	(d) ..... 0	0
5. Contract loans .....	30,288	30,288
6. Cash, cash equivalents and short-term investments .....	(e) ..... 840,647	840,647
7. Derivative instruments .....	(f) ..... 0	0
8. Other invested assets .....	8,450,984	9,906,213
9. Aggregate write-ins for investment income .....	1,439,869	1,439,869
10. Total gross investment income .....	95,394,783	97,575,413
11. Investment expenses .....	(g) ..... 3,513,893	
12. Investment taxes, licenses and fees, excluding federal income taxes .....	(g) ..... 0	
13. Interest expense .....	(h) ..... 3,585,514	
14. Depreciation on real estate and other invested assets .....	(i) ..... 0	
15. Aggregate write-ins for deductions from investment income .....	4,316,639	
16. Total deductions (Lines 11 through 15) .....	11,416,046	
17. Net investment income (Line 10 minus Line 16) .....	86,159,367	
<b>DETAILS OF WRITE-INS</b>		
0901. Agents Balances .....	847,511	847,511
0902. Intercompany Interest Income .....	318,951	318,951
0903. Corporate Owned Life Insurance .....	273,385	273,385
0998. Summary of remaining write-ins for Line 9 from overflow page .....	22	22
0999. Totals (Lines 0901 through 0903 plus 0998) (Line 9, above) .....	1,439,869	1,439,869
1501. Amortization of Tax Credit Fund .....	4,316,639	
1502. .....	0	
1503. .....	0	
1598. Summary of remaining write-ins for Line 15 from overflow page .....	0	
1599. Totals (Lines 1501 through 1503 plus 1598) (Line 15, above) .....	4,316,639	

(a) Includes \$ ..... 13,229,056 accrual of discount less \$ ..... 2,012,847 amortization of premium and less \$ ..... 1,539,329 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 \$ ..... 74,648 accrual of discount less \$ ..... 0 amortization of premium and less \$ ..... 0 paid for accrued interest on purchases.

(d) Includes \$ ..... 0 for company's occupancy of its own buildings; and excludes \$ ..... 0 interest on encumbrances.

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

(f) Includes \$ ..... 0 accrual of discount less \$ ..... 0 amortization of premium.

(g) Includes \$ ..... 0 investment expenses and \$ ..... 0 investment taxes, licenses and fees, excluding federal income taxes, attributable to Segregated and Separate Accounts.

(h) Includes \$ ..... 0 interest on surplus notes and \$ ..... 0 interest on capital notes.

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

**EXHIBIT OF CAPITAL GAINS (LOSSES)**

	1 Realized Gain (Loss) On Sales or Maturity	2 Other Realized Adjustments	3 Total Realized Capital Gain (Loss) (Columns 1 + 2)	4 Change in Unrealized Capital Gain (Loss)	5 Change in Unrealized Foreign Exchange Capital Gain (Loss)
1. U.S. Government bonds .....	.0	0	0	0	0
1.1 Bonds exempt from U.S. tax .....			0		
1.2 Other bonds (unaffiliated) .....	(2,373,519)	(659,428)	(3,032,947)	0	0
1.3 Bonds of affiliates .....	.0	0	0	0	0
2.1 Preferred stocks (unaffiliated) .....	.0	0	0	0	0
2.11 Preferred stocks of affiliates .....	.0	0	0	0	0
2.2 Common stocks (unaffiliated) .....	.0	0	0	0	0
2.21 Common stocks of affiliates .....	.0	0	0	0	0
3. Mortgage loans .....			0	0	0
4. Real estate .....		0	0	0	0
5. Contract loans .....	0	0	0	0	0
6. Cash, cash equivalents and short-term investments .....	0	0	0	0	0
7. Derivative instruments .....	0	0	0	0	0
8. Other invested assets .....	0	0	0	(299,969)	0
9. Aggregate write-ins for capital gains (losses) .....	0	0	0	0	0
10. Total capital gains (losses) .....	(2,373,519)	(659,428)	(3,032,947)	(299,969)	0
<b>DETAILS OF WRITE-INS</b>					
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 Family Heritage Life Insurance Company of America

## 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
<b>FIRST YEAR (other than single)</b>								
1. Uncollected .....	2,757,137	47,044				2,710,093		
2. Deferred and accrued .....	38,932	38,932						
3. Deferred , accrued and uncollected:								
3.1 Direct .....	2,796,069	85,976				2,710,093		
3.2 Reinsurance assumed .....	0							
3.3 Reinsurance ceded .....	0							
3.4 Net (Line 1 + Line 2) .....	2,796,069	85,976	0	0	0	2,710,093	0	0
4. Advance .....	0							
5. Line 3.4 - Line 4 .....	2,796,069	85,976	0	0	0	2,710,093	0	0
6. Collected during year:								
6.1 Direct .....	81,127,007	1,192,608				79,934,399		
6.2 Reinsurance assumed .....	0							
6.3 Reinsurance ceded .....	0							
6.4 Net .....	81,127,007	1,192,608	0	0	0	79,934,399	0	0
7. Line 5 + Line 6.4 .....	83,923,076	1,278,584	0	0	0	82,644,492	0	0
8. Prior year (uncollected + deferred and accrued - advance) .....	2,419,368	82,739	0	0	0	2,336,629	0	0
9. First year premiums and considerations:								
9.1 Direct .....	81,503,708	1,195,845				80,307,863		
9.2 Reinsurance assumed .....	0							
9.3 Reinsurance ceded .....	0							
9.4 Net (Line 7 - Line 8) .....	81,503,708	1,195,845	0	0	0	80,307,863	0	0
<b>SINGLE</b>								
10. Single premiums and considerations:								
10.1 Direct .....	0							
10.2 Reinsurance assumed .....	0							
10.3 Reinsurance ceded .....	0							
10.4 Net .....	0	0	0	0	0	0	0	0
<b>RENEWAL</b>								
11. Uncollected .....	10,810,596	140,280				10,670,316		
12. Deferred and accrued .....	1,183,486	1,183,486						
13. Deferred, accrued and uncollected:								
13.1 Direct .....	11,994,365	1,324,049				10,670,316		
13.2 Reinsurance assumed .....	0							
13.3 Reinsurance ceded .....	283	283						
13.4 Net (Line 11 + Line 12) .....	11,994,082	1,323,766	0	0	0	10,670,316	0	0
14. Advance .....	0							
15. Line 13.4 - Line 14 .....	11,994,082	1,323,766	0	0	0	10,670,316	0	0
16. Collected during year:								
16.1 Direct .....	356,116,235	5,575,439				350,540,796		
16.2 Reinsurance assumed .....	0							
16.3 Reinsurance ceded .....	(9,547,810)	100,715				(9,648,525)		
16.4 Net .....	365,664,045	5,474,724	0	0	0	360,189,321	0	0
17. Line 15 + Line 16.4 .....	377,658,127	6,798,490	0	0	0	370,859,637	0	0
18. Prior year (uncollected + deferred and accrued - advance) .....	11,680,513	1,379,793	0	0	0	10,300,720	0	0
19. Renewal premiums and considerations:								
19.1 Direct .....	356,364,980	5,519,412				350,845,568		
19.2 Reinsurance assumed .....	0							
19.3 Reinsurance ceded .....	(9,612,634)	100,715				(9,713,349)		
19.4 Net (Line 17 - Line 18) .....	365,977,614	5,418,697	0	0	0	360,558,917	0	0
<b>TOTAL</b>								
20. Total premiums and annuity considerations:								
20.1 Direct .....	437,868,688	6,715,257	0	0	0	431,153,431	0	0
20.2 Reinsurance assumed .....	0	0	0	0	0	0	0	0
20.3 Reinsurance ceded .....	(9,612,634)	100,715	0	0	0	(9,713,349)	0	0
20.4 Net (Lines 9.4 + 10.4 + 19.4) .....	447,481,322	6,614,542	0	0	0	440,866,780	0	0

## ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Family Heritage Life Insurance Company of America

**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
<b>POLICYHOLDERS' DIVIDENDS, REFUNDS TO MEMBERS AND COUPONS APPLIED (included in Part 1)</b>								
21. To pay renewal premiums .....	0							
22. All other .....	0							
<b>REINSURANCE COMMISSIONS AND EXPENSE ALLOWANCES INCURRED</b>								
23. First year (other than single):								
23.1 Reinsurance ceded .....	0							
23.2 Reinsurance assumed .....	0							
23.3 Net ceded less assumed .....	0	0	0	0	0	0	0	0
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 .....	(453,581)	63					(453,644)	
25.2 Reinsurance assumed .....	0							
25.3 Net ceded less assumed .....	(453,581)	63	0	0	0	(453,644)	0	0
26. Totals:								
26.1 Reinsurance ceded (Page 6, Line 6) .....	(453,581)	63	0	0	0	(453,644)	0	0
26.2 Reinsurance assumed (Page 6, Line 22) .....	0	0	0	0	0	0	0	0
26.3 Net ceded less assumed .....	(453,581)	63	0	0	0	(453,644)	0	0
<b>COMMISSIONS INCURRED (direct business only)</b>								
27. First year (other than single) .....	65,621,235	1,490,554				64,130,681		
28. Single .....	0							
29. Renewal .....	36,057,292	363,735				35,693,557		
30. Deposit-type contract funds .....	0							
31. Totals (to agree with Page 6, Line 21)	101,678,527	1,854,289	0	0	0	99,824,238	0	0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Family Heritage Life Insurance Company of America  
**EXHIBIT 2 - GENERAL EXPENSES**

	Insurance			5	6	7	
	1 Life	Accident and Health			4 All Other Lines of Business		
		2 Cost Containment	3 All Other				
1. Rent .....	6,610		434,039			440,649	
2. Salaries and wages .....	337,460		22,159,856			22,497,316	
3.11 Contributions for benefit plans for employees .....	23,552		1,546,602			1,570,154	
3.12 Contributions for benefit plans for agents .....						0	
3.21 Payments to employees under non-funded benefit plans .....						0	
3.22 Payments to agents under non-funded benefit plans .....						0	
3.31 Other employee welfare .....			205,619			205,619	
3.32 Other agent welfare .....						0	
4.1 Legal fees and expenses .....			1,722,466			1,722,466	
4.2 Medical examination fees .....						0	
4.3 Inspection report fees .....	83,923					83,923	
4.4 Fees of public accountants and consulting actuaries .....			501,972			501,972	
4.5 Expense of investigation and settlement of policy claims .....			64,729			64,729	
5.1 Traveling expenses .....			545,153			545,153	
5.2 Advertising .....			118,962			118,962	
5.3 Postage, express, telegraph and telephone .....			1,289,070			1,289,070	
5.4 Printing and stationery .....			480,766			480,766	
5.5 Cost or depreciation of furniture and equipment .....			42,172			42,172	
5.6 Rental of equipment .....			44,344			44,344	
5.7 Cost or depreciation of EDP equipment and software .....			7,519,051			7,519,051	
6.1 Books and periodicals .....			25,602			25,602	
6.2 Bureau and association fees .....			21,672			21,672	
6.3 Insurance, except on real estate .....			130,958			130,958	
6.4 Miscellaneous losses .....						0	
6.5 Collection and bank service charges .....				525,893		525,893	
6.6 Sundry general expenses .....			469,733			469,733	
6.7 Group service and administration fees .....						0	
6.8 Reimbursements by uninsured plans .....						0	
7.1 Agency expense allowance .....						0	
7.2 Agents' balances charged off (less \$ recovered) .....			208,356			208,356	
7.3 Agency conferences other than local meetings .....	62,559		4,108,069			4,170,628	
8.1 Official publication (Fraternal Benefit Societies Only) .....	XXX	XXX	XXX	XXX	XXX	0	
8.2 Expense of supreme lodge meetings (Fraternal Benefit Societies Only) .....	XXX	XXX	XXX	XXX	XXX	0	
9.1 Real estate expenses .....						0	
9.2 Investment expenses not included elsewhere .....				2,988,000		2,988,000	
9.3 Aggregate write-ins for expenses .....	666,012	0	11,282,706	0	0	11,948,718	
10. General expenses incurred .....	1,180,116	0	52,921,897	0	3,513,893	(b) 0 (a) 57,615,906	
11. General expenses unpaid Dec. 31, prior year .....	35,550		3,044,063		35,415	3,115,028	
12. General expenses unpaid Dec. 31, current year .....	45,055		4,145,034		20,945	4,211,034	
13. Amounts receivable relating to uninsured plans, prior year .....						0	
14. Amounts receivable relating to uninsured plans, current year .....						0	
15. General expenses paid during year (Lines 10+11-12-13-14) .....	1,170,611	0	51,820,926	0	3,528,363	0 56,519,900	
<b>DETAILS OF WRITE-INS</b>							
09.301. Sales, Awards and Incentives .....	151,357		9,939,076			10,090,433	
09.302. Consultant Fees .....			739,773			739,773	
09.303. Life Administrator Fees .....	514,655					514,655	
09.398. Summary of remaining write-ins for Line 9.3 from overflow page .....	0	0	603,857	0	0	0	
09.399. Totals (Lines 09.301 through 09.303 plus 09.398) (Line 9.3 above) .....	666,012	0	11,282,706	0	0	11,948,718	

(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 Investment	5 Fraternal	6 Total
	1 Life	2 Accident and Health	3 All Other Lines of Business			
1. Real estate taxes .....						0
2. State insurance department licenses and fees .....	5,783	379,755				385,538
3. State taxes on premiums .....	122,724	8,058,859				8,181,583
4. Other state taxes, including \$ for employee benefits .....	53	3,450				3,503
5. U.S. Social Security taxes .....	11,229	737,361				748,590
6. All other taxes .....	3,333	218,845				222,178
7. Taxes, licenses and fees incurred .....	143,122	9,398,270	0	0	0	9,541,392
8. Taxes, licenses and fees unpaid Dec. 31, prior year .....	21,264	1,396,320				1,417,584
9. Taxes, licenses and fees unpaid Dec. 31, current year .....	20,221	1,327,847				1,348,068
10. Taxes, licenses and fees paid during year (Lines 7 + 8 - 9) .....	144,165	9,466,743	0	0	0	9,610,908

**EXHIBIT 4 - DIVIDENDS OR REFUNDS**

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

**NONE**

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Family Heritage Life Insurance Company of America

## **EXHIBIT 5 - AGGREGATE RESERVE FOR LIFE CONTRACTS**

1 Valuation Standard	2 Total <sup>(a)</sup>	3 Industrial	4 Ordinary	5 Credit (Group and Individual)	6 Group
0100001. 80 CSO 4.5% NLP IDB 01-06	69,032		69,032		
0100002. 01 CSO 4.0% NLP IDB 07-12	160,249		160,249		
0100003. 01 CSO 3.5% NLP IDB 13-18	18,876		18,876		
0100004. 01 CSO 4.0% CRVM, IDB 07-12	2,139,822		2,139,822		
0100005. 01 CSO 4.25% CRVM, IDB 07-12	1,449,028		1,449,028		
0100006. 01 CSO 3.5% CRVM, IDB 13-18	9,780,330		9,780,330		
0100007. 01 CSO 3.75% CRVM, IDB 13-18	3,507,128		3,507,128		
0100008. CSO/AE VM20 3.5% NPR 19-20	1,892,892		1,892,892		
0100009. CSO/AE VM20 4.5% NPR 19-20	53		53		
0100010. CSO/AE VM20 4.75% NPR 19-20	492,208		492,208		
0100011. CSO/AE VM20 3.0% NPR 21-24	2,457,948		2,457,948		
0100012. CSO/AE VM20 3.75% NPR 21-24	190		190		
0100013. CSO/AE VM20 4.0% NPR 21-24	30,178		30,178		
0199997. Totals (Gross)	21,997,934	0	21,997,934	0	0
0199998. Reinsurance ceded	12,673		12,673		
0199999. Life Insurance: Totals (Net)	21,985,261	0	21,985,261	0	0
0299998. Reinsurance ceded	0	XXX		XXX	
0299999. Annuities: Totals (Net)	0	XXX	0	XXX	0
0399998. Reinsurance ceded	0				
0399999. SCWLC: Totals (Net)	0	0	0	0	0
0400001. 59 ADB 4.5% NLP IDB 01-06	1,698		1,698		
0400002. 59 ADB 4.0% NLP IDB 07	8,581		8,581		
0400003. 59 ADB 3% ALB NLP IDB 07-NB	125,800		125,800		
0499997. Totals (Gross)	136,079	0	136,079	0	0
0499998. Reinsurance ceded	0				
0499999. Accidental Death Benefits: Totals (Net)	136,079	0	136,079	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
0799998. Reinsurance ceded	0				
0799999. Miscellaneous Reserves: Totals (Net)	0	0	0	0	0
9999999. Totals (Net) - Page 3, Line 1	22,121,340	0	22,121,340	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 Family Heritage Life Insurance Company of America  
**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.

