



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

FIRST CATHOLIC SLOVAK UNION OF THE UNITED STATES OF AMERICA & CANADA

NAIC Group Code	0000 (Current)	0000 (Prior)	NAIC Company Code	56340	Employer's ID Number	34-0220550
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 <input type="checkbox"/> Fraternal Benefit Societies <input checked="" type="checkbox"/>					
Incorporated/Organized	01/09/1892			Commenced Business 10/01/1890		
Statutory Home Office	6611 ROCKSIDE ROAD (Street and Number)			INDEPENDENCE, OH, US 44131 (City or Town, State, Country and Zip Code)		
Main Administrative Office	6611 ROCKSIDE ROAD (Street and Number)			INDEPENDENCE, OH, US 44131 (City or Town, State, Country and Zip Code)		
				216-642-9406 (Area Code) (Telephone Number)		
Mail Address	6611 ROCKSIDE ROAD (Street and Number or P.O. Box)			INDEPENDENCE, OH, US 44131 (City or Town, State, Country and Zip Code)		
Primary Location of Books and Records	6611 ROCKSIDE ROAD (Street and Number)			INDEPENDENCE, OH, US 44131 (City or Town, State, Country and Zip Code)		
				216-642-9406 (Area Code) (Telephone Number)		
Internet Website Address	WWW.FCSU.COM					
Statutory Statement Contact	KENNETH ANTHONY ARENDT (Name)			216-642-9406 (Area Code) (Telephone Number)		
	FCSU@FCSU.COM (E-mail Address)			216-642-4310 (FAX Number)		

OFFICERS

President	KENNETH ARENDT	TREASURER	JOHN V. TOKARSKY
EXECUTIVE SECRETARY	KEVIN COLLINS	VICE PRESIDENT	DAMIAN NASTA
OTHER			
GARY J. MATTIA, GENERAL COUNSEL		EDWARD COWMAN, ACTUARY	
DIRECTORS OR TRUSTEES			
REV. THOMAS NASTA	SABINA SABADOS	THOMAS IVANEC	
MARTHA ZAVADA-WOJCIK	MILOS MITRO	NICOLE NASTA	
BRADLEY MATTIA	TIMOTHY GRAVES	JAMES MARMOL	
KENNETH ARENDT	KEVIN COLLINS	DAMIAN NASTA	
JOHN V TOKARSKY	JOANNE FIBBI	GREGORY MAURER	

State of OHIO County of CUYAHOGA SS SS

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

KENNETH A ARENDT
PRESIDENT

✓ KEVIN J COLLINS
EXECUTIVE SECRETARY

JOHN V TOKARSKY
TREASURER

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

Subscribed and sworn to before me this
28th day of January 2025
Adriana Scalp



ADRIANA SCALLY
Notary Public
State of Ohio
My Comm. Expires
November 29, 2026



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE)^(b)

5 6 3 4 0 2 0 2 4 4 3 0 0 2 0 0 0

NAIC Group Code 000

BUSINESS IN THE STATE OF Alaska

DURING THE YEAR 2024

NAIC Company Code 56340

24.AK

**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE) (Continued)^(b)**

NAIC Group Code	0000	BUSINESS IN THE STATE OF		Alaska		DURING THE YEAR						2024		NAIC Company Code	56340			
Line of Business		Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit		In Force December 31, Current Year (b)			
			Claims Settled During Current Year								22		Issued During Year		Other Changes to In Force (Net)			
			Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		Unpaid December 31, Current Year	Number of Pols/ Certs	23	24	25	26	27	28
			14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount								
Individual Life																		
1. Industrial																		
2. Whole																		
3. Term																		
4. Indexed																		
5. Universal																		
6. Universal with secondary guarantees																		
7. Variable																		
8. Variable universal																		
9. Credit																		
10. Other																		
11. Total Individual Life																		
Group Life																		
12. Whole																		
13. Term																		
14. Universal																		
15. Variable																		
16. Variable universal																		
17. Credit																		
18. Other																		
19. Total Group Life																		
Individual Annuities																		
20. Fixed																		
21. Indexed																		
22. Variable with guarantees																		
23. Variable without guarantees																		
24. Life contingent payout																		
25. Other																		
26. Total Individual Annuities																		
Group Annuities																		
27. Fixed																		
28. Indexed																		
29. Variable with guarantees																		
30. Variable without guarantees																		
31. Life contingent payout																		
32. Other																		
33. Total Group Annuities																		
Accident and Health																		
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
46. Total Accident and Health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
47. Total																		

NONE

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

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: 2) covering number of lives: 3) face amount \$

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ Group: \$ Total: \$

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

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code	0000	BUSINESS IN THE STATE OF		Arizona	DURING THE YEAR 2024							NAIC Company Code	56340	
		1	2	Dividends to Policyholders/Refunds to Members							Claims and Benefits Paid			
Line of Business		Premiums and Annuities Considerations	Other Considerations	3	4	5	6	7	8	9	10	11	12	
				Paid in Cash or Left on Deposit	Applied to Pay Renewal Premiums	Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	Other	Total (Col. 3+4+5+6)	Death and Annuity Benefits	Matured Endowments	Surrender Values and Withdrawals for Life Contracts	All Other Benefits	Total (Sum Columns 8 through 11)	
Individual Life														
1. Industrial								0					0	
2. Whole			23					0				705	705	
3. Term								0					0	
4. Indexed								0					0	
5. Universal								0					0	
6. Universal with secondary guarantees								0					0	
7. Variable								0					0	
8. Variable universal								0					0	
9. Credit								0					0	
10. Other								0					0	
11. Total Individual Life			23	0	0	0	0	0	0	0	705	0	705	
Group Life														
12. Whole								0					0	
13. Term								0					0	
14. Universal								0					0	
15. Variable								0					0	
16. Variable universal								0					0	
17. Credit								0					0	
18. Other								0					0	
19. Total Group Life			0	0	0	0	0	0	0	0	0	0	0	
Individual Annuities														
20. Fixed			500					0					549,775	
21. Indexed								0					0	
22. Variable with guarantees								0					0	
23. Variable without guarantees								0					0	
24. Life contingent payout								0					0	
25. Other								0					0	
26. Total Individual Annuities			500	0	0	0	0	0					549,775	
Group Annuities														
27. Fixed								0					0	
28. Indexed								0					0	
29. Variable with guarantees								0					0	
30. Variable without guarantees								0					0	
31. Life contingent payout								0					0	
32. Other								0					0	
33. Total Group Annuities			0	0	0	0	0	0	0	0	0	0	0	
Accident and Health														
34. Comprehensive individual								0	XXX	XXX	XXX		0	
35. Comprehensive group								0	XXX	XXX	XXX		0	
36. Medicare Supplement								0	XXX	XXX	XXX		0	
37. Vision only								0	XXX	XXX	XXX		0	
38. Dental only								0	XXX	XXX	XXX		0	
39. Federal Employees Health Benefits Plan								0	XXX	XXX	XXX		0	
40. Title XVIII Medicare								0	XXX	XXX	XXX		0	
41. Title XIX Medicaid								0	XXX	XXX	XXX		0	
42. Credit A&H								0	XXX	XXX	XXX		0	
43. Disability income								0	XXX	XXX	XXX		0	
44. Long-term care								0	XXX	XXX	XXX		0	
45. Other health								0	XXX	XXX	XXX		0	
46. Total Accident and Health			0	0	0	0	0	0	XXX	XXX	XXX	0	0	
47. Total			523 (c)	0	0	0	0	0	0	549,775	0	705	0	550,480