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.

3. Does the reporting entity at present issue or have in force contracts that contain non-guaranteed elements? ..... Yes [ ] No [ X ]  
 If so, attach a statement that contains the determination procedures, answers to the interrogatories and an actuarial opinion as described in the instructions.

4. Has the reporting entity any assessment or stipulated premium contracts in force? ..... Yes [ ] No [ X ]  
 If so, state:  
 4.1 Amount of insurance? ..... \$ .....  
 4.2 Amount of reserve? ..... \$ .....  
 4.3 Basis of reserve:  
 .....  
 4.4 Basis of regular assessments:  
 .....  
 4.5 Basis of special assessments:  
 .....  
 4.6 Assessments collected during the year ..... \$ .....

5. If the contract loan interest rate guaranteed in any one or more of its currently issued contracts is less than 5%, not in advance, state the contract loan rate guarantees on any such contracts.

6. Does the reporting entity hold reserves for any annuity contracts that are less than the reserves that would be held on a standard basis? ..... Yes [ ] No [ X ]  
 6.1 If so, state the amount of reserve on such contracts on the basis actually held: ..... \$ .....

6.2 That would have been held (on an exact or approximate basis) using the actual ages of the annuitants; the interest rate(s) used in 6.1; and the same mortality basis used by the reporting entity for the valuation of comparable annuity benefits issued to standard lives. If the reporting entity has no comparable annuity benefits for standard lives to be valued, the mortality basis shall be the table most recently approved by the state of domicile for valuing individual annuity benefits: ..... \$ .....

Attach statement of methods employed in their valuation.

7. Does the reporting entity have any Synthetic GIC contracts or agreements in effect as of December 31 of the current year? ..... Yes [ ] No [ X ]  
 7.1 If yes, state the total dollar amount of assets covered by these contracts or agreements ..... \$ .....

7.2 Specify the basis (fair value, amortized cost, etc.) for determining the amount:  
 .....  
 7.3 State the amount of reserves established for this business: ..... \$ .....

7.4 Identify where the reserves are reported in the blank:  
 .....

8. Does the reporting entity have any Contingent Deferred Annuity contracts or agreements in effect as of December 31 of the current year? ..... Yes [ ] No [ X ]  
 8.1 If yes, state the total dollar amount of account value covered by these contracts or agreements: ..... \$ .....

8.2 State the amount of reserves established for this business: ..... \$ .....

8.3 Identify where the reserves are reported in the blank:  
 .....

9. Does the reporting entity have any Guaranteed Lifetime Income Benefit contracts, agreements or riders in effect as of December 31 of the current year? ..... Yes [ ] No [ X ]  
 9.1 If yes, state the total dollar amount of any account value associated with these contracts, agreements or riders: ..... \$ .....

9.2 State the amount of reserves established for this business: ..... \$ .....

9.3 Identify where the reserves are reported in the blank:  
 .....

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

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

## ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Family Heritage Life Insurance Company of America

**EXHIBIT 6 - AGGREGATE RESERVES FOR ACCIDENT AND HEALTH CONTRACTS <sup>(a)</sup>**

	1 Total	Comprehensive		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefits Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Credit A&H	11 Disability Income	12 Long-Term Care	13 Other Health
		2 Individual	3 Group										
<b>ACTIVE LIFE RESERVE</b>													
1. Unearned premium reserves .....	22,535,212												22,535,212
2. Additional contract reserves (b) .....	1,766,894,628												1,766,894,628
3. Additional actuarial reserves-Asset/Liability analysis .....	0												
4. Reserve for future contingent benefits .....	0												
5. Reserve for rate credits .....	0												
6. Aggregate write-ins for reserves .....	0	0	0	0	0	0	0	0	0	0	0	0	0
7. Totals (Gross) .....	1,789,429,840	0	0	0	0	0	0	0	0	0	0	0	1,789,429,840
8. Reinsurance ceded .....	0												
9. Totals (Net) .....	1,789,429,840	0	0	0	0	0	0	0	0	0	0	0	1,789,429,840
<b>CLAIM RESERVE</b>													
10. Present value of amounts not yet due on claims .....	4,697,555												4,697,555
11. Additional actuarial reserves-Asset/Liability analysis .....	0												
12. Reserve for future contingent benefits .....	0												
13. Aggregate write-ins for reserves .....	0	0	0	0	0	0	0	0	0	0	0	0	0
14. Totals (Gross) .....	4,697,555	0	0	0	0	0	0	0	0	0	0	0	4,697,555
15. Reinsurance ceded .....	0												
16. Totals (Net) .....	4,697,555	0	0	0	0	0	0	0	0	0	0	0	4,697,555
17. TOTAL (Net) .....	1,794,127,395	0	0	0	0	0	0	0	0	0	0	0	1,794,127,395
18. TABULAR FUND INTEREST .....	64,772,947												64,772,947
<b>DETAILS OF WRITE-INS</b>													
0601. ....													
0602. ....													
0603. ....													
0698. Summary of remaining write-ins for Line 6 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0	0
0699. TOTALS (Lines 0601 through 0603 plus 0698) (Line 6 above) .....	0	0	0	0	0	0	0	0	0	0	0	0	0
1301. ....													
1302. ....													
1303. ....													
1398. Summary of remaining write-ins for Line 13 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0	0
1399. TOTALS (Lines 1301 through 1303 plus 1398) (Line 13 above) .....	0	0	0	0	0	0	0	0	0	0	0	0	0

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

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

## ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Family Heritage Life Insurance Company of America

## 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 .....	20,098,528	0	0	0	0	20,098,528
2. Deposits received during the year .....	35,000,000					35,000,000
3. Investment earnings credited to the account .....	2,297,052					2,297,052
4. Other net change in reserves .....	0					
5. Fees and other charges assessed .....	0					
6. Surrender charges .....	0					
7. Net surrender or withdrawal payments .....	2,163,200					2,163,200
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)	55,232,380	0	0	0	0	55,232,380
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)	55,232,380	0	0	0	0	55,232,380

## (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 Family Heritage Life Insurance Company of America

**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 .....	5,553,646					5,553,646		
1.2 Reinsurance assumed .....	0							
1.3 Reinsurance ceded .....	0							
1.4 Net .....	5,553,646	0	0	0	0	5,553,646	0	0
2. In course of settlement:								
2.1 Resisted .....	0							
2.11 Direct .....	0							
2.12 Reinsurance assumed .....	0							
2.13 Reinsurance ceded .....	0							
2.14 Net .....	0	(b) 0	(b) 0	(b) 0	0	0	0	0
2.2 Other .....	2.21 Direct .....	168,705				168,705		
	2.22 Reinsurance assumed .....	0						
	2.23 Reinsurance ceded .....	0						
	2.24 Net .....	168,705	(b) 0	(b) 0	(b) 0	0	(b) 168,705	0
3. Incurred but unreported:								
3.1 Direct .....	30,239,274	979,000				29,260,274		
3.2 Reinsurance assumed .....	0							
3.3 Reinsurance ceded .....	0							
3.4 Net .....	30,239,274	(b) 979,000	(b) 0	(b) 0	0	(b) 29,260,274	0	0
4. TOTALS .....	4.1 Direct .....	35,961,625	979,000	0	0	34,982,625	0	0
	4.2 Reinsurance assumed .....	0	0	0	0	0	0	0
	4.3 Reinsurance ceded .....	0	0	0	0	0	0	0
	4.4 Net .....	35,961,625	(a) 979,000	(a) 0	0	34,982,625	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 Family Heritage Life Insurance Company of America

**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 .....	134,489,083	883,772				133,605,311		
1.2 Reinsurance assumed .....	0							
1.3 Reinsurance ceded .....	506,297	68,641				437,656		
1.4 Net .....	(c) 133,982,786	815,131	0	0	0	133,167,655	0	0
2. Liability December 31, current year from Part 1:								
2.1 Direct .....	35,961,625	979,000	0	0	0	34,982,625	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 .....	35,961,625	979,000	0	0	0	34,982,625	0	0
3. Amounts recoverable from reinsurers December 31, current year .....	28,403	28,403						
4. Liability December 31, prior year:								
4.1 Direct .....	31,950,205	979,000	0	0	0	30,971,205	0	0
4.2 Reinsurance assumed .....	0	0	0	0	0	0	0	0
4.3 Reinsurance ceded .....	231,379	0	0	0	0	231,379	0	0
4.4 Net .....	31,718,826	979,000	0	0	0	30,739,826	0	0
5. Amounts recoverable from reinsurers December 31, prior year .....	15,284	15,284						
6. Incurred Benefits								
6.1 Direct .....	138,500,503	883,772	0	0	0	137,616,731	0	0
6.2 Reinsurance assumed .....	0	0	0	0	0	0	0	0
6.3 Reinsurance ceded .....	288,037	81,760	0	0	0	206,277	0	0
6.4 Net .....	138,212,466	802,012	0	0	0	137,410,454	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 \$ ..... 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 Family Heritage Life Insurance Company of America  
**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 .....	.....	.....	0
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 .....	44,379,000	37,946,000	(6,433,000)
19. Guaranty funds receivable or on deposit .....	.....	.....	0
20. Electronic data processing equipment and software .....	6,963,372	5,857,754	(1,105,618)
21. Furniture and equipment, including health care delivery assets .....	69,922	112,094	42,172
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 .....	12,274,742	2,809,712	(9,465,030)
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25) .....	63,687,036	46,725,560	(16,961,476)
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts .....	.....	.....	0
28. Total (Lines 26 and 27) .....	63,687,036	46,725,560	(16,961,476)
<b>DETAILS OF WRITE-INS</b>			
1101. .....	.....	.....	.....
1102. .....	.....	.....	.....
1103. .....	.....	.....	.....
1198. Summary of remaining write-ins for Line 11 from overflow page .....	0	0	0
1199. <b>Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)</b> .....	0	0	0
2501. Agents Balances .....	9,826,220	0	(9,826,220)
2502. Prepaid Expenses .....	2,408,025	2,769,215	361,190
2503. Other Assets Nonadmitted .....	40,497	40,497	0
2598. Summary of remaining write-ins for Line 25 from overflow page .....	0	0	0
2599. <b>Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)</b> .....	12,274,742	2,809,712	(9,465,030)

## NOTES TO FINANCIAL STATEMENTS

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

## Company input

	SSAP #	F/S Page	F/S Line #	2024	2023
<b>NET INCOME</b>					
(1) State basis (Page 4, Line 35, Columns 1 & 2)	XXX	XXX	XXX	\$ 52,841,210	\$ 35,867,069
(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	\$ 52,841,210	\$ 35,867,069
<b>SURPLUS</b>					
(5) State basis (Page 3, Line 38, Columns 1 & 2)	XXX	XXX	XXX	\$ 163,380,580	\$ 159,936,857
(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	\$ 163,380,580	\$ 159,936,857

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

The preparation of financial statements in conformity with the Annual Statement Instructions and Accounting Practices and Procedures annual requires the use of management's estimates.

**C. Accounting Policy**

1. Short-term investments are stated at cost or amortized cost.
2. Bonds not backed by other loans are valued at amortized cost using the scientific method.
3. Common stocks are carried at market.
4. Preferred stocks are carried at cost or amortized cost.
5. Mortgage loans are reported at unpaid principal balances, net of any unamortized discount or premium and allowance for loan losses. The loans are secured by the underlying real estate.
6. Loan-backed and other structured securities are stated at amortized cost or the lower of amortized cost or fair value. Anticipated prepayments are used at the time of purchase to determine the effective yield. Changes in the timing of expected cash flows after original acquisition are accounted for using the retrospective method. Securities that are determined to be other-than-temporarily impaired are accounted for using the prospective method.
7. Common stocks of unconsolidated subsidiaries and affiliates in which the Company has an interest of 20% or more are carried on the equity basis.
8. Investments in joint ventures, partnerships and limited liability companies are accounted for using the equity basis.
9. The Company does not have any derivatives.
10. The Company anticipates investment income as a factor in the premium deficiency calculation, in accordance with SSAP No. 54, for Individual and Group Accident and Health Contracts.
11. The Company uses both a developmental lag method (for short-tailed lines of business) and a tabular reserve method (for long-tailed lines of business) in calculating claim liabilities for accident and health contracts. Loss adjustment expenses are calculated as a percentage of paid claims based on historical experience.
12. The Company has not modified its capitalization policy from the prior period.
13. The Company does not have any pharmaceutical rebates receivable so no estimates are made for these.

**D. Going Concern**

After evaluating the Company's ability to continue as a going concern, management was not aware of any conditions or events which raises substantial doubts concerning the Company's ability to continue as a going concern as of the date of the filing of this statement.

**NOTE 2 Accounting Changes and Corrections of Errors**

There were no material changes in accounting principles or corrections of errors in 2024.

**NOTE 3 Business Combinations and Goodwill** Not applicable**NOTE 4 Discontinued Operations** Not applicable**NOTE 5 Investments****A. Mortgage Loans, including Mezzanine Real Estate Loans**

(1) During 2024, the minimum and maximum rates of interest received for new commercial mortgage loans was 8.72%.

(2) During 2024, the maximum percentage of any one loan to value of collateral at the time of the loan was 49.76%.

	Current Year	Prior Year
(3) Taxes, assessments and any amounts advanced and not included in the mortgage loan total	\$ -	\$ -

(4) Age Analysis of Mortgage Loans and Identification of Mortgage Loans in Which the Insurer is a Participant or Co-lender in a Mortgage Loan Agreement:

	Farm	Residential		Commercial		Mezzanine	Total
		Insured	All Other	Insured	All Other		
a. Current Year							
1. Recorded Investment (All)							
(a) Current							
(b) 30 - 59 Days Past Due							
(c) 60 - 89 Days Past Due							
(d) 90 - 179 Days Past Due							
(e) 180+ Days Past Due							
2. Accruing Interest 90 - 179 Days Past Due							
(a) Recorded Investment							
(b) Interest Accrued							
3. Accruing Interest 180+ Days Past Due							
(a) Recorded Investment							

## NOTES TO FINANCIAL STATEMENTS

(b) Interest Accrued					\$ -
4. Interest Reduced					\$ -
(a) Recorded Investment					\$ -
(b) Number of Loans					\$ -
(c) Percent Reduced					\$ -
5. Participant or Co-lender in a Mortgage Loan Agreement				\$56,232,530	\$56,232,530
(a) Recorded Investment					\$56,232,530
b. Prior Year					
1. Recorded Investment (All)				\$41,338,681	\$41,338,681
(a) Current					\$41,338,681
(b) 30 - 59 Days Past Due					\$ -
(c) 60 - 89 Days Past Due					\$ -
(d) 90 - 179 Days Past Due					\$ -
(e) 180+ Days Past Due					\$ -
Due					
(a) Recorded Investment					\$ -
(b) Interest Accrued					\$ -
3. Accruing Interest 180+ Days Past Due					\$ -
(a) Recorded Investment					\$ -
(b) Interest Accrued					\$ -
4. Interest Reduced					\$ -
(a) Recorded Investment					\$ -
(b) Number of Loans					\$ -
(c) Percent Reduced					\$ -
5. Participant or Co-lender in a Mortgage Loan Agreement				\$41,338,681	\$41,338,681
(a) Recorded Investment					\$41,338,681

(5) Investment in Impaired Loans With or Without Allowance for Credit Losses and Impaired Loans Subject to a Participant or Co-lender Mortgage Loan Agreement for Which the Reporting Entity is Restricted from Unilaterally Foreclosing on the Mortgage Loan: Agreement: None

(6) Investment in Impaired Loans- Average Recorded Investment, Interest Income Recognized, Recorded Investment on Nonaccrual Status and Amount of Interest Income Recognized Using a Cash-Basis Method of Accounting: None

(7) Allowance for credit losses: None

(8) Mortgage Loans Derecognized as a Result of Foreclosure: None

(9) Interest income on mortgage loans is accrued and recorded net of servicing fees. Interest that is 180 days past due but that is still deemed collectible is accrued, but non-admitted. Any interest deemed uncollectible is written off as a charge against investment income.

B. Debt Restructuring Not applicable

C. Reverse Mortgages Not applicable

D. Loan-Backed Securities

The Company does not own any residential or commercial mortgage-backed securities. Investment in other structured securities include whole business securitization, and other asset-back securities.

(1) Call, redemption and sinking fund information for other structured securities were obtained from Bloomberg and bond prospectuses.

(2) Recognized OTTI, intent to sell or inability to hold None

(3) Recognized OTTI securities, present value of cash flows less than amortized cost None

(4) a) The aggregate amount of unrealized losses:

1. Less than 12 Months	\$ (4,340)
2. 12 Months or Longer	\$ (295,635)

b) The aggregate related fair value of securities with unrealized losses:

1. Less than 12 Months	\$ 2,808,160
2. 12 Months or Longer	\$ 4,587,458

(5) Several sources of information are considered when determining if impairments are, or are not, other-than-temporary. These include, but are not limited to, the following: Credit rating agency information related to the security is reviewed, in addition to direct discussions with the rating analyst as needed. Reports from third party research providers and sell-side research analysts are reviewed. Market and trading information on the securities and other like-securities is monitored to assess trends impacting the securities. Market liquidity is analyzed to gauge how much it is impacting prices versus actual credit quality changes. Some sources of information will not be available for all securities. Some sources of information will not be available for all securities. Where applicable, additional information is gathered for collateralized investments. This includes analysis of the individual underlying collateral and estimates of potential future collateral performance. Multiple cash flow scenarios are calculated based on various loss rate assumptions and used to assess the likelihood of future possible impairment.

E. Dollar Repurchase Agreements and/or Securities Lending Transactions Not applicable

F. Repurchase Agreements Transactions Accounted for as Secured Borrowing Not applicable

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

H. Repurchase Agreements Transactions Accounted for as a Sale Not applicable

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

J. Real Estate Not applicable

K. Low Income Housing tax Credits (LIHTC)

(1) There are 10 years of remaining unexpired tax credits for low-income housing investments, with a required holding period of 15 years.

(2) The amount of LIHTC and other tax benefits recognized were \$5,578,136 and \$5,514,887 during 2024 and 2023, respectively.

(3) The balance of the investment recognized in the statement of financial position at December 31, 2024 and 2023 was \$26,927,805 and \$25,348,063, respectively.

(4) Currently the LIHTC property is not subject to any regulatory reviews.

## NOTES TO FINANCIAL STATEMENTS

(5) Not applicable

(6) Not applicable

(7) Not applicable

## L. Restricted Assets

## 1. Restricted Assets (Including Pledged)

Restricted Asset Category	Gross (Admitted & Nonadmitted) Restricted						6	7		
	Current Year					Total (1 plus 3)				
	1	2	3	4	5					
Total General Account (G/A)	G/A Supporting S/A Activity (a)	Total Separate Account (S/A) Restricted Assets	S/A Assets Supporting G/A Activity (b)	Total (1 plus 3)	Total From Prior Year	Increase/ (Decrease) (5 minus 6)				
a. Subject to contractual obligation for which liability is not shown				\$ -	\$ -	\$ -	\$ -	\$ -		
b. Collateral held under security lending agreements				\$ -	\$ -	\$ -	\$ -	\$ -		
c. Subject to repurchase agreements				\$ -	\$ -	\$ -	\$ -	\$ -		
d. Subject to reverse repurchase agreements				\$ -	\$ -	\$ -	\$ -	\$ -		
e. Subject to dollar repurchase agreements				\$ -	\$ -	\$ -	\$ -	\$ -		
f. Subject to dollar reverse repurchase agreements				\$ -	\$ -	\$ -	\$ -	\$ -		
g. Placed under option contracts				\$ -	\$ -	\$ -	\$ -	\$ -		
h. Letter stock or securities restricted as to sale - excluding FHLB capital stock				\$ -	\$ -	\$ -	\$ -	\$ -		
i. FHLB capital stock	\$ 4,395,500			\$ 4,395,500	\$ 2,975,100	\$ 1,420,400				
j. On deposit with states	\$ 3,748,737			\$ 3,748,737	\$ 4,093,010	\$ (344,273)				
k. On deposit with other regulatory bodies				\$ -	\$ -	\$ -	\$ -	\$ -		
l. Pledged collateral to FHLB (including assets backing funding agreements)	\$ 336,898,915			\$ 336,898,915	\$ 330,366,787	\$ 6,532,128				
m. Pledged as collateral not captured in other categories				\$ -	\$ -	\$ -	\$ -	\$ -		
n. Other restricted assets				\$ -	\$ -	\$ -	\$ -	\$ -		
<b>o. Total Restricted Assets (Sum of a through n)</b>	<b>\$ 345,043,152</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 345,043,152</b>	<b>\$ 337,434,897</b>	<b>\$ 7,608,255</b>			

(a) Subset of Column 1

(b) Subset of Column 3

Restricted Asset Category	Current Year			
	8	9	Percentage	
			10	11
	Total Non-admitted Restricted	Total Admitted Restricted (5 minus 8)	Gross (Admitted & Non-admitted) Restricted to Total Assets (c)	Admitted Restricted to Total Admitted Assets (d)
a. Subject to contractual obligation for which liability is not shown	\$ -		0.000%	0.000%
b. Collateral held under security lending agreements	\$ -		0.000%	0.000%
c. Subject to repurchase agreements	\$ -		0.000%	0.000%
d. Subject to reverse repurchase agreements	\$ -		0.000%	0.000%
e. Subject to dollar repurchase agreements	\$ -		0.000%	0.000%
f. Subject to dollar reverse repurchase agreements	\$ -		0.000%	0.000%
g. Placed under option contracts	\$ -		0.000%	0.000%
h. Letter stock or securities restricted as to sale - excluding FHLB capital stock	\$ -		0.000%	0.000%
i. FHLB capital stock	\$ 4,395,500		0.201%	0.207%
j. On deposit with states	\$ 3,748,737		0.171%	0.177%
k. On deposit with other regulatory bodies	\$ -		0.000%	0.000%
l. Pledged collateral to FHLB (including assets backing funding agreements)	\$ 336,898,915		15.411%	15.874%
m. Pledged as collateral not captured in other categories	\$ -		0.000%	0.000%
n. Other restricted assets	\$ -		0.000%	0.000%
<b>o. Total Restricted Assets (Sum of a through n)</b>	<b>\$ -</b>	<b>\$ 345,043,152</b>	<b>15.784%</b>	<b>16.258%</b>

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

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

2. Detail of Assets Pledged as Collateral Not Captured in Other Categories (Contracts That Share Similar Characteristics, Such as Reinsurance and Derivatives, Are Reported in the Aggregate) None
3. Detail of Other Restricted Assets (Contracts That Share Similar Characteristics, Such as Reinsurance and Derivatives, Are Reported in the Aggregate) None
4. Collateral Received and Reflected as Assets Within the Reporting Entity's Financial Statements None

M. Working Capital Finance Investments Not applicable

N. Offsetting and Netting of Assets and Liabilities Not applicable

## NOTES TO FINANCIAL STATEMENTS

O. 5GI Securities Not applicable

P. Short Sales Not applicable

Q. Prepayment Penalty and Acceleration Fees

	<u>General Account</u>	<u>Separate Account</u>
1. Number of CUSIPs	27	
2. Aggregate Amount of Investment Income	\$ 124,704	

R. Reporting Entity's Share of Cash Pool by Asset Type Not applicable

S. Aggregate Collateral Loans by Qualifying Investment Collateral None

**NOTE 6 Joint Ventures, Partnerships and Limited Liability Companies** Not Applicable**NOTE 7 Investment Income**

A. All investment income due and accrued on bonds with amounts 90 days past due are excluded from surplus.

B. The total amount of due and accrued investment income excluded from surplus at December 31, 2024 was \$0.

C. The gross, nonadmitted and admitted amounts for interest income due and accrued.

	<u>Amount</u>
1. Gross	\$ 20,783,550
2. Nonadmitted	\$ 20,783,550
3. Admitted	\$ 20,783,550

D. The aggregate deferred interest.

	<u>Amount</u>
Aggregate Deferred Interest	\$ -

E. The cumulative amounts of paid-in-kind (PIK) interest included in the current principal balance.

	<u>Amount</u>
Cumulative amounts of PIK interest included in the current principal balance	\$ -

**NOTE 8 Derivative Instruments** Not applicable**NOTE 9 Income Taxes**

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

	As of End of Current Period			12/31/2023			Change		
	(1) Ordinary	(2) Capital	(3) (Col. 1 + 2) Total	(4) Ordinary	(5) Capital	(6) (Col. 4 + 5) Total	(7) (Col. 1 - 4) Ordinary	(8) (Col. 2 - 5) Capital	(9) (Col. 7 + 8) Total
(a) Gross Deferred Tax Assets	\$64,172,000	\$ 5,192,000	\$69,364,000	\$57,253,000	\$ 6,128,000	\$63,381,000	\$ 6,919,000	\$ (936,000)	\$ 5,983,000
(b) Statutory Valuation Allowance Adjustment	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
(c) Adjusted Gross Deferred Tax Assets (1a - 1b)	\$64,172,000	\$ 5,192,000	\$69,364,000	\$57,253,000	\$ 6,128,000	\$63,381,000	\$ 6,919,000	\$ (936,000)	\$ 5,983,000
(d) Deferred Tax Assets Nonadmitted	\$41,243,000	\$ 3,136,000	\$44,379,000	\$34,382,000	\$ 3,564,000	\$37,946,000	\$ 6,861,000	\$ (428,000)	\$ 6,433,000
(e) Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	\$22,929,000	\$ 2,056,000	\$24,985,000	\$22,871,000	\$ 2,564,000	\$25,435,000	\$ 58,000	\$ (508,000)	\$ (450,000)
(f) Deferred Tax Liabilities	\$ 1,656,000	\$ 2,056,000	\$ 3,712,000	\$ 2,824,000	\$ 1,780,000	\$ 4,604,000	\$ (1,168,000)	\$ 276,000	\$ (892,000)
(g) Net Admitted Deferred Tax Asset/(Net Deferred Tax Liability) (1e - 1f)	\$21,273,000	\$ -	\$21,273,000	\$20,047,000	\$ 784,000	\$20,831,000	\$ 1,226,000	\$ (784,000)	\$ 442,000

The company has not established a statutory valuation allowance in determining its adjusted gross deferred tax assets as management believes that it is more likely than not that all of its gross deferred tax assets will be realized.

2. The amount of admitted adjusted gross deferred tax assets under each component of SSAP No 101 are presented below.

	As of End of Current Period			12/31/2023			Change		
	(1) Ordinary	(2) Capital	(3) (Col. 1 + 2) Total	(4) Ordinary	(5) Capital	(6) (Col. 4 + 5) Total	(7) (Col. 1 - 4) Ordinary	(8) (Col. 2 - 5) Capital	(9) (Col. 7 + 8) Total
Admission Calculation Components SSAP No. 101									
(a) Federal Income Taxes Paid In Prior Years Recoverable Through Loss Carrybacks	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
(b) Adjusted Gross Deferred Tax Assets Expected To Be Realized (Excluding The Amount Of Deferred Tax Assets From 2(a) above) After Application of the Threshold Limitation. (The Lesser of 2(b)1 and 2(b)2 Below)	\$21,273,000	\$ -	\$21,273,000	\$20,047,000	\$ 784,000	\$20,831,000	\$ 1,226,000	\$ (784,000)	\$ 442,000
1. Adjusted Gross Deferred Tax Assets Expected To Be Realized Following the Balance Sheet Date.	\$22,877,000	\$ 1,516,000	\$24,393,000	\$20,047,000	\$ 1,542,000	\$21,589,000	\$ 2,830,000	\$ (26,000)	\$ 2,804,000
2. Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold.	XXX	XXX	\$21,273,000	XXX	XXX	\$20,831,000	XXX	XXX	\$ 442,000
(c) Adjusted Gross Deferred Tax Assets (Excluding The Amount Of Deferred Tax Assets From 2(a) and 2(b) above) Offset by Gross Deferred Tax Liabilities.	\$ 1,656,000	\$ 2,056,000	\$ 3,712,000	\$ 2,824,000	\$ 1,780,000	\$ 4,604,000	\$ (1,168,000)	\$ 276,000	\$ (892,000)
(d) Deferred Tax Assets Admitted as the result of application of SSAP No. 101. Total (2(a) + 2(b) + 2(c))	\$22,929,000	\$ 2,056,000	\$24,985,000	\$22,871,000	\$ 2,564,000	\$25,435,000	\$ 58,000	\$ (508,000)	\$ (450,000)

3.

	<u>2024</u>	<u>2023</u>
a. Ratio Percentage Used To Determine Recovery Period And Threshold Limitation Amount.	950.000%	1051.000%
b. Amount Of Adjusted Capital And Surplus Used To Determine Recovery Period And Threshold Limitation In 2(b)2 Above.	\$ 156,633,766	\$ 150,488,069

## NOTES TO FINANCIAL STATEMENTS

4.