**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE) (Continued)^(b)**

NAIC Group Code	0000	BUSINESS IN THE STATE OF		Arizona		DURING THE YEAR						2024		NAIC Company Code	56340			
Line of Business	Incurred During Current Year	13	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22	Policy Exhibit		In Force December 31, Current Year (b)				
			Claims Settled During Current Year									Issued During Year		Other Changes to In Force (Net)				
			Totals Paid	Reduction by Compromise		Amount Rejected		Total Settled During Current Year				23	24	25	26	27	28	
			14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount		Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life																		
1. Industrial												0	0	0	0	0	0	
2. Whole												0	0	0	0	0	164	
3. Term												0	0	0	0	0	563,234	
4. Indexed												0	0	0	0	0		
5. Universal												0	0	0	0	0		
6. Universal with secondary guarantees												0	0	0	0	0		
7. Variable												0	0	0	0	0		
8. Variable universal												0	0	0	0	0		
9. Credit												0	0	0	0	0		
10. Other												0	0	0	0	0		
11. Total Individual Life			0	0	0	0	0	0	0	0		0	0	0	0	0	164	
Group Life																		
12. Whole												0	0	0	0	0		
13. Term												0	0	0	0	0		
14. Universal												0	0	0	0	0		
15. Variable												0	0	0	0	0		
16. Variable universal												0	0	0	0	0		
17. Credit												0	0	0	0	0		
18. Other												0	0	0	0	0		
19. Total Group Life			0	0	0	0	0	0	0	0		0	0	0	0	0	0	
Individual Annuities																		
20. Fixed												0	0	0	0	0		
21. Indexed												0	0	0	0	0		
22. Variable with guarantees												0	0	0	0	0		
23. Variable without guarantees												0	0	0	0	0		
24. Life contingent payout												0	0	0	0	0		
25. Other												0	0	0	0	0		
26. Total Individual Annuities			0	0	0	0	0	0	0	0		0	0	0	0	0	0	
Group Annuities																		
27. Fixed												0	0	0	0	0		
28. Indexed												0	0	0	0	0		
29. Variable with guarantees												0	0	0	0	0		
30. Variable without guarantees												0	0	0	0	0		
31. Life contingent payout												0	0	0	0	0		
32. Other												0	0	0	0	0		
33. Total Group Annuities			0	0	0	0	0	0	0	0		0	0	0	0	0	0	
Accident and Health																		
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
42. Credit A&H																		
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
46. Total Accident and Health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		0	0	0	0	0	0	
47. Total		0	0	0	0	0	0	0	0	0		0	0	0	0	0	563,234	

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

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: 2) covering number of lives: 3) face amount \$

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ Group: \$ Total: \$ 0

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

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE)^(b)

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**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE) (Continued)^(b)**

NAIC Group Code	0000	BUSINESS IN THE STATE OF		Arkansas		DURING THE YEAR						2024		NAIC Company Code	56340			
Line of Business		Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit		In Force December 31, Current Year (b)			
			Claims Settled During Current Year								22		Issued During Year		Other Changes to In Force (Net)			
			Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		Unpaid December 31, Current Year	Number of Pols/ Certs	23	24	25	26	27	28
			14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount								
Individual Life																		
1. Industrial																		
2. Whole																		
3. Term																		
4. Indexed																		
5. Universal																		
6. Universal with secondary guarantees																		
7. Variable																		
8. Variable universal																		
9. Credit																		
10. Other																		
11. Total Individual Life																		
Group Life																		
12. Whole																		
13. Term																		
14. Universal																		
15. Variable																		
16. Variable universal																		
17. Credit																		
18. Other																		
19. Total Group Life																		
Individual Annuities																		
20. Fixed																		
21. Indexed																		
22. Variable with guarantees																		
23. Variable without guarantees																		
24. Life contingent payout																		
25. Other																		
26. Total Individual Annuities																		
Group Annuities																		
27. Fixed																		
28. Indexed																		
29. Variable with guarantees																		
30. Variable without guarantees																		
31. Life contingent payout																		
32. Other																		
33. Total Group Annuities																		
Accident and Health																		
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
46. Total Accident and Health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
47. Total																		

NONE

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

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: 2) covering number of lives: 3) face amount \$

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ Group: \$ Total: \$

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

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code	0000	BUSINESS IN THE STATE OF		Colorado	DURING THE YEAR 2024							NAIC Company Code	56340
		1	2	Dividends to Policyholders/Refunds to Members							Claims and Benefits Paid		
Line of Business		Premiums and Annuities Considerations	Other Considerations	3	4	5	6	7	8	9	10	11	12
				Paid in Cash or Left on Deposit	Applied to Pay Renewal Premiums	Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	Other	Total (Col. 3+4+5+6)	Death and Annuity Benefits	Matured Endowments	Surrender Values and Withdrawals for Life Contracts	All Other Benefits	Total (Sum Columns 8 through 11)
Individual Life													
1. Industrial								0					0
2. Whole								17					0
3. Term								0					0
4. Indexed								0					0
5. Universal								0					0
6. Universal with secondary guarantees								0					0
7. Variable								0					0
8. Variable universal								0					0
9. Credit								0					0
10. Other								0					0
11. Total Individual Life		0	0	0	0	17	0	17	0	0	0	0	0
Group Life													
12. Whole								0					0
13. Term								0					0
14. Universal								0					0
15. Variable								0					0
16. Variable universal								0					0
17. Credit								0					0
18. Other								0					0
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities													
20. Fixed		361,000						0		366,270			366,270
21. Indexed								0					0
22. Variable with guarantees								0					0
23. Variable without guarantees								0					0
24. Life contingent payout								0					0
25. Other								0					0
26. Total Individual Annuities		361,000	0	0	0	0	0	0	366,270	0	0	0	366,270
Group Annuities													
27. Fixed								0					0
28. Indexed								0					0
29. Variable with guarantees								0					0
30. Variable without guarantees								0					0
31. Life contingent payout								0					0
32. Other								0					0
33. Total Group Annuities		0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health													
34. Comprehensive individual								0	XXX	XXX	XXX		0
35. Comprehensive group								0	XXX	XXX	XXX		0
36. Medicare Supplement								0	XXX	XXX	XXX		0
37. Vision only								0	XXX	XXX	XXX		0
38. Dental only								0	XXX	XXX	XXX		0
39. Federal Employees Health Benefits Plan								0	XXX	XXX	XXX		0
40. Title XVIII Medicare								0	XXX	XXX	XXX		0
41. Title XIX Medicaid								0	XXX	XXX	XXX		0
42. Credit A&H								0	XXX	XXX	XXX		0
43. Disability income								0	XXX	XXX	XXX		0
44. Long-term care								0	XXX	XXX	XXX		0
45. Other health								0	XXX	XXX	XXX		0
46. Total Accident and Health		0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total		361,000 (c)	0	0	0	17	0	17	366,270	0	0	0	366,270