	As of End of Current Period		12/31/2023		Change	
	(1) Ordinary	(2) Capital	(3) Ordinary	(4) Capital	(5) (Col. 1 - 3) Ordinary	(6) (Col. 2 - 4) Capital
<b>Impact of Tax Planning Strategies:</b>						
(a) Determination of adjusted gross deferred tax assets and net admitted deferred tax assets, by tax character as a percentage.						
1. Adjusted Gross DTAs amount from Note 9A1(c)	\$ 64,172,000	\$ 5,192,000	\$ 57,253,000	\$ 6,128,000	\$ 6,919,000	\$ (936,000)
2. Percentage of adjusted gross DTAs by tax character attributable to the impact of tax planning strategies	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%
3. Net Admitted Adjusted Gross DTAs amount from Note 9A1(e)	\$ 22,929,000	\$ 2,056,000	\$ 22,871,000	\$ 2,564,000	\$ 58,000	\$ (508,000)
4. Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of tax planning strategies	34.000%	0.000%	33.000%	0.000%	1.000%	0.000%

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

B. There are no temporary differences for which deferred tax liabilities are not recognized.

The change in deferred income taxes reported in surplus before consideration of nonadmitted assets is comprised of the following components:

	12/31/2024			12/31/2023			Change		
	(1) Ordinary	(2) Capital	(3) (Col. 1 + 2) Total	(4) Ordinary	(5) Capital	(6) (Col. 4 + 5) Total	(7) (Col. 1 - 4) Ordinary	(8) (Col. 2 - 5) Capital	(9) (Col. 7 + 8) Total
Net Deferred Tax Asset (Liability)	\$62,516,000	\$ 3,136,000	\$65,652,000	\$54,429,000	\$ 4,348,000	\$58,777,000	\$ 8,087,000	\$ (1,212,000)	\$ 6,875,000
- Tax-effect of unrealized gains and losses	\$ -	\$ (264,000)	\$ (264,000)	\$ -	\$ (327,000)	\$ (327,000)	\$ -	\$ 63,000	\$ 63,000
- Tax-effect of other surplus gains and losses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Prior Period Adjustment - unrealized gains and losses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Net tax-effect without unrealized gains and losses and prior period adjustments	\$62,516,000	\$ 3,400,000	\$65,916,000	\$54,429,000	\$ 4,675,000	\$59,104,000	\$ 8,087,000	\$ (1,275,000)	\$ 6,812,000

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

	(1) As of End of Current Period	(2)		(3) (Col. 1 - 2) Change
		12/31/2023		
1. Current Income Tax				
(a) Federal	\$ 13,927,080	\$ 12,289,938	\$ 1,637,142	
(b) Foreign	\$ -	\$ -	\$ -	
(c) Subtotal (1a+1b)	\$ 13,927,080	\$ 12,289,938	\$ 1,637,142	
(d) Federal income tax on net capital gains	\$ (741,987)	\$ (2,014,600)	\$ 1,272,613	
(e) Utilization of capital loss carry-forwards	\$ -	\$ -	\$ -	
(f) Other	\$ -	\$ -	\$ -	
(g) Federal and foreign income taxes incurred (1c+1d+1e+1f)	\$ 13,185,093	\$ 10,275,338	\$ 2,909,755	
2. Deferred Tax Assets:				
(a) Ordinary:				
(1) Discounting of unpaid losses	\$ -	\$ -	\$ -	
(2) Unearned premium reserve	\$ -	\$ -	\$ -	
(3) Policyholder reserves	\$ 27,215,000	\$ 24,866,000	\$ 2,349,000	
(4) Investments	\$ -	\$ -	\$ -	
(5) Deferred acquisition costs	\$ 31,247,000	\$ 28,126,000	\$ 3,121,000	
(6) Policyholder dividends accrual	\$ -	\$ -	\$ -	
(7) Fixed assets	\$ -	\$ -	\$ -	
(8) Compensation and benefits accrual	\$ -	\$ -	\$ -	
(9) Pension accrual	\$ -	\$ -	\$ -	
(10) Receivables - nonadmitted	\$ -	\$ -	\$ -	
(11) Net operating loss carry-forward	\$ -	\$ -	\$ -	
(12) Tax credit carry-forward	\$ -	\$ -	\$ -	
(13) Other	\$ 5,710,000	\$ 4,261,000	\$ 1,449,000	
(99) Subtotal (sum of 2a1 through 2a13)	\$ 64,172,000	\$ 57,253,000	\$ 6,919,000	
(b) Statutory valuation allowance adjustment	\$ -	\$ -	\$ -	
(c) Nonadmitted	\$ 41,243,000	\$ 34,382,000	\$ 6,861,000	
(d) Admitted ordinary deferred tax assets (2a99 - 2b - 2c)	\$ 22,929,000	\$ 22,871,000	\$ 58,000	
(e) Capital:				
(1) Investments	\$ 4,266,000	\$ 5,202,000	\$ (936,000)	
(2) Net capital loss carry-forward	\$ -	\$ -	\$ -	
(3) Real estate	\$ -	\$ -	\$ -	
(4) Other	\$ 926,000	\$ 926,000	\$ -	
(99) Subtotal (2e1+2e2+2e3+2e4)	\$ 5,192,000	\$ 6,128,000	\$ (936,000)	
(f) Statutory valuation allowance adjustment	\$ -	\$ -	\$ -	
(g) Nonadmitted	\$ 3,136,000	\$ 3,564,000	\$ (428,000)	
(h) Admitted capital deferred tax assets (2e99 - 2f - 2g)	\$ 2,056,000	\$ 2,564,000	\$ (508,000)	
(i) Admitted deferred tax assets (2d + 2h)	\$ 24,985,000	\$ 25,435,000	\$ (450,000)	
3. Deferred Tax Liabilities:				
(a) Ordinary:				
(1) Investments	\$ -	\$ -	\$ -	
(2) Fixed assets	\$ 55,000	\$ 157,000	\$ (102,000)	
(3) Deferred and uncollected premium	\$ 219,000	\$ 233,000	\$ (14,000)	
(4) Policyholder reserves	\$ 1,150,000	\$ 2,300,000	\$ (1,150,000)	
(5) Other	\$ 232,000	\$ 134,000	\$ 98,000	

## NOTES TO FINANCIAL STATEMENTS

(99) Subtotal (3a1+3a2+3a3+3a4+3a5)	\$ 1,656,000	\$ 2,824,000	\$ (1,168,000)
(b) Capital:			
(1) Investments	\$ 2,056,000	\$ 1,780,000	\$ 276,000
(2) Real estate	\$ -	\$ -	\$ -
(3) Other	\$ -	\$ -	\$ -
(99) Subtotal (3b1+3b2+3b3)	\$ 2,056,000	\$ 1,780,000	\$ 276,000
(c) Deferred tax liabilities (3a99 + 3b99)	\$ 3,712,000	\$ 4,604,000	\$ (892,000)
4. Net deferred tax assets/liabilities (2i - 3c)	\$ 21,273,000	\$ 20,831,000	\$ 442,000

D. Among the more significant book to tax adjustments were the following:

	12/31/2024		12/31/2023		Change
	Amount	%	Amount	%	
(1) Current income taxes incurred	\$ 13,185,093		\$ 10,275,338		\$ 2,909,755
(2) Change in deferred income tax (without tax on unrealized gains and losses on foreign exchange gains and losses)	\$ (6,812,000)		\$ (5,543,429)		\$ (1,268,571)
(3) Total income taxes reported	\$ 6,373,093		\$ 4,731,909		\$ 1,641,184
(4) Net gain from operations before federal income tax and realized capital gains (losses)	\$ 67,184,173		\$ 56,177,113		\$ 11,007,060
(5) Realized capital gains (losses) before federal income tax, after transfer to IMR	\$ (1,157,868)		\$ (10,034,706)		\$ 8,876,838
(6) Income before taxes	\$ 66,026,305		\$ 46,142,407		\$ 19,883,898
Total income tax reported	\$ 13,865,524	21.0%	\$ 9,689,905	21.0%	\$ 4,175,619
(7) Income before taxes					
a. Deferred tax benefit on nonadmitted assets	\$ (2,211,000)	(3.3%)	\$ 318,000	0.7%	\$ (2,529,000)
b. Tax Adjustment for IMR	\$ (130,000)	(0.2%)	\$ (51,000)	(0.1%)	\$ (79,000)
c. Tax credits	\$ (4,880,000)	(7.4%)	\$ (4,817,000)	(10.4%)	\$ (63,000)
d. Tax Exempt	\$ (857,000)	(1.3%)	\$ (862,000)	(1.9%)	\$ 5,000
e. Other	\$ 585,569	0.9%	\$ 454,000	1.0%	\$ 131,565
(8) Total income tax reported	\$ 6,373,093	9.7%	\$ 4,731,909	10.3%	\$ 1,641,184

E. (1) As of 12/31/2024, the Company has no net operating loss or tax credit carryforwards.

(2) The amount of Federal income taxes incurred that are available for recoupment in the event of future net losses are

\$ - for 2024  
\$ - for 2023, and  
\$ - for 2022

(3) The aggregate amount of deposits admitted under Section 6603 of the Internal Revenue Code = None

F. (1) The Company's federal income tax return is consolidated with its ultimate parent, Globe Life Inc. (formerly Torchmark Corporation), as well as its affiliated subsidiaries including Liberty National Life Insurance Company, American Income Life Insurance Company, United American Insurance Company, National Income Life Insurance Company, Globe Life And Accident Insurance Company, TMK Buildings Corporation, Brown Service Funeral Homes Company, Inc., Torchmark Insurance Agency, Inc., Specialized Advertising Group, Inc., Globe Marketing Services, Inc., AILIC Receivables Corporation, American Income Marketing Services, Inc., Liberty National Auto Club, Inc., Globe Life Insurance Agency, Inc., Globe Life Insurance Company of New York (formerly First United American Insurance Company), TMK Re, Ltd., and American Life and Health Group, Inc., Evry Healthcare, Inc. and Evry Health Insurance Company of Texas, Inc.

Each Company pays a share of the total tax liability determined as if computed separately. Companies that would report a loss are reimbursed to the extent that their losses are utilized by affiliates with taxable income. The calculation is made pursuant to Federal Income Tax Regulation 1.1552-1(a)(2) and 1.1502-33(d)(3)(ii).

G. Federal or foreign income tax loss contingencies None

H. Repatriation Transition Tax (RTT)  
The Company doesn't owe RTT for the year

I. Alternative Minimum Tax (AMT) Credit

The Company had no AMT credit carryforwards as of the beginning of the year. As a result, no AMT credits were recovered during the year or exist as of the end of the year.

J. Inflation Reduction Act - Corporate Alternative Minimum Tax

The Inflation Reduction Act was enacted on August 16, 2022 and included a new corporate alternative minimum tax (CAMT). The CAMT is effective for tax years beginning after 2022.

Effective December 29, 2023, the Consolidated Tax Allocation Agreement (Agreement) was amended to allocate responsibility for payment of the CAMT. Under the amended Agreement, Globe Life Inc. (Parent) shall pay the tax imposed by CAMT and the Company will not be obligated to pay to Parent any additional amount attributable to the CAMT. As a result, the Company, as a member of the tax-controlled group, did not recognize a liability for CAMT in its 2024 financial statements.

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

A. Common stock ownership of the Company and affiliates is shown in the chart on Schedule Y. All companies are 100% owned except where indicated otherwise.

B. The Company declared common stock dividends to Globe Life And Accident Insurance Company in the amounts of \$12,872,848, \$4,000,000, \$3,495,000, \$5,200,000, \$2,813,046, \$6,981,284 and \$504,891 on March 21, March 28, April 19, July 11, October 24, November 8 and November 27, 2024, respectively.

The Company loaned \$15,000,000 to Globe Life Inc. on January 9, 2024 at an interest rate of 8.5%. \$7,500,000 of the borrowing was repaid on January 16, 2024. The remaining \$7,500,000 was repaid in full on January 25, 2024.

Globe Life And Accident Insurance Company loaned the Company \$5,000,000 on April 15, 2024 at an interest rate of 8.5%. The borrowing was repaid in full on April 18, 2024.

United American Life Insurance Company loaned the Company \$18,000,000 on June 28, 2024 at an interest rate of 8.5%. \$10,000,000 of the borrowing was repaid on July 12, 2024. The remaining \$8,000,000 was repaid in full on August 7, 2024.

United American Life Insurance Company loaned the Company \$5,000,000 on July 31, 2024 at an interest rate of 8.5%. The borrowing was repaid in full on August 16, 2024.

The Company loaned \$16,000,000 to Globe Life And Accident Insurance Company on September 13, 2024 at an interest rate of 8.5%. The borrowing was repaid in full on October 29, 2024.

The Company loaned \$20,000,000 to Liberty National Life Insurance Company on September 24, 2024 at an interest rate of 8%. The borrowing was repaid in full on October 11, 2024.

## NOTES TO FINANCIAL STATEMENTS

The Company loaned \$10,000,000 to Globe Life And Accident Insurance Company on October 16, 2024 at an interest rate of 8%. The borrowing was repaid in full on October 29, 2024.

United American Life Insurance Company loaned the Company \$20,000,000 on November 6, 2024 at an interest rate of 8%. A partial payment of \$8,000,000 was made on January 22, 2025 and an additional partial payment of \$8,000,000 was made on February 20, 2025.

Liberty National Life Insurance Company loaned the Company \$10,000,000 on November 26, 2024 at an interest rate of 7.75%. A partial payment of \$7,000,000 was made on December 27, 2024. The remaining \$3,000,000 was repaid in full on January 22, 2025.

American Income Life Insurance Company loaned the Company \$4,000,000 on January 13, 2025 at an interest rate of 7.50%. The borrowing was repaid in full on January 22, 2025.

C. Not applicable

D. The Company had the following Affiliated Receivable

Globe Life And Accident Insurance Company	\$ 9,734
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The Company had the following Affiliated Payables

Globe Life Inc.	\$ 13,956
United American Insurance Company	\$ 47,711
Total	\$ 61,667

E. Guarantees of undertaking None

F. The Company's investment management function is managed by Globe Life Inc. under a master services agreement with Globe Life Inc. further discussed below. The fee for these services is based on the total value of the securities managed. For 2024, investment fees paid to Globe Life Inc. totaled \$2,988,000.

The Globe Life Inc. agreement also provides for a wide variety of other possible services. The fee charged to the Company for each is based on the ratio of certain expenses at the affiliate level to the comparable Globe Life Inc. consolidated expenses applied to Globe Life Inc.'s total operating expenses for the prior year. For 2024, management fees paid to Globe Life Inc. totaled \$2,220,000.

The Company is also party to a services agreement by and between American Income Life Insurance Company, Globe Life And Accident Insurance Company, Liberty National Life Insurance Company, Globe Life Inc. and United American Insurance Company. The Agreement establishes that all parties may, from time to time, act to furnish a particular service or services becoming a "Service Provider" or receive a particular service or services as a "Service Beneficiary" and provides for allocation of salary expense and other costs of providing such services to the appropriate Service Beneficiary.

G. Nature of relationships that could affect operations None

H. The Company does not own shares of stock of an upstream or ultimate parent

I. Investment in affiliates greater than 10% of admitted assets None

J. Write-downs for impairments of investments in affiliates None

K. Foreign insurance subsidiary valued using CARVM Not applicable

L. Downstream holding company valued using look-through method Not applicable

M. All SCA Investments Not applicable

N. Investment in Insurance SCAs Not applicable

O. SCA or SSAP 48 Entity Loss Tracking Not applicable

### NOTE 11 Debt

A. The Company does not have any unaffiliated debt.

B. FHLB (Federal Home Loan Bank) Agreements

(1) The Company is a member of the FHLB of Dallas. Membership provides the Company with access to various low cost collateralized borrowings and funding agreements.

(2) FHLB Capital Stock

a. Aggregate Totals

	1 Total 2+3	2 General Account	3 Separate Accounts
1. Current Year			
(a) Membership Stock - Class A	\$ -		
(b) Membership Stock - Class B	\$ 2,140,500	\$ 2,140,500	
(c) Activity Stock	\$ 2,255,000	\$ 2,255,000	
(d) Excess Stock	\$ -		
(e) Aggregate Total (a+b+c+d)	\$ 4,395,500	\$ 4,395,500	\$ -
(f) Actual or estimated Borrowing Capacity as Determined by the Insurer	\$ 260,365,232	XXX	XXX
2. Prior Year-end			
(a) Membership Stock - Class A	\$ -		
(b) Membership Stock - Class B	\$ 2,155,100	\$ 2,155,100	
(c) Activity Stock	\$ 820,000	\$ 820,000	
(d) Excess Stock	\$ -		
(e) Aggregate Total (a+b+c+d)	\$ 2,975,100	\$ 2,975,100	\$ -
(f) Actual or estimated Borrowing Capacity as Determined by the Insurer	\$ 270,540,684	XXX	XXX

11B(2)a1(f) should be equal to or greater than 11B(4)a1(d)

11B(2)a2(f) should be equal to or greater than 11B(4)a2(d)

b. Membership Stock (Class A and B) Eligible and Not Eligible for Redemption

1	2	Eligible for Redemption			
Current Year Total (2+3+4+5+6)	Not Eligible for Redemption	3 Less Than 6 Months	4 6 Months to Less Than 1 Year	5 1 to Less Than 3 Years	6 3 to 5 Years

## **NOTES TO FINANCIAL STATEMENTS**

Membership Stock				
1. Class A	\$			-
2. Class B	\$	2,140.500	\$	2,140.500

11B(2)b1 Current Year Total (Column 1) should equal 11B(2)a1(a) Total (Column 1)  
11B(2)b2 Current Year Total (Column 1) should equal 11B(2)a1(b) Total (Column 1)

(3) Collateral Pledged to FHLB

a. Amount Pledged as of Reporting Date

	1 Fair Value	2 Carrying Value	3 Aggregate Total Borrowing
1. Current Year Total General and Separate Accounts Total Collateral Pledged (Lines 2+3)	\$ 320,381,541	\$ 336,898,915	\$ 55,000,000
2. Current Year General Account Total Collateral Pledged	\$ 320,381,541	\$ 336,898,915	\$ 55,000,000
3. Current Year Separate Accounts Total Collateral Pledged			
4. Prior Year-end Total General and Separate Accounts Total Collateral Pledged	\$ 326,863,505	\$ 330,366,787	\$ 20,000,000

11B(3)a1 (Columns 1, 2 and 3) should be equal to or less than 11B(3)b1 (Columns 1, 2 and 3 respectively)

11B(3)a2 (Columns 1, 2 and 3) should be equal to or less than 11B(3)b2 (Columns 1, 2 and 3 respectively)

11B(3)a3 (Columns 1, 2 and 3) should be equal to or less than 11B(3)b3 (Columns 1, 2 and 3 respectively)

11B(3)a4 (Columns 1, 2 and 3) should be equal to or less than 11B(3)b4 (Columns 1, 2 and 3 respectively)

b. Maximum Amount Pledged During Reporting Period

	1	2	3
	Fair Value	Carrying Value	Amount Borrowed at Time of Maximum Collateral
1. Current Year Total General and Separate Accounts Maximum Collateral Pledged (Lines 2+3)	\$ 335,376,314	\$ 341,215,204	\$ 120,000,000
2. Current Year General Account Maximum Collateral Pledged	\$ 335,376,314	\$ 341,215,204	\$ 120,000,000
3. Current Year Separate Accounts Maximum Collateral Pledged			
4. Prior Year-end Total General and Separate Accounts Maximum Collateral Pledged	\$ 326,863,505	\$ 330,366,787	\$ 55,000,000

#### (4) Borrowing from FHLB

a. Amount as of Reporting Date

	1	2	3	4
	Total 2+3	General Account	Separate Accounts	Funding Agreements Reserves Established
<b>1. Current Year</b>				
(a) Debt	\$ -			XXX
(b) Funding Agreements	\$ 55,000,000	\$ 55,000,000		\$ 55,232,380
(c) Other	\$ -			XXX
(d) Aggregate Total (a+b+c)	\$ 55,000,000	\$ 55,000,000	\$ -	\$ 55,232,380
<b>2. Prior Year end</b>				
(a) Debt	\$ -			XXX
(b) Funding Agreements	\$ 20,000,000	\$ 20,000,000		\$ 20,098,528
(c) Other	\$ -			XXX
(d) Aggregate Total (a+b+c)	\$ 20,000,000	\$ 20,000,000	\$ -	\$ 20,098,528

b. Maximum Amount During Reporting Period (Current Year)

	1	2	3
	Total 2+3	General Account	Separate Accounts
1. Debt	\$ 65,000,000	\$ 65,000,000	
2. Funding Agreements	\$ 55,000,000	\$ 55,000,000	
3. Other	\$ -		
4. Aggregate Total (1+2+3)	\$ 120,000,000	\$ 120,000,000	\$ -

11B(4)b4 (Columns 1, 2 and 3) should be equal to or greater than 11B(4)a1(d) (Columns 1, 2 and 3 respectively)

c. FHLB - Prepayment Obligations

Does the company have prepayment obligations under the following arrangements (YES/NO)?

- 1. Debt No
- 2. Funding Agreements No
- 3. Other No

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

- A. Defined Benefit Plan Not applicable
- B. Description of investment policies and strategies Not applicable
- C. The fair value of each class of plan assets Not applicable
- D. Rate of return assumptions Not applicable

**Defined Contribution Plan**  
The Company participates in a defined contribution thrift plan covering substantially all employees. The liability for the plan is maintained at the holding company level. The thrift plan is funded by employee contributions that are matched by the Company based on percentage of such contributions. Company contributions were \$242,367 and \$265,226 for the years ended December 31, 2024 and 2023, respectively.

## NOTES TO FINANCIAL STATEMENTS

F. Multiemployer Plans      Not applicable

G. Consolidated/Holding Company Plans      None

H. Postemployment Benefits and Compensated Absences  
Compensated absences/vacation pay is recorded in accordance with SSAP No. 11.

I. Impact of Medicare Modernization Act on Postretirement Benefits (INT 04-17)  
The Company does not offer postretirement benefits to retired employees over age sixty-five. Therefore, passage of the Medical Prescription Drug Improvement and Modernization Act of 2003 has no effect on its benefit obligations

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

A. The Company has 1,000 common shares authorized and 213 common shares issued and outstanding. The par value is \$12,000 per share.

B. The Company has no preferred shares.

C. Statutory regulations in the State of Ohio limit the payment of dividends by stock life insurance companies in any one year to an amount equal to the greater of statutory net income from the previous year or 10% of surplus as regards policyholders reported from the previous year, subject to the amount of unassigned surplus as set forth in the most recently filed statutory financial statement, including net unrealized capital gains and losses or reevaluation of assets. Dividends in excess of these limitations are not available without special approval by the Ohio Department of Insurance. The maximum dividend that can be made without prior approval in 2025 is therefore \$52,841,210. subject to the amount of unassigned surplus as set forth in the most recently filed statutory financial statement.

D. Dividends paid in 2024 - See Note 10.

E. Amount of ordinary dividends that may be paid - See Note C. above.

F. Restrictions on unassigned funds - Not applicable.

G. Mutual surplus advances - Not applicable.

H. The Company does not hold any of its own stock.

I. Special Surplus Funds increased \$617,962 during 2024 from \$6,847,408 at 12/31/2023 to \$7,465,370 at 12/31/2024 due to the admittance of disallowed IMR as disclosed in Note 21C(2).

J. The portion of unassigned funds (surplus) represented or reduced by cumulative unrealized gains and losses is      \$      991,242

K. The Company issued the following surplus debentures or similar obligations:

1 Item Number	2 Date Issued	3 Interest Rate	4 Original Issue Amount of Note	5 Is Surplus Note Holder a Related Party (Y/N)	6 Carrying Value of Note Prior Year	7 Carrying Value of Note Current Year*	8 Unapproved Interest And/Or Principal
0001	09/30/2016	5.250%	\$ 15,000,000	Yes	\$ 15,000,000	\$ 15,000,000	
0002	09/30/2016	5.250%	\$ 15,000,000	Yes	\$ 15,000,000	\$ 15,000,000	
Total	XXX	XXX	\$ 30,000,000	XXX	\$ 30,000,000	\$ 30,000,000	\$ -

\* Total should agree with Page 3, Line 32.

1 Item Number	9 Current Year Interest Expense Recognized	10 Life-To-Date Interest Expense Recognized	11 Current Year Interest Offset Percentage (not including amounts paid to a 3rd party liquidity provider)	12 Current Year Principal Paid	13 Life-To-Date Principal Paid	14 Date of Maturity
0001	\$ 787,500	\$ 6,464,063				09/30/2046
0002	\$ 787,500	\$ 6,464,063				09/30/2046
Total	\$ 1,575,000	\$ 12,928,126	XXX	\$ -	\$ -	XXX

1 Item Number	15 Are Surplus Note Payments Contractually Linked? (Y/N)	16 Surplus Note Payments Subject to Administrative Offsetting Provisions? (Y/N)	17 Were Surplus Note Proceeds Used to Purchase an Asset Directly From the Holder of the Surplus Note? (Y/N)	18 Is Asset Issuer a Related Party (Y/N)	19 Type of Assets Received Upon Issuance
0001	No	No	No	No	Not Applicable
0002	No	No	No	No	Not Applicable
Total	XXX	XXX	XXX	XXX	XXX

1 Item Number	20 Principal Amount of Assets Received Upon Issuance	21 Book/Adjusted Carry Value of Assets	22 Is Liquidity Source a Related Party to the Surplus Note Issuer? (Y/N)
0001			No
0002			No
Total	\$ -	\$ -	XXX

L. The impact of any restatement due to prior quasi-reorganizations is as follows:      Not applicable

M. Date of quasi reorganization      Not applicable

**NOTE 14 Liabilities, Contingencies and Assessments**

A. Contingent Commitments

The Company has commitments listed on Schedule BA for Joint Venture Interests and Non-Guaranteed Federal Low Income Housing Tax Credits as follows:

## NOTES TO FINANCIAL STATEMENTS

	Limited Partnerships and Residual Interests	Non-Guaranteed Federal Low Income Housing Tax Credits	Total
(1) Total commitments:	\$61,154,806	\$1,816,295	\$62,971,101

Unfunded commitments on investments where the investment period has concluded, have a remote likelihood of being called. Consistent with guidance and company policy, these unfunded commitments are not disclosed in the amounts for limited partnerships and residual interests.

(2) None

(3) None

**B. Assessments**

(1) None

(2) a. Assets recognized from paid and accrued premium tax offsets and policy surcharges prior year-end \$ 276,331

b. Decreases current year:

Premium Taxes offsets applied \$ 90,818

c. Increases current year:

Assessments paid \$ 26,919

d. Assets recognized from paid and accrued premium tax offsets and policy surcharges current year-end \$ 212,432

(3)

a. Discount Rate Applied

b. The Undiscounted and Discounted Amount of the Guaranty Fund Assessments and Related Assets by Insolvency None

c. Number of Jurisdictions, Ranges of Years Used to Discount and Weighted Average Number of Years of the Discounting Time Period for Payables and Recoverables by Insolvency N/A

**C. Gain Contingencies** None

**D. Claims related extra contractual obligations and bad faith losses stemming from lawsuits** Not applicable

**E. Joint and Several Liabilities** None

**F. All Other Contingencies**

Various lawsuits against the Company have arisen in the course of the Company's business. Contingent liabilities arising from litigation, income taxes, and other matters are not considered material in relation to the financial position of the Company.

**NOTE 15 Leases**

**A. Lessee Operating Lease:**

(1) The Company has entered into various operating leases. Lease expense for 2024 and 2023 was \$451,587 and \$458,814 respectively.

(2) a. At December 31, 2024, the minimum aggregate rental commitments are as follows:

	Operating Leases
1. 2025	\$ 425,606
2. 2026	\$ 429,675
3. 2027	\$ 433,743
4. 2028	\$ 433,189
5. 2029	\$ 246,560
6. Thereafter	
7. Total (sum of 1 through 6)	\$ 1,968,773

(3) The Company is not involved in any sale - leaseback transactions.

**B. Lessor Leases** None

**NOTE 16 Information About Financial Instruments With Off-Balance Sheet Risk and Financial Instruments With Concentrations of Credit Risk** None

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

**A. Transfers of Receivables Reported as Sales** None

**B. Transfer and Servicing of Financial Assets** None

**C. Wash Sales** None

**NOTE 18 Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans** None

**NOTE 19 Direct Premium Written/Produced by Managing General Agents/Third Party Administrators** None

**NOTE 20 Fair Value Measurements**

A.

(1) Fair Value Measurements at Reporting Date

Description for each class of asset or liability	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Total
a. Assets at fair value Common stock - industrial and miscellaneous		\$ 4,395,500			\$ 4,395,500

## NOTES TO FINANCIAL STATEMENTS

Cash equivalents - money market mutual funds					\$ 6,384,380	\$ 6,384,380
Total assets at fair value/NAV	\$ -	\$ 4,395,500	\$ -	\$ 6,384,380	\$ 10,779,880	

## (2) Fair Value Measurements in (Level 3) of the Fair Value hierarchy

As of year end, the Company did not have securities categorized as Level 3 that are measured and reported at fair value on the statement of financial position.

## (3) During the year, the Company did not have any transfers into or out of Level 3 for assets measured and reported at fair value on the statement of financial position.

## (4) The majority of the Company's securities are not actively traded and direct quotes are not generally available. Management therefore determines the fair values of securities after consideration of data provided by third-party pricing services, independent broker/dealers, and other resources. Prices provided by third-party pricing services are not binding offers but are estimated exit values. They are based on observable market data inputs which can vary by security type. Such inputs include benchmark yields, available trades, broker/dealer quotes, issuer spreads, benchmark securities, bids, offers and other inputs that are corroborated in the market. All fair value measurements based on prices determined with observable market data are reported as Level 1 or Level 2 measurements. When third-party vendor prices are not available, the Company attempts to obtain valuations from other sources, including but not limited to broker/dealers, broker quotes, and prices on comparable securities.

When valuations have been obtained for all securities in the portfolio, management reviews and analyzes the prices to insure their reasonableness, taking into account available observable information. When two or more valuations are available for a security and the variance between the valuations is 10% or less, the close correlation suggests similar observable inputs were used in deriving the prices, and the average of the prices is used. Securities valued in this manner are classified as level 2. When the variance exceeds 10%, further review is performed on the available valuations to determine if they can be corroborated within reasonable tolerance to any other observable evidence. If one of the valuations or the average of the available valuations can be corroborated with other observable evidence, then the corroborated value is used and reported as level 2. The Company uses information and analytical techniques deemed appropriate for determining the point within the range of reasonable fair value estimates that is most representative of fair value under current market conditions. Valuations that cannot be corroborated with a reasonable tolerance are classified as Level 3.

## (5) Fair Value Measurements of derivative assets and liabilities None

## B. Fair Value combination disclosure None

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

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Not Practicable (Carrying Value)
Bonds	\$ 1,571,814,673	\$ 1,774,500,877		\$ 1,528,162,693	\$ 43,651,980		
Common stock - unaffiliated	\$ 4,395,500	\$ 4,395,500		\$ 4,395,500			
Mortgage loans***	\$ 56,436,424	\$ 56,232,530			\$ 56,436,424		
Cash, cash equivalents & short term investments	\$ (11,556,919)	\$ (11,556,919)	\$ (17,941,299)	\$ -		\$ 6,384,380	
Policy loans	\$ 415,453	\$ 415,453					\$ 415,453
Other invested assets - surplus notes	\$ 93,398,671	\$ 106,626,458		\$ 93,398,671			
Other invested assets - non guaranteed LIHTC	\$ 25,427,625	\$ 23,900,323			\$ 25,427,625		
Other Invested assets - guaranteed LIHTC	\$ 3,027,482	\$ 3,027,482			\$ 3,027,482		
Other invested assets - residual tranches	\$ 1,471,579	\$ 506,637			\$ 1,471,579		
Other admitted amounts - COLI	\$ 20,273,285	\$ 20,273,285	\$ 20,273,285				
Interest bearing deposit -type accounts	\$ (55,232,380)			\$ (55,232,380)			
Borrowed money - affiliated	\$ (23,660,799)			\$ (23,660,799)			

\*\*\* The Company invests in mortgage loans with 1 month floating rates. For this reason, the fair value is based on the lower of discounted cash flows or outstanding principal balance. Certain loans use current book value or outstanding principal to approximate fair value.

## D. Not Practicable to Estimate Fair Value

Type or Class of Financial Instrument	Carrying Value	Effective Interest Rate	Maturity Date	Explanation
Policy loans	\$ 415,453			There's no reliable market for these type of instruments

## E. Investments reported at Net Asset Value (NAV) consist entirely of Money Market Mutual Funds. These assets are permitted to be valued at NAV under SSAP 2R, Cash, Cash Equivalents, Drafts and Short-Term Investments.