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code	0000	BUSINESS IN THE STATE OF		Colorado		DURING THE YEAR						2024		NAIC Company Code	56340				
Line of Business	Incurred During Current Year	13	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22	Policy Exhibit		In Force December 31, Current Year (b)					
			Claims Settled During Current Year									Issued During Year		Other Changes to In Force (Net)					
			Totals Paid	Reduction by Compromise		Amount Rejected		Total Settled During Current Year				23	24	25	26	27	28		
			14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount		Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	
Individual Life																			
1. Industrial																			
2. Whole																54	1		
3. Term																			
4. Indexed																			
5. Universal																			
6. Universal with secondary guarantees																			
7. Variable																			
8. Variable universal																			
9. Credit																			
10. Other																			
11. Total Individual Life			0	0	0	0	0	0	0	0	0	0	0	0	54	1	11,490		
Group Life																			
12. Whole																			
13. Term																			
14. Universal																			
15. Variable																			
16. Variable universal																			
17. Credit																			
18. Other																			
19. Total Group Life			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Individual Annuities																			
20. Fixed																			
21. Indexed																			
22. Variable with guarantees																			
23. Variable without guarantees																			
24. Life contingent payout																			
25. Other																			
26. Total Individual Annuities			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Group Annuities																			
27. Fixed																			
28. Indexed																			
29. Variable with guarantees																			
30. Variable without guarantees																			
31. Life contingent payout																			
32. Other																			
33. Total Group Annuities			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Accident and Health																			
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
42. Credit A&H																			
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
46. Total Accident and Health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0		
47. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0	54	1		
																	11,490		

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

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: 2) covering number of lives: 3) face amount \$

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ Group: \$ Total: \$ 0

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

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code	0000	BUSINESS IN THE STATE OF		Connecticut		DURING THE YEAR 2024						NAIC Company Code	56340
		1	2	Dividends to Policyholders/Refunds to Members						Claims and Benefits Paid			
Line of Business		Premiums and Annuities Considerations	Other Considerations	3	4	5	6	7	8	9	10	11	12
				Paid in Cash or Left on Deposit	Applied to Pay Renewal Premiums	Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	Other	Total (Col. 3+4+5+6)	Death and Annuity Benefits	Matured Endowments	Surrender Values and Withdrawals for Life Contracts	All Other Benefits	Total (Sum Columns 8 through 11)
Individual Life													
1. Industrial													
2. Whole		16,451		243		2		9,194			0		
3. Term		4,536								0	25,950		
4. Indexed										0			
5. Universal										0			
6. Universal with secondary guarantees										0			
7. Variable										0			
8. Variable universal										0			
9. Credit										0			
10. Other										0			
11. Total Individual Life		20,987	0	243	2	9,194	0	9,439	25,950	0	3,834	0	29,784
Group Life													
12. Whole										0			
13. Term										0			
14. Universal										0			
15. Variable										0			
16. Variable universal										0			
17. Credit										0			
18. Other										0			
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities													
20. Fixed		103,366								0	286,576		
21. Indexed										0			286,576
22. Variable with guarantees										0			0
23. Variable without guarantees										0			0
24. Life contingent payout										0			0
25. Other										0			0
26. Total Individual Annuities		103,366	0	0	0	0	0	0	0	286,576	0	0	286,576
Group Annuities													
27. Fixed										0			0
28. Indexed										0			0
29. Variable with guarantees										0			0
30. Variable without guarantees										0			0
31. Life contingent payout										0			0
32. Other										0			0
33. Total Group Annuities		0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health													
34. Comprehensive individual										0	XXX	XXX	XXX
35. Comprehensive group										0	XXX	XXX	XXX
36. Medicare Supplement										0	XXX	XXX	XXX
37. Vision only										0	XXX	XXX	XXX
38. Dental only										0	XXX	XXX	XXX
39. Federal Employees Health Benefits Plan										0	XXX	XXX	XXX
40. Title XVIII Medicare										0	XXX	XXX	XXX
41. Title XIX Medicaid										0	XXX	XXX	XXX
42. Credit A&H										0	XXX	XXX	XXX
43. Disability income										0	XXX	XXX	XXX
44. Long-term care										0	XXX	XXX	XXX
45. Other health										0	XXX	XXX	XXX
46. Total Accident and Health		0	0	0	0	0	0	0	0	XXX	XXX	XXX	0
47. Total		124,353 (c)	0	243	2	9,194	0	9,439	312,526	0	3,834	0	316,360

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code	0000	BUSINESS IN THE STATE OF		Connecticut		DURING THE YEAR						2024		NAIC Company Code	56340				
Line of Business	Incurred During Current Year	13	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22	Policy Exhibit		In Force December 31, Current Year (b)					
			Claims Settled During Current Year									Issued During Year		Other Changes to In Force (Net)					
			Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23		24		25			
14		15		16		17		18		19		20		21		27			
Number of Pols/ Certs		Amount		Number of Pols/ Certs		Amount		Number of Pols/ Certs		Amount		Number of Pols/ Certs		Amount		Number of Pols/ Certs			
Individual Life																			
1. Industrial																			
2. Whole	25,949	10	25,949									0	0	0	0		993		
3. Term												0	0	0	0		6,414,094		
4. Indexed												0	0	0	0				
5. Universal												0	0	0	0				
6. Universal with secondary guarantees												0	0	0	0				
7. Variable												0	0	0	0				
8. Variable universal												0	0	0	0				
9. Credit												0	0	0	0				
10. Other												0	0	0	0				
11. Total Individual Life	25,949	10	25,949	0	0	0	0	0	10	25,949	0	1	10,000	(23)	(33,975)	993	6,414,094		
Group Life																			
12. Whole												0	0	0	0				
13. Term												0	0	0	0				
14. Universal												0	0	0	0				
15. Variable												0	0	0	0				
16. Variable universal												0	0	0	0				
17. Credit												0	0	0	0		(a)		
18. Other												0	0	0	0				
19. Total Group Life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Individual Annuities																			
20. Fixed												0	0	0	0				
21. Indexed												0	0	0	0				
22. Variable with guarantees												0	0	0	0				
23. Variable without guarantees												0	0	0	0				
24. Life contingent payout												0	0	0	0				
25. Other												0	0	0	0				
26. Total Individual Annuities	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Group Annuities																			
27. Fixed												0	0	0	0				
28. Indexed												0	0	0	0				
29. Variable with guarantees												0	0	0	0				
30. Variable without guarantees												0	0	0	0				
31. Life contingent payout												0	0	0	0				
32. Other												0	0	0	0				
33. Total Group Annuities	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Accident and Health																			
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
42. Credit A&H																			
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
46. Total Accident and Health	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0		
47. Total	25,949	10	25,949	0	0	0	0	0	10	25,949	0	1	10,000	(23)	(33,975)	993	6,414,094		