**NOTE 21 Other Items**

## A. Unusual or Infrequent Items None

## B. Troubled Debt Restructuring: Debtors None

## C. Other Disclosures

## (1) Exhibit 6 - Active Life Reserve, Line 2, Additional Contract Reserves, Valuation Standard

## Statement of Reserve Bases, Interest Rates and Methods

## A. Interest Rates

## All Products

- Issue Years 1989 through 1992 - 5.5%
- Issue Years 1993 through 1994 - 5.0%
- Issue Years 1995 through 2005 - 4.5%
- Issue Years 2006 through 2012 - 4.0%
- Issue Years 2013 through 2020 - 3.5%

## NOTES TO FINANCIAL STATEMENTS

Issue Years 2021 through 2024 - 3.0%

**B. Mortality and Lapse**

Issue Years 1989 through 2005

1980 Commissioners Standard Ordinary Mortality

Lapse Rates - Lesser of 8% or 80% of anticipated total termination rates

Issue Years 2006 through 2019

2001 Commissioners Standard Ordinary Mortality Joint 70% Male 15% Female 15%

Lapse Rates - Lesser of 8% or 80% of anticipated total termination rates used in the calculation of gross premiums

Issue Years 2020 through 2024

2017 Commissioners Standard Ordinary Mortality

Lapse Rates - Lesser of 8% or 80% of anticipated total termination rates used in the calculation of gross premiums

**C. Morbidity**

Cancer Benefits

Issue Years 1989 through 2017 - 1985 NAIC Cancer Claim Cost Table

Issue Years 2018 through 2024 - 2016 NAIC Cancer Claim Cost Valuation Table

Other Benefits - 1974 Medical Expense Tables, 1959 Accidental Death Benefits Table,

and where no valuation table is specified, anticipated experience plus valuation load

**D. Reserve Methods**

Return of Premium and Cash Value Benefits

Issue Years 1989 through 1991 - Two year full preliminary term method, mid-terminal reserves

Issue Years 1992 through 2024 - Two year full preliminary term method, when maturity period is 20 years and greater, one year full preliminary term method otherwise. Mid-terminal reserves.

All Other Benefits - Two year full preliminary term method, mid-terminal reserves

**E. Determination of Additional Reserve**

The additional reserve is calculated as the tabular reserve using the bases, interest rates and methods described above, plus the net unearned premiums and less the gross unearned premiums.

**D. Business Interruption Insurance Recoveries**      None

**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**      None

**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**      None

(1) Amount of admitted balance that could be realized from an investment vehicle	\$ 19,924,880
(2) Percentage Bonds	2.000%
(3) Percentage Stocks	2.000%
(4) Percentage Mortgage Loans	0.000%
(5) Percentage Real Estate	0.000%
(6) Percentage Cash and Short-Term Investments	31.000%
(7) Percentage Derivatives	0.000%
(8) Percentage Other Invested Assets	65.000%

**J. Reporting Net Negative (Disallowed) Interest Maintenance Reserve (IMR)**

(1) Net negative (disallowed) IMR

Total	General Account	Insulated Separate Account	Non-Insulated Separate Account
\$ 7,465,370	\$ 7,465,370	\$ -	\$ -

(2) Net negative (disallowed) IMR admitted

Total	General Account	Insulated Separate Account	Non-Insulated Separate Account
\$ 7,465,370	\$ 7,465,370	\$ -	\$ -

(3) Calculated adjusted capital and surplus

	Total
a. Prior Period General Account Capital & Surplus	\$ 159,613,079
From Prior Period SAP Financials	
b. Net Positive Goodwill (admitted)	\$ -
c. EDP Equipment & Operating System Software (admitted)	\$ 319,761
d. Net DTAs (admitted)	\$ 20,777,000
e. Net Negative (disallowed) IMR (admitted)	\$ 7,386,274
f. Adjusted Capital & Surplus (a-(b+c+d+e))	\$ 131,130,044

(4) Percentage of adjusted capital and surplus

	Total
Percentage of Total Net Negative (disallowed) IMR admitted in General Account or recognized in Separate Account to adjusted capital and surplus	5.7%

(5) Allocated gains/losses to IMR from derivatives:      None

**NOTE 22 Events Subsequent**

Type I – Recognized Subsequent Events:

Subsequent events have been considered through 02/21/2025 for the statutory statement issued on 02/24/2025.

Type II – Nonrecognized Subsequent Events:

Not applicable

**NOTE 23 Reinsurance**

A. Ceded Reinsurance Report

## NOTES TO FINANCIAL STATEMENTS

## 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 of the 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) which is owned in excess of 10% or controlled directly or indirectly by an insured, a beneficiary, a creditor or an insured 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 Company 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 which, 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, not 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. \$ 533

(2) Have any new agreement been executed or existing agreements amended, since January 1 of the year of this statement, to include policies or contracts which were in-force or which had existing reserves established by the Company as of the effective date of the agreement? Yes ( ) No (X)

B. Uncollectible Reinsurance      None

C. Commutation of Reinsurance Reflected in Income and Expenses.

On October 8, 2010, the Company entered into an accident and health coinsurance agreement with The Chesapeake Life Insurance Company. The Company ceded on a 50% quota share basis certain accident and health policies written on or after that date. Effective December 31, 2024, the parties mutually agreed to terminate the agreement. As a result, the Company recaptured net ceded policy reserves totaling \$11,973,648 and accrued a receivable of \$11,973,648 which was recorded as a reduction of ceded premiums. The Company also accrued a recapture fee payable of \$1 million which was recorded as a reduction of commission and expense allowances on reinsurance ceded.

Considering the recapture of \$100,496 of ceded unearned premium reserves, the Company has reported in its operations in the current year as a result of the commutation of reinsurance stated above, amounts that are reflected as:

Premiums	\$11,873,152
Claims	\$217,723
Change in Reserves	\$11,655,429
Expense Allowance	\$1,000,000

The net receivable of \$10,973,648 was settled on January 17, 2025.

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

E. Reinsurance of Variable Annuity contracts      None

F. Reserve Credit for Variable Annuities      None

G. Ceding Entities That Utilize Captive Reinsurers to Assume Reserves Subject to the XXX/ XXXX Captive Framework      None

## H. Reinsurance Credit

(1) Disclose any reinsurance contracts (or multiple contracts with the same reinsurer or its affiliates) subject to A-791 that includes a provision, which limits the reinsurer's assumption of significant risks identified as in A-791. Examples of risk limiting features include provisions such as a deductible, a loss ratio corridor, a loss cap, an aggregate limit or similar effect. If true, indicate the number of reinsurance contracts to which such provisions apply. For contracts subject to A-791, indicate if deposit accounting was applied for all contracts, which limit significant risks.

There are no such contracts.

(2) Disclose any reinsurance contracts (or multiple contracts with the same reinsurer or its affiliates) not subject to A-791, for which reinsurance accounting was applied and includes a provision that limits the reinsurer's assumption of risk. Examples of risk limiting features include provisions such as a deductible, a loss ratio corridor, a loss cap, an aggregate limit or similar effect. If true, indicate the number of reinsurance contracts to which such provisions apply. If affirmative, indicate if the reinsurance credit was reduced for the risk limiting features.

There are no such contracts.

(3) Disclose if any reinsurance contracts contain features (except reinsurance contracts with a federal or state facility) described below which result in delays in payment in form or in fact:

- Provisions which permit the reporting of losses, or settlements are made, less frequently than quarterly or payments due from the reinsurer are not made in cash within ninety (90) days of the settlement date (unless there is no activity during the period).

There are no such contracts.

- Payment schedule, accumulating retentions from multiple years or any features inherently designed to delay timing of the reimbursement to the ceding entity.

There are no such contracts.

(4) Disclose if the reporting entity has reflected reinsurance accounting credit for any contracts not subject to Appendix A-791 and not yearly renewable term, which meet the risk transfer requirements of SSAP No. 61R and identify the type of contracts and the reinsurance contracts.

- Assumption Reinsurance – new for the reporting period.

There are no such contracts

- Non-proportional reinsurance, which does not result in significant surplus relief. If yes, indicate if the insured event(s) triggering contract coverage has been recognized.

There are no such contracts.

(5) Disclose if the reporting entity ceded any risk which is not subject to A-791 and not yearly renewable term reinsurance, under any reinsurance contract (or multiple contracts with the same reinsurer or its affiliates) during the period covered by the financial statement, and either:

- Accounted for that contract as reinsurance under statutory accounting principles ("SAP") and as a deposit under generally accepted accounting principles ("GAAP"); or

There are no such contracts.

- Accounted for that contract as reinsurance under GAAP and as a deposit under SAP.

There are no such contracts.

(6) If affirmative disclosure is required for Paragraph 23H(5) above, explain why the contract(s) is treated differently for GAAP and SAP.

Not Applicable.

## NOTE 24 Retrospectively Rated Contracts &amp; Contracts Subject to Redetermination

A. Method of estimating premium adjustments      Not applicable

## NOTES TO FINANCIAL STATEMENTS

B. Adjustment to written or to earned premiums Not applicable

C. Amount and percent of net retrospective premiums 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

(1) Did the reporting entity write accident and health insurance premium which is subject to the Affordable Care Act risk sharing provisions (YES/NO)?

Yes [ ] No [X]

(2) Impact of Risk Sharing Provisions of the Affordable Care Act on Admitted Assets, Liabilities and Revenue for the Current Year Not applicable

(3) Roll forward of prior year ACA risk sharing provisions for the following asset (gross of any nonadmission) and liability balances along with the reasons for adjustments to prior year balance. Not applicable

**NOTE 25 Change in Incurred Losses and Loss Adjustment Expenses**

A. Reserves on accident and health contracts for incurred losses and loss adjustment expenses attributable to insured events or prior years developed during 2024. See Schedule H, Part 3 and the Five Year Historical Data. Original estimates are increased or decreased as additional information becomes available regarding individual claims. However, no significant trends or unanticipated events were noted in 2024. None of the Company's accident and health contracts are subject to retrospective rating or experience refunds.

B. No change

**NOTE 26 Intercompany Pooling Arrangements** None

**NOTE 27 Structured Settlements** None

**NOTE 28 Health Care Receivables** Not applicable

**NOTE 29 Participating Policies** None

**NOTE 30 Premium Deficiency Reserves**

1. Liability carried for premium deficiency reserves
2. Date of the most recent evaluation of this liability
3. Was anticipated investment income utilized in the calculation?

**NOTE 31 Reserves for Life Contracts and Annuity Contracts**

- (1) The Company waives deduction of deferred fractional premiums upon death of insured. It returns any portion of the final premium beyond the date of death where required only. Surrender values are not promised in excess of the legally computed reserves.
- (2) The Company does not currently issue substandard policies and does not have any in force.
- (3) As of December 31, 2024, the Company had no insurance in force for which the gross premiums are less than the net premiums according to the standard valuation set by the State of Ohio.
- (4) The Tabular Interest has been determined by formula as described in the instructions.  
The Tabular Less Actual Reserve Released has been determined by formula as described in the instructions.  
The Tabular Cost has been determined by formula as described in the instructions.
- (5) For the determination of Tabular Interest on funds not involving life contingencies for each valuation rate of interest, the tabular interest is calculated as one hundredth of the product of such valuation rate of interest times the mean of the amount of funds subject to such valuation rate of interest held at the beginning and end of the year of valuation.
- (6) The details for other changes: None

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

A. Individual Annuities: None

B. Group Annuities: None

C. Deposit-Type Contracts (no life contingencies):

	General Account	Separate Account with Guarantees	Separate Account Nonguaranteed	Total	% of Total
(1) Subject to discretionary withdrawal:					
a. With market value adjustment				\$ -	0.0%
b. At book value less current surrender charge of 5% or more				\$ -	0.0%
c. At fair value				\$ -	0.0%
d. Total with market value adjustment or at fair value (total of a through c)	\$ -	\$ -	\$ -	\$ -	0.0%
e. At book value without adjustment (minimal or no charge or adjustment)				\$ -	0.0%
(2) Not subject to discretionary withdrawal	\$ 55,232,380			\$ 55,232,380	100.0%
(3) Total (gross: direct + assumed)	\$ 55,232,380	\$ -	\$ -	\$ 55,232,380	100.0%
(4) Reinsurance ceded				\$ -	
(5) Total (net)* (3) - (4)	\$ 55,232,380	\$ -	\$ -	\$ 55,232,380	
(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. Life & Accident & Health Annual Statement:				<u>Amount</u>	
(1) Exhibit 5, Annuities Section, Total (net)				\$ -	
(2) Exhibit 5, Supplementary Contracts with Life Contingencies Section, Total (net)				\$ -	
(3) Exhibit 7, Deposit-Type Contracts, Line 14, Column 1				\$ 55,232,380	
(4) Subtotal (1+2+3)				\$ 55,232,380	
Separate Accounts Annual 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 (5+6+7+8+9+10)				\$ -	
(12) Combined Total (4+11)				\$ 55,232,380	

# NOTES TO FINANCIAL STATEMENTS

**NOTE 33 Analysis of Life Actuarial Reserves by Withdrawal Characteristics**

	Account Value	Cash Value	Reserve
<b>A. General Account</b>			
(1) Subject to discretionary withdrawal, surrender values or policy loans:			
a. Term Policies with Cash Value			
b. Universal Life			
c. Universal Life with Secondary Guarantees			
d. Indexed Universal Life			
e. Indexed Universal Life with Secondary Guarantees			
f. Indexed Life			
g. Other Permanent Cash Value Life Insurance	\$ 9,635,084		\$ 21,997,934
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	
b. Accidental Death Benefits	XXX	XXX	\$ 136,079
c. Disability - Active Lives	XXX	XXX	
d. Disability - Disabled Lives	XXX	XXX	
e. Miscellaneous Reserves	XXX	XXX	
(3) Total (gross: direct + assumed)	\$ -	\$ 9,635,084	\$ 22,134,013
(4) Reinsurance ceded			\$ 12,673
(5) Total (net) (3) - (4)	\$ -	\$ 9,635,084	\$ 22,121,340
<b>B. Separate Account with Guarantees - Not applicable</b>			
<b>C. Separate Account Nonguaranteed - Not applicable</b>			
<b>D. Life &amp; Accident &amp; Health Annual Statement:</b>		<b>Amount</b>	
(1) Exhibit 5, Life Insurance Section, Total (net)	\$ 21,985,261		
(2) Exhibit 5, Accidental Death Benefits Section, Total (net)	\$ 136,079		
(3) Exhibit 5, Disability - Active Lives Section, Total (net)	\$ -		
(4) Exhibit 5, Disability - Disabled Lives Section, Total (net)	\$ -		
(5) Exhibit 5, Miscellaneous reserves Section, Total (net)	\$ -		
(6) Subtotal (1+2+3+4+5)	\$ 22,121,340		
Separate Accounts Statement			
(7) Exhibit 3, Line 0199999, Column 2			
(8) Exhibit 3, Line 0499999, Column 2			
(9) Exhibit 3, Line 0599999, Column 2			
(10) Subtotal (7+8+9)		\$ -	
(11) Combined Total (6+10)		\$ 22,121,340	

**NOTE 34 Premium & Annuity Considerations Deferred and Uncollected**

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

Type	Gross	Net of Loading
(1) Industrial		
(2) Ordinary new business	\$ 85,975	\$ 14,787
(3) Ordinary renewal	\$ 1,324,051	\$ 1,131,591
(4) Credit Life		
(5) Group Life		
(6) Group Annuity		
(7) Totals (1+2+3+4+5+6)	\$ 1,410,026	\$ 1,146,378

**NOTE 35 Separate Accounts**      Not applicable

**NOTE 36 Loss/Claim Adjustment Expenses**

The balance in the liability for unpaid accident and health claim adjustment expenses as of December 31, 2024 and 2023 was \$0 and \$0, respectively. The Company incurred and paid \$7,348,292 of claim adjustment expenses in the current year, of which \$1,376,943 of paid amount was attributable to insured or covered events of prior years.

The Company does not anticipate any salvage or subrogation amounts and therefore no such amounts are reflected in the liability for unpaid claims or losses.