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

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: 2) covering number of lives: 3) face amount \$

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ Group: \$ Total: \$ 0

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

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE)^(b)

5 6 3 4 0 2 0 2 4 4 3 0 0 8 0 0 0

NAIC Group Code 000

BUSINESS IN THE STATE OF Delaware

DURING THE YEAR 2024

NAIC Company Code 56340

24.DE

**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE) (Continued)^(b)**

NAIC Group Code	0000	BUSINESS IN THE STATE OF		Delaware		DURING THE YEAR						2024		NAIC Company Code	56340		
Line of Business		Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22	Policy Exhibit		In Force December 31, Current Year (b)			
			Claims Settled During Current Year									Issued During Year		Other Changes to In Force (Net)			
			Totals Paid	Reduction by Compromise		Amount Rejected		Total Settled During Current Year				23		24		25	
Individual Life	13	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	22 Unpaid December 31, Current Year	23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount	
	1. Industrial																
	2. Whole																
	3. Term																
	4. Indexed																
	5. Universal																
	6. Universal with secondary guarantees																
	7. Variable																
	8. Variable universal																
	9. Credit																
	10. Other																
	11. Total Individual Life																
Group Life	12. Whole																
	13. Term																
	14. Universal																
	15. Variable																
	16. Variable universal																
	17. Credit																
	18. Other																
	19. Total Group Life																
Individual Annuities	20. Fixed																
	21. Indexed																
	22. Variable with guarantees																
	23. Variable without guarantees																
	24. Life contingent payout																
	25. Other																
	26. Total Individual Annuities																
Group Annuities	27. Fixed																
	28. Indexed																
	29. Variable with guarantees																
	30. Variable without guarantees																
	31. Life contingent payout																
	32. Other																
	33. Total Group Annuities																
Accident and Health	34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	42. Credit A&H	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	46. Total Accident and Health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	47. Total																

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

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: 2) covering number of lives: 3) face amount \$

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ Group: \$ Total: \$

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

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code	0000	BUSINESS IN THE STATE OF		Florida	DURING THE YEAR 2024							NAIC Company Code	56340
		1	2	Dividends to Policyholders/Refunds to Members							Claims and Benefits Paid		
Line of Business		Premiums and Annuities Considerations	Other Considerations	3	4	5	6	7	8	9	10	11	12
				Paid in Cash or Left on Deposit	Applied to Pay Renewal Premiums	Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	Other	Total (Col. 3+4+5+6)	Death and Annuity Benefits	Matured Endowments	Surrender Values and Withdrawals for Life Contracts	All Other Benefits	Total (Sum Columns 8 through 11)
Individual Life													
1. Industrial													0
2. Whole				7,536									29,401
3. Term				1,876									0
4. Indexed													0
5. Universal													0
6. Universal with secondary guarantees													0
7. Variable													0
8. Variable universal													0
9. Credit													0
10. Other													0
11. Total Individual Life		9,412	0	68	32	963	0	1,063	0	0	29,401	0	29,401
Group Life													
12. Whole													0
13. Term													0
14. Universal													0
15. Variable													0
16. Variable universal													0
17. Credit													0
18. Other													0
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities													
20. Fixed		557,738											486,024
21. Indexed													0
22. Variable with guarantees													0
23. Variable without guarantees													0
24. Life contingent payout													0
25. Other													0
26. Total Individual Annuities		557,738	0	0	0	0	0	0	486,024	0	0	0	486,024
Group Annuities													
27. Fixed													0
28. Indexed													0
29. Variable with guarantees													0
30. Variable without guarantees													0
31. Life contingent payout													0
32. Other													0
33. Total Group Annuities		0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health													
34. Comprehensive individual													0
35. Comprehensive group													0
36. Medicare Supplement													0
37. Vision only													0
38. Dental only													0
39. Federal Employees Health Benefits Plan													0
40. Title XVIII Medicare													0
41. Title XIX Medicaid													0
42. Credit A&H													0
43. Disability income													0
44. Long-term care													0
45. Other health													0
46. Total Accident and Health		0	0	0	0	0	0	0	XXX	XXX	XXX	XXX	0
47. Total		567,150 (c)	0	68	32	963	0	1,063	486,024	0	29,401	0	515,426

**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE) (Continued)^(b)**

NAIC Group Code	0000	BUSINESS IN THE STATE OF		Florida		DURING THE YEAR						2024		NAIC Company Code	56340				
Line of Business	Incurred During Current Year	13	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22	Policy Exhibit		In Force December 31, Current Year (b)					
			Claims Settled During Current Year									Issued During Year		Other Changes to In Force (Net)					
			Totals Paid	Reduction by Compromise		Amount Rejected		Total Settled During Current Year				23	24	25	26	27	28		
			14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount		Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	
Individual Life																			
1. Industrial												0	0	0					
2. Whole												0	0	3	45,000		2,738		
3. Term												0	0			95	1,042,138		
4. Indexed												0	0						
5. Universal												0	0						
6. Universal with secondary guarantees												0	0						
7. Variable												0	0						
8. Variable universal												0	0						
9. Credit												0	0						
10. Other												0	0						
11. Total Individual Life			0	0	0	0	0	0	0	0		0	3	45,000	0	2,738	95	1,042,138	
Group Life												0	0						
12. Whole												0	0						
13. Term												0	0						
14. Universal												0	0						
15. Variable												0	0						
16. Variable universal												0	0						
17. Credit												0	0						
18. Other												0	0						
19. Total Group Life			0	0	0	0	0	0	0	0		0	0	0	0	0	0		
Individual Annuities												0	0						
20. Fixed												0	0						
21. Indexed												0	0						
22. Variable with guarantees												0	0						
23. Variable without guarantees												0	0						
24. Life contingent payout												0	0						
25. Other												0	0						
26. Total Individual Annuities			0	0	0	0	0	0	0	0		0	0	0	0	0	0		
Group Annuities												0	0						
27. Fixed												0	0						
28. Indexed												0	0						
29. Variable with guarantees												0	0						
30. Variable without guarantees												0	0						
31. Life contingent payout												0	0						
32. Other												0	0						
33. Total Group Annuities			0	0	0	0	0	0	0	0		0	0	0	0	0	0		
Accident and Health																			
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX						
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX						
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX						
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX						
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX						
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX						
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX						
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX						
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX						
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX						
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX						
46. Total Accident and Health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	0	0	0	0	0	
47. Total		0	0	0	0	0	0	0	0	0		0	0	3	45,000	0	2,738	95	1,042,138