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Family Heritage Life Insurance Company of America  
**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 [ X ]  No [ ]  
 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 [ X ]  No [ ]  N/A [ ]

1.3 State Regulating? .....  Ohio

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

1.5 If the response to 1.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group. .....  0000320335

2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? .....  Yes [ ]  No [ X ]

2.2 If yes, date of change: .....

3.1 State as of what date the latest financial examination of the reporting entity was made or is being made. .....  12/31/2023

3.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. .....  12/31/2019

3.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). .....  04/23/2021

3.4 By what department or departments?  
 Ohio .....

3.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? .....  Yes [ ]  No [ ]  N/A [ X ]

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

4.1 During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity) receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:  
 4.11 sales of new business? .....  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 .....  %  
 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 Family Heritage Life Insurance Company of America**  
**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 [ X ] N/A [ ]

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

Deloitte & Touche, LLP

2200 Ross Avenue, Suite 1600

Dallas, TX 75201

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?

Hongwei "David" Zhao, Officer,

3700 South Stonebridge Drive, McKinney, TX 75070-8080

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

12.11 Name of real estate holding company ... AVALONBAY COMMUNITIES, ERP OPERATING LP, FEDERAL REALTY INVESTMENT, GOODMAN US FIN FOUR, KIMCO REALTY CORP., LTC PROPERTIES INC, NNN REIT INC, NATIONWIDE HEALTH PPTYS, PROLOGIS LP, PUBLIC STORAGE, REALTY INCOME CORP, REGENCY CENTERS LP, SIMON PROPERTY GRP LP, VENTAS REALTY LP, WELLTOWER OP LLC

12.12 Number of parcels involved .....

12.13 Total book/adjusted carrying value ..... \$ ..... 47,473,628

12.2 If yes, provide explanation

The Company invests in securities of real estate holding companies and REITS.

**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 [ ]

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

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

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 [ ] N/A [ ]

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 Family Heritage Life Insurance Company of America  
**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 [ X ] No [ ]

23.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: ..... \$ ..... 9,734

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 Family Heritage Life Insurance Company of America**  
**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 ..... \$ .....

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

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

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

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

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

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

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

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

26.21 Subject to repurchase agreements .....	\$ ..... 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 .....	\$ ..... 4,395,500
26.28 On deposit with states .....	\$ ..... 3,748,737
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 .....	\$ ..... 336,898,915
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 [ ]  
 If no, attach a description with this statement.

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

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

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

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

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

- 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
The Northern Trust Company .....	50 South LaSalle Street, Chicago, IL 60603 .....
FHLB Dallas .....	8500 Freeport Parkway South, Suite 100, Irving, TX 75063-2547 .....

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**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
Globe Life Inc. .....	A.....
Prudential Private Placement Investors, LP .....	U.....
Blackrock Investment Managers, LLC .....	U.....
Alliance Bernstein, LP .....	U.....
MetLife Investment Management LLC .....	U.....
Voya Investment Management LLC .....	U.....

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

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

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

1 Central Registration Depository Number	2 Name of Firm or Individual	3 Legal Entity Identifier (LEI)	4 Registered With	5 Investment Management Agreement (IMA) Filed
.....	Globe Life Inc. .....	5493001JFHKQ0PP6XA71 .....	Not Registered .....	DS.....
106442 .....	Prudential Private Placement Investors, LP .....	.....	U.S. Securities & Exchange Commission .....	NO.....
108928 .....	Blackrock Investment Managers, LLC .....	.....	U.S. Securities & Exchange Commission .....	NO.....
108477 .....	Alliance Bernstein, LP .....	OJK55UGWSWNF3X7KLQ85 .....	U.S. Securities & Exchange Commission .....	NO.....
142463 .....	MetLife Investment Management LLC .....	EAU07208FCR1S0XGYJ21 .....	U.S. Securities & Exchange Commission .....	NO.....
108934 .....	Voya Investment Management LLC .....	MZJU01BGQ7J1KULQSB89 .....	U.S. Securities & Exchange Commission .....	NO.....

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
.....	.....	.....	.....

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**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 .....	1,774,500,877	1,571,814,673	(202,686,204)
31.2 Preferred stocks .....	0	0	0
31.3 Totals	1,774,500,877	1,571,814,673	(202,686,204)

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

The Company primarily used Refinitiv (which is a third party vendor) and certain private placements were valued by a broker. The remainder of the portfolio was priced by the Company's custodian and ICE (which is also a third party vendor).

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

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

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

.....

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

33.2 If no, list exceptions:

.....

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

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

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

35. By self-designating PLGI securities, the reporting entity is certifying 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 [ X ]

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

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

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

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

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

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

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Family Heritage Life Insurance Company of America  
**GENERAL INTERROGATORIES**

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

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

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

**OTHER**

40.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any? ..... \$ ..... 0

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? ..... \$ ..... 1,656,091

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
Frantz Ward LLP .....	..... 972,533

42.1 Amount of payments for expenditures in connection with matters before legislative bodies, officers, or departments of government, if any? ..... \$ ..... 0

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

1 Name	2 Amount Paid
.....	.....

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**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 .....	447,481,322	403,567,310
2.2 Premium Denominator .....	0.000	0.000
2.3 Premium Ratio (2.1/2.2) .....	.....	.....
2.4 Reserve Numerator .....	.....	.....
2.5 Reserve Denominator .....	1,852,210,360	1,689,647,336
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 [ ]

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

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

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

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

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

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

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

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

1	2 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 .....	\$ .....	6,715,258
7.2 Total Incurred Claims .....	\$ .....	883,772
7.3 Number of Covered Lives .....	.....	20,510

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

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

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

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 [ X ] 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) .....	\$ .....

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**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 checked="" type="checkbox"/> ] No [ <input type="checkbox"/> ]		
11.2 Net reimbursement of such expenses between reporting entities:			
	11.21 Paid .....	\$ 29,425,087	
	11.22 Received .....	\$ .....	
12.1 Does the reporting entity write any guaranteed interest contracts? .....	Yes [ <input type="checkbox"/> ] No [ <input checked="" 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: .....	\$ 77,647,000		
14. Total dividends paid stockholders since organization of the reporting entity:			
	14.11 Cash .....	\$ 491,276,471	
	14.12 Stock .....	\$ .....	
15.1 Does the reporting entity reinsurance any Workers' Compensation Carve-Out business defined as: .....	Yes [ <input type="checkbox"/> ] No [ <input checked="" 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 .....	.....	.....	0
15.32 Paid claims .....	.....	.....	0
15.33 Claim liability and reserve (beginning of year) .....	.....	.....	0
15.34 Claim liability and reserve (end of year) .....	.....	.....	0
15.35 Incurred claims .....	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Family Heritage Life Insurance Company of America  
**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 - 99,999	.....	.....
15.43	\$100,000 - 249,999	.....	.....
15.44	\$250,000 - 999,999	.....	.....
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 [ ] No [ ]

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

18. How are the subordinate branches represented in the supreme or governing body? .....

19. What is the basis of representation in the governing body? .....

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

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? .....

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

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

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

22. When and by whom are the officers and directors elected? .....

23. What are the qualifications for membership? .....

24. What are the limiting ages for admission? .....

25. What is the minimum and maximum insurance that may be issued on any one life? .....

26. Is a medical examination required before issuing a benefit certificate to applicants? ..... Yes [ ] 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 [ ]

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

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

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

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 [ ]

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

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

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

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

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 [ ] 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 [ ] No [ ]

34.2 If so, was an additional reserve included in Exhibit 5? ..... Yes [ ] No [ ] 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 [ ]

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 [ ]

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 [ ]

37.1 Does the reporting entity have outstanding assessments in the form of liens against policy benefits that have increased surplus? ..... Yes [ ] 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
.....	.....

**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
<b>Life Insurance in Force</b> (Exhibit of Life Insurance)					
1. Ordinary - whole life and endowment (Line 34, Col. 4) .....	572,587	544,830	512,241	491,787	414,420
2. Ordinary - term (Line 21, Col. 4, less Line 34, Col. 4) .....	10	10	10	10	0
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) .....	572,597	544,840	512,251	491,797	414,420
7.1 Total in force for which VM-20 deterministic/stochastic reserves are calculated .....	345,320	306,253	260,659	224,241	132,041
<b>New Business Issued</b> (Exhibit of Life Insurance)					
8. Ordinary - whole life and endowment (Line 34, Col. 2) .....	113,085	114,555	107,550	139,800	87,900
9. Ordinary - term (Line 2, Col. 4, less Line 34, Col. 2) .....	0	0	0	0	0
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) .....	113,085	114,555	107,550	139,800	87,900
<b>Premium Income - Lines of Business</b> (Exhibit 1 - Part 1)					
14. Individual life (Line 20.4, Col. 2) .....	6,614,542	6,146,612	5,525,896	4,971,022	4,171,360
15. Group life (Line 20.4, Col. 3) .....	0	0	0	0	0
16. Individual annuities (Line 20.4, Col. 4) .....	0	0	0	0	0
17. Group annuities (Line 20.4, Col. 5) .....	0	0	0	0	0
18. Accident & Health (Line 20.4, Col. 6) .....	440,866,780	397,420,698	367,696,841	345,034,733	317,668,975
19. Other lines of business (Line 20.4, Col. 8) .....	0	0	0	0	0
20. Total .....	447,481,322	403,567,310	373,222,737	350,005,755	321,840,335
<b>Balance Sheet (Pages 2 &amp; 3)</b>					
21. Total admitted assets excluding Separate Accounts business (Page 2, Line 26, Col. 3) .....	2,122,339,160	1,893,377,625	1,719,036,284	1,588,075,444	1,435,789,238
22. Total liabilities excluding Separate Accounts business (Page 3, Line 26) .....	1,958,958,580	1,733,440,768	1,562,944,883	1,432,458,230	1,299,859,089
23. Aggregate life reserves (Page 3, Line 1) .....	22,121,340	19,963,987	16,757,019	14,192,938	12,003,643
23.1 Excess VM-20 deterministic/stochastic reserve over NPR related to Line 7.1 .....					
24. Aggregate A & H reserves (Page 3, Line 2) .....	1,794,127,395	1,637,964,523	1,495,355,943	1,365,245,440	1,235,511,279
25. Deposit-type contract funds (Page 3, Line 3) .....	55,232,380	20,098,528			
26. Asset valuation reserve (Page 3, Line 24.01) .....	14,526,186	11,382,212	13,989,930	12,368,983	9,942,930
27. Capital (Page 3, Lines 29 and 30) .....	2,556,000	2,556,000	2,556,000	2,556,000	2,556,000
28. Surplus (Page 3, Line 37) .....	160,824,580	157,380,857	153,535,401	153,061,214	133,374,149
<b>Cash Flow (Page 5)</b>					
29. Net Cash from Operations (Line 11) .....	197,164,728	185,496,912	166,085,100	163,162,373	148,688,738
<b>Risk-Based Capital Analysis</b>					
30. Total adjusted capital .....	177,906,766	171,319,069	170,081,331	167,986,197	145,873,079
31. Authorized control level risk - based capital .....	16,493,254	14,316,741	13,034,729	12,708,512	11,300,830
<b>Percentage Distribution of Cash, Cash Equivalents and Invested Assets</b> (Page 2, Col. 3) (Line No. /Page 2, Line 12, Col. 3) x 100.0					
32. Bonds (Line 1) .....	87.7	90.1	91.1	91.0	93.1
33. Stocks (Lines 2.1 and 2.2) .....	0.2	0.2	0.1	0.0	0.0
34. Mortgage loans on real estate(Lines 3.1 and 3.2 ) .....	2.8	2.3	0.2	1.1	1.2
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) .....	(0.6)	0.0	0.5	0.5	0.6
37. Contract loans (Line 6) .....	0.0	0.0	0.0	0.0	0.0
38. Derivatives (Page 2, Line 7) .....	0.0	0.0	0.0	0.0	0.0
39. Other invested assets (Line 8) .....	9.9	7.5	8.1	7.4	5.2
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
<b>Investments in Parent, Subsidiaries and Affiliates</b>					
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) .....					
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 .....					

**FIVE-YEAR HISTORICAL DATA**

(Continued)

	1 2024	2 2023	3 2022	4 2021	5 2020
<b>Total Nonadmitted and Admitted Assets</b>					
52. Total nonadmitted assets (Page 2, Line 28, Col. 2).....	63,687,036	46,725,560	50,172,043	46,929,766	50,098,538
53. Total admitted assets (Page 2, Line 28, Col. 3) .....	2,122,339,160	1,893,377,625	1,719,036,284	1,588,075,444	1,435,789,238
<b>Investment Data</b>					
54. Net investment income (Exhibit of Net Investment Income).....	86,159,367	71,769,653	66,755,203	61,175,028	55,661,020
55. Realized capital gains (losses) (Page 4, Line 34, Column 1) .....	(415,881)	(8,020,106)	163,539	692,441	25,600
56. Unrealized capital gains (losses) (Page 4, Line 38, Column 1) .....	(236,968)	1,342,549	(331,531)	123,914	33,286
57. Total of above Lines 54, 55 and 56 .....	85,506,518	65,092,096	66,587,211	61,991,383	55,719,906
<b>Benefits and Reserve Increases (Page 6)</b>					
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) .....	1,385,918	1,277,098	1,182,483	629,823	733,587
59. Total contract/certificate benefits - A & H (Lines 13 & 14, Col. 6) .....	137,410,454	121,873,298	119,559,970	103,970,125	103,456,049
60. Increase in life reserves - other than group and annuities (Line 19, Col. 2) .....	2,157,353	3,206,968	2,564,081	2,189,296	1,844,270
61. Increase in A & H reserves (Line 19, Col. 6) .....	156,162,872	142,608,580	130,110,502	129,734,161	113,966,679
62. Dividends to policyholders and refunds to members (Line 30, Col. 1) .....	0	0	0	0	0
<b>Operating Percentages</b>					
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 .....	34.9	34.8	33.0	32.8	32.7
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 .....	14.4	14.7	16.5	13.2	12.1
65. A & H loss percent (Schedule H, Part 1, Lines 5 and 6, Col. 2) .....	66.5	66.4	67.8	67.6	68.4
66. A & H cost containment percent (Schedule H, Pt. 1, Line 4, Col. 2) .....	0.0	0.0	0.0	0.0	0.0
67. A & H expense percent excluding cost containment expenses (Schedule H, Pt. 1, Line 10, Col. 2) .....	37.0	36.8	35.0	34.8	34.8
<b>A &amp; H Claim Reserve Adequacy</b>					
68. Incurred losses on prior years' claims - comprehensive group health (Sch. H, Part 3, Line 3.1 Col. 3) .....	0	0	0	XXX	XXX
69. Prior years' claim liability and reserve - comprehensive group health (Sch. H, Part 3, Line 3.2 Col. 3) .....	0	0	0	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) .....	33,240,079	28,386,908	25,548,865	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) .....	34,841,733	30,989,412	27,363,896	XXX	XXX
<b>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)</b>					
72. Individual industrial life (Page 6.1, Col. 2) .....					
73. Individual whole life (Page 6.1, Col. 3) .....	721,973	(513,086)	(282,931)	250,385	339,809
74. Individual term life (Page 6.1, Col. 4) .....					
75. Individual indexed life (Page 6.1, Col. 5) .....					
76. Individual universal life (Page 6.1, Col. 6) .....					
77. Individual universal life with secondary guarantees (Page 6.1, Col. 7) .....					
78. Individual variable life (Page 6.1, Col. 8) .....					
79. Individual variable universal life (Page 6.1, Col. 9) .....					
80. Individual credit life (Page 6.1, Col. 10) .....					
81. Individual other life (Page 6.1, Col. 11) .....					
82. Individual YRT mortality risk only (Page 6.1, Col. 12) .....					
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) .....					
92. Individual deferred indexed annuities (Page 6.3, Col. 3) .....					
93. Individual deferred variable annuities with guarantees (Page 6.3, Col. 4) .....					
94. Individual deferred variable annuities without guarantees (Page 6.3, Col. 5) .....					
95. Individual life contingent payout (immediate and annuitization) (Page 6.3, Col. 6) .....					
96. Individual other annuities (Page 6.3, Col. 7) .....					
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) .....	52,535,118	44,400,261	45,080,755	40,132,595	35,866,630
115. Aggregates of all other lines of business (Page 6, Col. 8) .....					
116. Fraternal (Page 6, Col. 7) .....					
117. Total (Page 6, Col. 1) .....	53,257,091	43,887,175	44,797,824	40,382,980	36,206,439