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

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: 2) covering number of lives: 3) face amount \$

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ Group: \$ Total: \$ 0

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

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code	0000	BUSINESS IN THE STATE OF		Georgia	DURING THE YEAR 2024							NAIC Company Code	56340	
		1	2	Dividends to Policyholders/Refunds to Members							Claims and Benefits Paid			
Line of Business		Premiums and Annuities Considerations	Other Considerations	3	4	5	6	7	8	9	10	11	12	
				Paid in Cash or Left on Deposit	Applied to Pay Renewal Premiums	Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	Other	Total (Col. 3+4+5+6)	Death and Annuity Benefits	Matured Endowments	Surrender Values and Withdrawals for Life Contracts	All Other Benefits	Total (Sum Columns 8 through 11)	
Individual Life														
1. Industrial									0					0
2. Whole			12						12					0
3. Term									0					0
4. Indexed									0					0
5. Universal									0					0
6. Universal with secondary guarantees									0					0
7. Variable									0					0
8. Variable universal									0					0
9. Credit									0					0
10. Other									0					0
11. Total Individual Life			12	0	0	0	12	0	12	0	0	0	0	0
Group Life														
12. Whole									0					0
13. Term									0					0
14. Universal									0					0
15. Variable									0					0
16. Variable universal									0					0
17. Credit									0					0
18. Other									0					0
19. Total Group Life			0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities														
20. Fixed		100,000							0					0
21. Indexed									0					0
22. Variable with guarantees									0					0
23. Variable without guarantees									0					0
24. Life contingent payout									0					0
25. Other									0					0
26. Total Individual Annuities		100,000	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities														
27. Fixed									0					0
28. Indexed									0					0
29. Variable with guarantees									0					0
30. Variable without guarantees									0					0
31. Life contingent payout									0					0
32. Other									0					0
33. Total Group Annuities			0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health														
34. Comprehensive individual									0	XXX	XXX	XXX		0
35. Comprehensive group									0	XXX	XXX	XXX		0
36. Medicare Supplement									0	XXX	XXX	XXX		0
37. Vision only									0	XXX	XXX	XXX		0
38. Dental only									0	XXX	XXX	XXX		0
39. Federal Employees Health Benefits Plan									0	XXX	XXX	XXX		0
40. Title XVIII Medicare									0	XXX	XXX	XXX		0
41. Title XIX Medicaid									0	XXX	XXX	XXX		0
42. Credit A&H									0	XXX	XXX	XXX		0
43. Disability income									0	XXX	XXX	XXX		0
44. Long-term care									0	XXX	XXX	XXX		0
45. Other health									0	XXX	XXX	XXX		0
46. Total Accident and Health			0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total			100,012 (c)	0	0	0	12	0	12	0	0	0	0	0

**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE) (Continued)^(b)**

NAIC Group Code	0000	BUSINESS IN THE STATE OF		Georgia		DURING THE YEAR						2024		NAIC Company Code	56340				
Line of Business	Incurred During Current Year	13	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22	Policy Exhibit		In Force December 31, Current Year (b)					
			Claims Settled During Current Year									Issued During Year		Other Changes to In Force (Net)					
			Totals Paid	Reduction by Compromise		Amount Rejected		Total Settled During Current Year				23	24	25	26	27	28		
			14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount		Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	
Individual Life																			
1. Industrial												0	0	0	0	0	0		
2. Whole												0	0	0	0	106	2		
3. Term												0	0	0	0	0	0		
4. Indexed												0	0	0	0	0	0		
5. Universal												0	0	0	0	0	0		
6. Universal with secondary guarantees												0	0	0	0	0	0		
7. Variable												0	0	0	0	0	0		
8. Variable universal												0	0	0	0	0	0		
9. Credit												0	0	0	0	0	0		
10. Other												0	0	0	0	0	0		
11. Total Individual Life			0	0	0	0	0	0	0	0		0	0	0	0	106	2	20,954	
Group Life																			
12. Whole												0	0	0	0	0	0	0	
13. Term												0	0	0	0	0	0	0	
14. Universal												0	0	0	0	0	0	0	
15. Variable												0	0	0	0	0	0	0	
16. Variable universal												0	0	0	0	0	0	0	
17. Credit												0	0	0	0	0	0	0	
18. Other												0	0	0	0	0	0	0	
19. Total Group Life			0	0	0	0	0	0	0	0		0	0	0	0	0	0	0	
Individual Annuities																			
20. Fixed												0	0	0	0	0	0	0	
21. Indexed												0	0	0	0	0	0	0	
22. Variable with guarantees												0	0	0	0	0	0	0	
23. Variable without guarantees												0	0	0	0	0	0	0	
24. Life contingent payout												0	0	0	0	0	0	0	
25. Other												0	0	0	0	0	0	0	
26. Total Individual Annuities			0	0	0	0	0	0	0	0		0	0	0	0	0	0	0	
Group Annuities																			
27. Fixed												0	0	0	0	0	0	0	
28. Indexed												0	0	0	0	0	0	0	
29. Variable with guarantees												0	0	0	0	0	0	0	
30. Variable without guarantees												0	0	0	0	0	0	0	
31. Life contingent payout												0	0	0	0	0	0	0	
32. Other												0	0	0	0	0	0	0	
33. Total Group Annuities			0	0	0	0	0	0	0	0		0	0	0	0	0	0	0	
Accident and Health																			
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
46. Total Accident and Health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	
47. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	106	2	20,954

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

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: 2) covering number of lives: 3) face amount \$

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ Group: \$ Total: \$ 0

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

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code	0000	BUSINESS IN THE STATE OF		Idaho		DURING THE YEAR 2024						NAIC Company Code	56340
		1	2	Dividends to Policyholders/Refunds to Members						Claims and Benefits Paid			
		Premiums and Annuities Considerations	Other Considerations	3	4	5	6	7	8	9	10	11	12
		Paid in Cash or Left on Deposit	Applied to Pay Renewal Premiums	Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	Other	Total (Col. 3+4+5+6)	Death and Annuity Benefits	Matured Endowments	Surrender Values and Withdrawals for Life Contracts	All Other Benefits	Total (Sum Columns 8 through 11)		
Line of Business													
Individual Life													
1. Industrial													
2. Whole													
3. Term													
4. Indexed													
5. Universal													
6. Universal with secondary guarantees													
7. Variable													
8. Variable universal													
9. Credit													
10. Other													
11. Total Individual Life													
Group Life													
12. Whole													
13. Term													
14. Universal													
15. Variable													
16. Variable universal													
17. Credit													
18. Other													
19. Total Group Life													
Individual Annuities													
20. Fixed													
21. Indexed													
22. Variable with guarantees													
23. Variable without guarantees													
24. Life contingent payout													
25. Other													
26. Total Individual Annuities													
Group Annuities													
27. Fixed													
28. Indexed													
29. Variable with guarantees													
30. Variable without guarantees													
31. Life contingent payout													
32. Other													
33. Total Group Annuities													
Accident and Health													
34. Comprehensive individual	(d)										XXX	XXX	XXX
35. Comprehensive group	(d)										XXX	XXX	XXX
36. Medicare Supplement	(d)										XXX	XXX	XXX
37. Vision only	(d)										XXX	XXX	XXX
38. Dental only	(d)										XXX	XXX	XXX
39. Federal Employees Health Benefits Plan	(d)										XXX	XXX	XXX
40. Title XVIII Medicare	(d)										XXX	XXX	XXX
41. Title XIX Medicaid	(d)										XXX	XXX	XXX
42. Credit A&H											XXX	XXX	XXX
43. Disability income	(d)										XXX	XXX	XXX
44. Long-term care	(d)										XXX	XXX	XXX
45. Other health	(d)										XXX	XXX	XXX
46. Total Accident and Health											XXX	XXX	XXX
47. Total			(c)										

NONE

**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE) (Continued)^(b)**

NAIC Group Code	0000	BUSINESS IN THE STATE OF		Idaho		DURING THE YEAR								2024		NAIC Company Code	56340		
Line of Business	Incurred During Current Year	13	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22	Policy Exhibit		In Force December 31, Current Year (b)					
			Claims Settled During Current Year									Issued During Year		Other Changes to In Force (Net)					
			Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			Unpaid December 31, Current Year		Number of Pols/ Certs		Number of Pols/ Certs			
			14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount									
Individual Life																			
1. Industrial																			
2. Whole																			
3. Term																			
4. Indexed																			
5. Universal																			
6. Universal with secondary guarantees																			
7. Variable																			
8. Variable universal																			
9. Credit																			
10. Other																			
11. Total Individual Life																			
Group Life																			
12. Whole																			
13. Term																			
14. Universal																			
15. Variable																			
16. Variable universal																			
17. Credit																			
18. Other																			
19. Total Group Life																			
Individual Annuities																			
20. Fixed																			
21. Indexed																			
22. Variable with guarantees																			
23. Variable without guarantees																			
24. Life contingent payout																			
25. Other																			
26. Total Individual Annuities																			
Group Annuities																			
27. Fixed																			
28. Indexed																			
29. Variable with guarantees																			
30. Variable without guarantees																			
31. Life contingent payout																			
32. Other																			
33. Total Group Annuities																			
Accident and Health																			
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
46. Total Accident and Health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
47. Total																			

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

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: 2) covering number of lives: 3) face amount \$

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ Group: \$ Total: \$

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

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code	0000	BUSINESS IN THE STATE OF		Illinois	DURING THE YEAR 2024							NAIC Company Code	56340	
		1	2		Dividends to Policyholders/Refunds to Members							Claims and Benefits Paid		
Line of Business		Premiums and Annuities Considerations	Other Considerations	Paid in Cash or Left on Deposit	3	4	5	6	7	8	9	10	11	12
					Applied to Pay Renewal Premiums	Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	Other	Total (Col. 3+4+5+6)	Death and Annuity Benefits	Matured Endowments	Surrender Values and Withdrawals for Life Contracts	All Other Benefits	Total (Sum Columns 8 through 11)	
Individual Life														
1. Industrial		51,095		573		47		20,169		0				0
2. Whole		14,686								190,048			21,753	211,801
3. Term										0				0
4. Indexed										0				0
5. Universal										0				0
6. Universal with secondary guarantees										0				0
7. Variable										0				0
8. Variable universal										0				0
9. Credit										0				0
10. Other										0				0
11. Total Individual Life		65,781	0	573	47		20,169	0	20,790	190,048	0	21,753	0	211,801
Group Life														
12. Whole										0				0
13. Term										0				0
14. Universal										0				0
15. Variable										0				0
16. Variable universal										0				0
17. Credit										0				0
18. Other										0				0
19. Total Group Life		0	0	0	0		0	0	0	0	0	0	0	0
Individual Annuities														
20. Fixed		12,746,202								0	7,493,828			7,493,828
21. Indexed										0				0
22. Variable with guarantees										0				0
23. Variable without guarantees										0				0
24. Life contingent payout										0				0
25. Other										0				0
26. Total Individual Annuities		12,746,202	0	0	0		0	0	0	7,493,828	0	0	0	7,493,828
Group Annuities														
27. Fixed										0				0
28. Indexed										0				0
29. Variable with guarantees										0				0
30. Variable without guarantees										0				0
31. Life contingent payout										0				0
32. Other										0				0
33. Total Group Annuities		0	0	0	0		0	0	0	0	0	0	0	0
Accident and Health														
34. Comprehensive individual		(d)								0	XXX	XXX	XXX	0
35. Comprehensive group		(d)								0	XXX	XXX	XXX	0
36. Medicare Supplement		(d)								0	XXX	XXX	XXX	0
37. Vision only		(d)								0	XXX	XXX	XXX	0
38. Dental only		(d)								0	XXX	XXX	XXX	0
39. Federal Employees Health Benefits Plan		(d)								0	XXX	XXX	XXX	0
40. Title XVIII Medicare		(d)								0	XXX	XXX	XXX	0
41. Title XIX Medicaid		(d)								0	XXX	XXX	XXX	0
42. Credit A&H										0	XXX	XXX	XXX	0
43. Disability income		(d)								0	XXX	XXX	XXX	0
44. Long-term care		(d)								0	XXX	XXX	XXX	0
45. Other health		(d)								0	XXX	XXX	XXX	0
46. Total Accident and Health		0	0	0	0		0	0	0	0	XXX	XXX	XXX	0
47. Total		12,811,983 (c)	0	573	47		20,169	0	20,790	7,683,877	0	21,753	0	7,705,630