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 Family Heritage Life Insurance Company of America

## 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	19,548	544,840	0	0	0	0	544,840	
2. Issued during year .....		0	3,742	113,085		0	0	0	113,085	
3. Reinsurance assumed .....									0	
4. Revived during year .....			1	20					20	
5. Increased during year (net) .....									0	
6. Subtotals, Lines 2 to 5 .....	.0	0	3,743	113,105	0	0	0	0	113,105	
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	23,291	657,945	0	0	0	0	657,945	
Deductions during year:										
10. Death .....			31	854			XXX.		854	
11. Maturity .....							XXX.		0	
12. Disability .....							XXX.		0	
13. Expiry .....				475					475	
14. Surrender .....			682	21,644					21,644	
15. Lapse .....			1,963	58,870					58,870	
16. Conversion .....							XXX.	XXX.	0	
17. Decreased (net) .....			105	3,505					3,505	
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	2,781	85,348	0	0	0	0	85,348	
21. In force end of year (b) (Line 9 minus Line 20) .....	.0	0	20,510	572,597	0	0	0	0	572,597	
22. Reinsurance ceded end of year .....	XXX.		XXX.	16,313	XXX.		XXX.	XXX.	16,313	
23. Line 21 minus Line 22 .....	XXX	0	XXX	556,284	XXX	(a) 0	XXX	XXX	556,284	
<b>DETAILS OF WRITE-INS</b>										
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 Family Heritage Life Insurance Company of America

**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 .....			58	320
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 .....				
29. Other term insurance - decreasing .....	XXX		XXX	
30. Other term insurance .....	XXX		XXX	
31. Totals (Lines 27 to 30) .....	0	0	0	0
Reconciliation to Lines 2 and 21:				
32. Term additions .....	XXX		XXX	
33. Totals, extended term insurance .....	XXX	XXX	1	10
34. Totals, whole life and endowment .....	3,742	113,085	20,509	572,587
35. Totals (Lines 31 to 34) .....	3,742	113,085	20,510	572,597

**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 .....	113,085		572,597	
38. Credit Life (Group and Individual) .....				
39. Group .....				
40. Totals (Lines 36 to 39) .....	113,085	0	572,597	0

**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	182,303
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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 under state.
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 .....								
49. Disability Income .....								
50. Extended Benefits .....		XXX		XXX				
51. Other .....								
52. Total .....	(a)		(a)		(a)		(a)	

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

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Family Heritage Life Insurance Company of America  
**EXHIBIT OF NUMBER OF POLICIES, CONTRACTS, CERTIFICATES, INCOME PAYABLE AND ACCOUNT VALUES IN FORCE FOR SUPPLEMENTARY CONTRACTS, ANNUITIES, ACCIDENT & HEALTH AND OTHER POLICIES**

**SUPPLEMENTARY CONTRACTS**

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

**NONE**

**ANNUITIES**

	Ordinary		Group	
	1 Immediate	2 Deferred	3 Contracts	4 Certificates
1. In force end of prior year .....				
2. Issued during year .....				
3. Reinsurance assumed .....				
4. Increased during year (net) .....				
5. Totals (Lines 1 to 4) .....				
Deductions during year:				
6. Decreased (net) .....				
7. Reinsurance ceded .....				
8. Totals (Lines 6 and 7) .....				
9. In force end of year (line 5 minus line 8) .....				
Income now payable:				
10. Amount of income payable .....	(a) .....	XXX .....	XXX .....	(a) .....
Deferred fully paid:				
11. Account balance .....	XXX .....	(a) .....	XXX .....	(a) .....
Deferred not fully paid:				
12. Account balance .....	XXX .....	(a) .....	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 .....	32,592	22,920,881	0		630,065	393,386,073
2. Issued during year .....	11,046	7,152,516			163,663	97,349,897
3. Reinsurance assumed .....						
4. Increased during year (net) .....		XXX .....		XXX .....		XXX .....
5. Totals (Lines 1 to 4) .....	43,638	XXX .....	0	XXX .....	793,728	XXX .....
Deductions during year:						
6. Conversions .....		XXX .....	XXX .....	XXX .....	XXX .....	XXX .....
7. Decreased (net) .....	5,965	XXX .....		XXX .....	109,137	XXX .....
8. Reinsurance ceded .....		XXX .....		XXX .....		XXX .....
9. Totals (Lines 6 to 8) .....	5,965	XXX .....	0	XXX .....	109,137	XXX .....
10. In force end of year (line 5 minus line 9) .....	37,673	(a) .....	26,381,562	0 (a) .....	684,591	(a) .....

**DEPOSIT FUNDS AND DIVIDEND ACCUMULATIONS**

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

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

**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Family Heritage Life Insurance Company of America**  
**SCHEDULE T - PREMIUMS AND ANNUITY CONSIDERATIONS <sup>(b)</sup>**

Allocated by States and Territories

States, Etc.	1 Active Status (a)	Direct Business Only					
		Life Contracts		4 Accident and Health Insurance Premiums, Including Policy, Membership and Other Fees	5 Other Considerations	6 Total Columns 2 through 5 (b)	7 Deposit-Type Contracts
		2 Life Insurance Premiums	3 Annuity Considerations				
1. Alabama .....	AL	53,893	0	3,877,668	0	3,931,561	0
2. Alaska .....	AK	588	0	234,461	0	235,049	0
3. Arizona .....	AZ	90,775	0	7,192,730	0	7,283,505	0
4. Arkansas .....	AR	487,310	0	10,827,168	0	11,314,478	0
5. California .....	CA	80,298	0	8,893,870	0	8,974,168	0
6. Colorado .....	CO	73,014	0	12,659,516	0	12,732,530	0
7. Connecticut .....	CT	2,586	0	29,287	0	31,873	0
8. Delaware .....	DE	3,003	0	470,122	0	473,125	0
9. District of Columbia .....	DC	672	0	30,885	0	31,557	0
10. Florida .....	FL	134,289	0	12,930,499	0	13,064,788	0
11. Georgia .....	GA	278,321	0	15,308,979	0	15,587,300	0
12. Hawaii .....	HI	221	0	143,226	0	143,447	0
13. Idaho .....	ID	3,923	0	3,445,448	0	3,449,371	0
14. Illinois .....	IL	121,560	0	14,336,469	0	14,458,029	0
15. Indiana .....	IN	49,636	0	12,884,499	0	12,934,135	0
16. Iowa .....	IA	108,805	0	14,624,652	0	14,733,457	0
17. Kansas .....	KS	281,178	0	12,980,781	0	13,261,959	0
18. Kentucky .....	KY	307,271	0	10,111,933	0	10,419,204	0
19. Louisiana .....	LA	155,839	0	10,616,829	0	10,772,668	0
20. Maine .....	ME	10,226	0	566,724	0	576,950	0
21. Maryland .....	MD	54,262	0	1,845,794	0	1,900,056	0
22. Massachusetts .....	MA	1,250	0	41,965	0	43,215	0
23. Michigan .....	MI	42,654	0	5,122,925	0	5,165,579	0
24. Minnesota .....	MN	78,511	0	21,998,809	0	22,077,320	0
25. Mississippi .....	MS	48,569	0	2,016,020	0	2,064,589	0
26. Missouri .....	MO	165,914	0	12,984,592	0	13,150,506	0
27. Montana .....	MT	18,530	0	5,831,175	0	5,849,705	0
28. Nebraska .....	NE	61,096	0	14,111,700	0	14,172,796	0
29. Nevada .....	NV	21,351	0	1,926,245	0	1,947,596	0
30. New Hampshire .....	NH	7,825	0	396,867	0	404,692	0
31. New Jersey .....	NJ	2,595	0	276,011	0	278,606	0
32. New Mexico .....	NM	49,946	0	2,082,710	0	2,132,656	0
33. New York .....	NY	N	0	0	0	0	0
34. North Carolina .....	NC	190,104	0	17,934,196	0	18,124,300	0
35. North Dakota .....	ND	16,520	0	4,361,251	0	4,377,771	0
36. Ohio .....	OH	155,092	0	25,304,893	0	25,459,985	0
37. Oklahoma .....	OK	110,721	0	7,024,059	0	7,134,780	0
38. Oregon .....	OR	16,437	0	2,998,165	0	3,014,602	0
39. Pennsylvania .....	PA	73,107	0	3,734,102	0	3,807,209	0
40. Rhode Island .....	RI	L	0	42,945	0	42,945	0
41. South Carolina .....	SC	134,288	0	6,389,627	0	6,523,915	0
42. South Dakota .....	SD	17,558	0	10,052,398	0	10,069,956	0
43. Tennessee .....	TN	155,701	0	10,572,709	0	10,728,410	0
44. Texas .....	TX	2,625,298	0	79,026,122	0	81,651,420	0
45. Utah .....	UT	24,793	0	8,765,939	0	8,790,732	0
46. Vermont .....	VT	876	0	36,869	0	37,745	0
47. Virginia .....	VA	127,635	0	7,110,380	0	7,238,015	0
48. Washington .....	WA	100,000	0	5,512,760	0	5,612,760	0
49. West Virginia .....	WV	179,525	0	5,095,981	0	5,275,506	0
50. Wisconsin .....	WI	25,065	0	11,810,524	0	11,835,589	0
51. Wyoming .....	WY	19,416	0	3,867,218	0	3,886,634	0
52. American Samoa .....	AS	N	0	0	0	0	0
53. Guam .....	GU	N	0	0	0	0	0
54. Puerto Rico .....	PR	L	0	34,498	0	34,498	0
55. U.S. Virgin Islands .....	VI	N	0	0	0	0	0
56. Northern Mariana Islands .....	MP	N	0	0	0	0	0
57. Canada .....	CAN	N	0	0	0	0	0
58. Aggregate Other Alien .....	OT	XXX	0	0	0	0	0
59. Subtotal .....		XXX	6,768,047	0	430,475,195	0	437,243,242
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	6,768,047	0	430,475,195	0	437,243,242
96. Plus reinsurance assumed .....		XXX				0	
97. Totals (All Business) .....		XXX	6,768,047	0	430,475,195	0	437,243,242
98. Less reinsurance ceded .....		XXX	100,715		(9,648,525)		(9,547,810)
99. Totals (All Business) less Reinsurance Ceded .....		XXX	6,667,332	0	(c) 440,123,720	0	446,791,052
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:

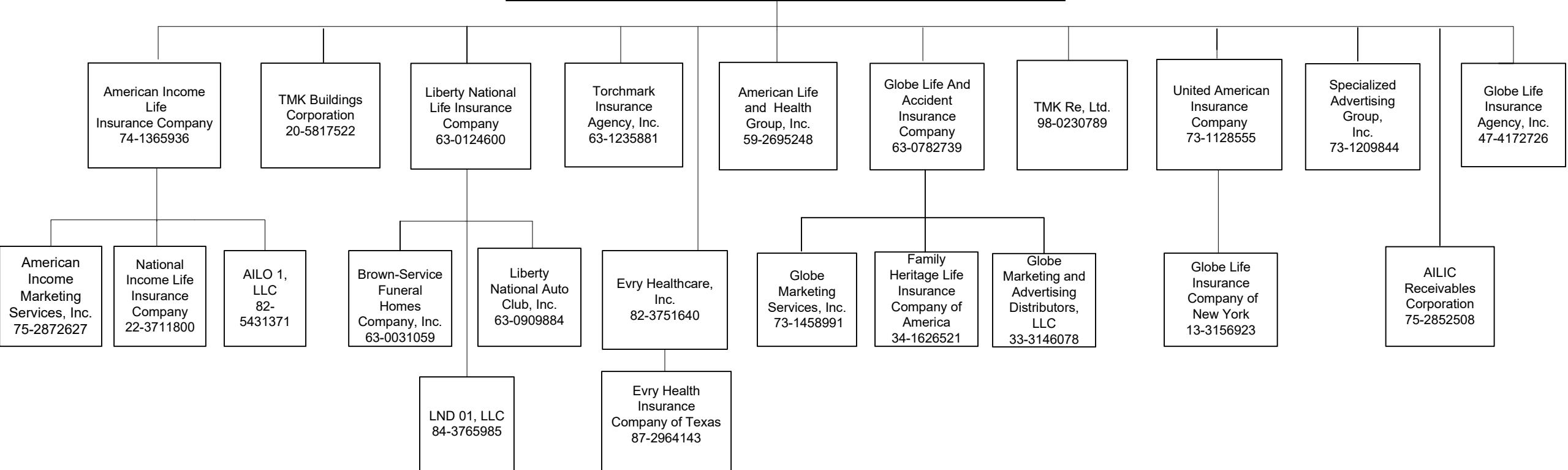
1. L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG ..... 51 4. Q - Qualified - Qualified or accredited reinsurer ..... 0  
 2. R - Registered - Non-domiciled RRGs ..... 0 5. N - None of the above - Not allowed to write business in the state ..... 6  
 3. E - Eligible - Reporting 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

Premiums are reported based on the policyholders state of residence

(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: Exhibit 1, Lines 6.4, 10.4, and 16.4, Col. 6.....

Globe Life Inc.  
63-0780404



Company	State of Domicile
AIIC Receivables Corporation (ARC)	Delaware
American Income Life Insurance Company (AIL)	Indiana
American Income Marketing Services, Inc. (AIMS)	Texas
American Life and Health Group, Inc.	Texas
Brown-Service Funeral Homes Company, Inc. (Brown Service)	Alabama
Evry Healthcare, Inc.	Delaware
Evry Health Insurance Company of Texas	Texas
Family Heritage Life Insurance Company of America	Ohio
Globe Life Inc.	Delaware
Globe Life Insurance Company of New York	New York
Globe Life And Accident Insurance Company (Globe)	Nebraska
Globe Life Insurance Agency Inc.	Texas
Globe Marketing Services, Inc. (Globe Marketing)	Oklahoma
Liberty National Auto Club, Inc. (Auto Club)	Alabama
Liberty National Life Insurance Company (LNL)	Nebraska
National Income Life Insurance Company (NILCO)	New York
Specialized Advertising Group, Inc.	Texas
TMK Buildings Corporation (TBC)	Texas
TMK Re, Ltd. (TMK Re)	Bermuda
Torchmark Insurance Agency, Inc. (TIA)	Alabama
United American Insurance Company (UA)	Nebraska

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Family Heritage Life Insurance Company of America  
**OVERFLOW PAGE FOR WRITE-INS**

Additional Write-ins for Assets Line 25

	Current Year			Prior Year
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
2504. Prepaid Expenses .....	2,408,025	2,408,025	0	
2505. Other Assets Nonadmitted .....	40,497	40,497	0	
2597. Summary of remaining write-ins for Line 25 from overflow page	2,448,522	2,448,522	0	0

Additional Write-ins for Exhibit of Net Investment Income Line 9

	1 Collected During Year	2 Earned During Year
0904. Policy Reinstatement Interest/Other .....	22	22
0997. Summary of remaining write-ins for Line 9 from overflow page	22	22

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. Recruiting Fees .....			425,901				.425,901			
09.305. Donations .....			135,654				.135,654			
09.306. Seminars .....			24,474				.24,474			
09.307. Office Services .....			17,828				.17,828			
09.397. Summary of remaining write-ins for Line 9.3 from overflow page	0	0	603,857	0	0	0	603,857			