**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE) (Continued)^(b)**

NAIC Group Code	0000	BUSINESS IN THE STATE OF		Illinois		DURING THE YEAR						2024		NAIC Company Code	56340		
Line of Business	Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit		In Force December 31, Current Year (b)			
		13		Claims Settled During Current Year						22		Issued During Year		Other Changes to In Force (Net)			
		Totals Paid	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount
Individual Life																	
1. Industrial																	
2. Whole	208,567	37	190,903								17,664	6	85,000	(63)	(332,709)	2,090	17,754,034
3. Term																	
4. Indexed																	
5. Universal																	
6. Universal with secondary guarantees																	
7. Variable																	
8. Variable universal																	
9. Credit																	
10. Other																	
11. Total Individual Life	208,567	37	190,903	0	0	0	0	0	37	190,903	17,664	6	85,000	(63)	(332,709)	2,090	17,754,034
Group Life																	
12. Whole																	
13. Term																	
14. Universal																	
15. Variable																	
16. Variable universal																	
17. Credit																	
18. Other																	
19. Total Group Life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities																	
20. Fixed																	
21. Indexed																	
22. Variable with guarantees																	
23. Variable without guarantees																	
24. Life contingent payout																	
25. Other																	
26. Total Individual Annuities	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities																	
27. Fixed																	
28. Indexed																	
29. Variable with guarantees																	
30. Variable without guarantees																	
31. Life contingent payout																	
32. Other																	
33. Total Group Annuities	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health																	
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
42. Credit A&H																	
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
46. Total Accident and Health	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
47. Total	208,567	37	190,903	0	0	0	0	0	37	190,903	17,664	6	85,000	(63)	(332,709)	2,090	17,754,034

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

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: 2) covering number of lives: 3) face amount \$

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ Group: \$ Total: \$ 0

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

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code	0000	BUSINESS IN THE STATE OF		Indiana	DURING THE YEAR 2024							NAIC Company Code	56340	
		1	2		Dividends to Policyholders/Refunds to Members							Claims and Benefits Paid		
Line of Business		Premiums and Annuities Considerations	Other Considerations	Paid in Cash or Left on Deposit	Applied to Pay Renewal Premiums	Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	Other	Total (Col. 3+4+5+6)	Death and Annuity Benefits	Matured Endowments	Surrender Values and Withdrawals for Life Contracts	All Other Benefits	Total (Sum Columns 8 through 11)	
Individual Life														
1. Industrial								0					0	
2. Whole		11,248		189		2,652		2,842	17,387		9,292		26,679	
3. Term		448						0					0	
4. Indexed								0					0	
5. Universal								0					0	
6. Universal with secondary guarantees								0					0	
7. Variable								0					0	
8. Variable universal								0					0	
9. Credit								0					0	
10. Other								0					0	
11. Total Individual Life		11,696	0	189	0	2,652	0	2,842	17,387	0	9,292	0	26,679	
Group Life														
12. Whole								0					0	
13. Term								0					0	
14. Universal								0					0	
15. Variable								0					0	
16. Variable universal								0					0	
17. Credit								0					0	
18. Other								0					0	
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0	
Individual Annuities														
20. Fixed		267,298						0	166,226				166,226	
21. Indexed								0					0	
22. Variable with guarantees								0					0	
23. Variable without guarantees								0					0	
24. Life contingent payout								0					0	
25. Other								0					0	
26. Total Individual Annuities		267,298	0	0	0	0	0	0	166,226	0	0	0	166,226	
Group Annuities														
27. Fixed								0					0	
28. Indexed								0					0	
29. Variable with guarantees								0					0	
30. Variable without guarantees								0					0	
31. Life contingent payout								0					0	
32. Other								0					0	
33. Total Group Annuities		0	0	0	0	0	0	0	0	0	0	0	0	
Accident and Health														
34. Comprehensive individual								0	XXX	XXX	XXX		0	
35. Comprehensive group								0	XXX	XXX	XXX		0	
36. Medicare Supplement								0	XXX	XXX	XXX		0	
37. Vision only								0	XXX	XXX	XXX		0	
38. Dental only								0	XXX	XXX	XXX		0	
39. Federal Employees Health Benefits Plan								0	XXX	XXX	XXX		0	
40. Title XVIII Medicare								0	XXX	XXX	XXX		0	
41. Title XIX Medicaid								0	XXX	XXX	XXX		0	
42. Credit A&H								0	XXX	XXX	XXX		0	
43. Disability income								0	XXX	XXX	XXX		0	
44. Long-term care								0	XXX	XXX	XXX		0	
45. Other health								0	XXX	XXX	XXX		0	
46. Total Accident and Health		0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	
47. Total		278,994 (c)	0	189	0	2,652	0	2,842	183,613	0	9,292	0	192,905	

**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE) (Continued)^(b)**

NAIC Group Code	0000	BUSINESS IN THE STATE OF		Indiana		DURING THE YEAR						2024		NAIC Company Code	56340			
Line of Business	Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit						
		13		Claims Settled During Current Year						22		Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)		
		Totals Paid	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount	
Individual Life																		
1. Industrial																		
2. Whole	21,438	8		17,758							0	0		0				
3. Term											8	17,758	3,680	2	20,000	(8)	(41,396)	
4. Indexed											0	0	0	2	20,000		297	
5. Universal											0	0	0					
6. Universal with secondary guarantees											0	0	0					
7. Variable											0	0	0					
8. Variable universal											0	0	0					
9. Credit											0	0	0					
10. Other											0	0	0					
11. Total Individual Life	21,438	8		17,758	0	0	0	0	0	8	17,758	3,680	2	20,000	(8)	(41,396)	297	1,592,759
Group Life																		
12. Whole											0	0	0					
13. Term											0	0	0					
14. Universal											0	0	0					
15. Variable											0	0	0					
16. Variable universal											0	0	0					
17. Credit											0	0	0					
18. Other											0	0	0					
19. Total Group Life	0	0		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities																		
20. Fixed											0	0	0					
21. Indexed											0	0	0					
22. Variable with guarantees											0	0	0					
23. Variable without guarantees											0	0	0					
24. Life contingent payout											0	0	0					
25. Other											0	0	0					
26. Total Individual Annuities	0	0		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities																		
27. Fixed											0	0	0					
28. Indexed											0	0	0					
29. Variable with guarantees											0	0	0					
30. Variable without guarantees											0	0	0					
31. Life contingent payout											0	0	0					
32. Other											0	0	0					
33. Total Group Annuities	0	0		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health																		
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
42. Credit A&H																		
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
46. Total Accident and Health	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
47. Total	21,438	8		17,758	0	0	0	0	0	8	17,758	3,680	2	20,000	(8)	(41,396)	297	1,592,759

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

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: 2) covering number of lives: 3) face amount \$

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ Group: \$ Total: \$ 0

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

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code	0000	BUSINESS IN THE STATE OF		Iowa	DURING THE YEAR 2024							NAIC Company Code	56340	
		1	2		Dividends to Policyholders/Refunds to Members							Claims and Benefits Paid		
Line of Business		Premiums and Annuities Considerations	Other Considerations	Paid in Cash or Left on Deposit	Applied to Pay Renewal Premiums	Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	Other	Total (Col. 3+4+5+6)	Death and Annuity Benefits	Matured Endowments	Surrender Values and Withdrawals for Life Contracts	All Other Benefits	Total (Sum Columns 8 through 11)	
Individual Life														
1. Industrial								0					0	
2. Whole		1,409						1					0	
3. Term								0					0	
4. Indexed								0					0	
5. Universal								0					0	
6. Universal with secondary guarantees								0					0	
7. Variable								0					0	
8. Variable universal								0					0	
9. Credit								0					0	
10. Other								0					0	
11. Total Individual Life		1,409	0	0	0	1	0	1	0	0	0	0	0	
Group Life														
12. Whole								0					0	
13. Term								0					0	
14. Universal								0					0	
15. Variable								0					0	
16. Variable universal								0					0	
17. Credit								0					0	
18. Other								0					0	
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0	
Individual Annuities														
20. Fixed		2,758,335						0	1,819,382				1,819,382	
21. Indexed								0					0	
22. Variable with guarantees								0					0	
23. Variable without guarantees								0					0	
24. Life contingent payout								0					0	
25. Other								0					0	
26. Total Individual Annuities		2,758,335	0	0	0	0	0	0	1,819,382	0	0	0	1,819,382	
Group Annuities														
27. Fixed								0					0	
28. Indexed								0					0	
29. Variable with guarantees								0					0	
30. Variable without guarantees								0					0	
31. Life contingent payout								0					0	
32. Other								0					0	
33. Total Group Annuities		0	0	0	0	0	0	0	0	0	0	0	0	
Accident and Health														
34. Comprehensive individual		(d)						0	XXX	XXX	XXX		0	
35. Comprehensive group		(d)						0	XXX	XXX	XXX		0	
36. Medicare Supplement		(d)						0	XXX	XXX	XXX		0	
37. Vision only		(d)						0	XXX	XXX	XXX		0	
38. Dental only		(d)						0	XXX	XXX	XXX		0	
39. Federal Employees Health Benefits Plan		(d)						0	XXX	XXX	XXX		0	
40. Title XVIII Medicare		(d)						0	XXX	XXX	XXX		0	
41. Title XIX Medicaid		(d)						0	XXX	XXX	XXX		0	
42. Credit A&H								0	XXX	XXX	XXX		0	
43. Disability income		(d)						0	XXX	XXX	XXX		0	
44. Long-term care		(d)						0	XXX	XXX	XXX		0	
45. Other health		(d)						0	XXX	XXX	XXX		0	
46. Total Accident and Health		0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	
47. Total		2,759,744 (c)	0	0	0	1	0	1	1,819,382	0	0	0	1,819,382	

**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE) (Continued)^(b)**

NAIC Group Code	0000	BUSINESS IN THE STATE OF		Iowa		DURING THE YEAR						2024		NAIC Company Code	56340				
Line of Business	Incurred During Current Year	13	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22	Policy Exhibit		In Force December 31, Current Year (b)					
			Claims Settled During Current Year									Issued During Year		Other Changes to In Force (Net)					
			Totals Paid	Reduction by Compromise		Amount Rejected		Total Settled During Current Year				23	24	25	26	27	28		
			14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount		Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	
Individual Life																			
1. Industrial												0	0	0	0				
2. Whole												0	0	2	50,000	(1)	(9,997)		
3. Term												0	0			8	195,006		
4. Indexed												0	0						
5. Universal												0	0						
6. Universal with secondary guarantees												0	0						
7. Variable												0	0						
8. Variable universal												0	0						
9. Credit												0	0						
10. Other												0	0						
11. Total Individual Life			0	0	0	0	0	0	0	0		0	2	50,000	(1)	(9,997)	8	195,006	
Group Life												0	0						
12. Whole												0	0						
13. Term												0	0						
14. Universal												0	0						
15. Variable												0	0						
16. Variable universal												0	0						
17. Credit												0	0						
18. Other												0	0						
19. Total Group Life			0	0	0	0	0	0	0	0		0	0	0	0	0	0		
Individual Annuities												0	0						
20. Fixed												0	0						
21. Indexed												0	0						
22. Variable with guarantees												0	0						
23. Variable without guarantees												0	0						
24. Life contingent payout												0	0						
25. Other												0	0						
26. Total Individual Annuities			0	0	0	0	0	0	0	0		0	0	0	0	0	0		
Group Annuities												0	0						
27. Fixed												0	0						
28. Indexed												0	0						
29. Variable with guarantees												0	0						
30. Variable without guarantees												0	0						
31. Life contingent payout												0	0						
32. Other												0	0						
33. Total Group Annuities			0	0	0	0	0	0	0	0		0	0	0	0	0	0		
Accident and Health												XXX	XXX	XXX	XXX	XXX	XXX		
34. Comprehensive individual		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		
35. Comprehensive group		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		
36. Medicare Supplement		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		
37. Vision only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		
38. Dental only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		
39. Federal Employees Health Benefits Plan		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		
40. Title XVIII Medicare		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		
41. Title XIX Medicaid		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		
42. Credit A&H			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		
43. Disability income		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		
44. Long-term care		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		
45. Other health		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		
46. Total Accident and Health			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		
47. Total			0	0	0	0	0	0	0	0		0	0	2	50,000	(1)	(9,997)	8	195,006

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

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: 2) covering number of lives: 3) face amount \$

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ Group: \$ Total: \$ 0

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

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code	0000	BUSINESS IN THE STATE OF		Kansas		DURING THE YEAR 2024						NAIC Company Code	56340	
		1	2	Dividends to Policyholders/Refunds to Members						Claims and Benefits Paid				
Line of Business		Premiums and Annuities Considerations	Other Considerations	3	4	5	6	7	8	9	10	11	12	
				Paid in Cash or Left on Deposit	Applied to Pay Renewal Premiums	Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	Other	Total (Col. 3+4+5+6)	Death and Annuity Benefits	Matured Endowments	Surrender Values and Withdrawals for Life Contracts	All Other Benefits	Total (Sum Columns 8 through 11)	
Individual Life														
1. Industrial														
2. Whole														
3. Term														
4. Indexed														
5. Universal														
6. Universal with secondary guarantees														
7. Variable														
8. Variable universal														
9. Credit														
10. Other														
11. Total Individual Life														
Group Life														
12. Whole														
13. Term														
14. Universal														
15. Variable														
16. Variable universal														
17. Credit														
18. Other														
19. Total Group Life														
Individual Annuities														
20. Fixed														
21. Indexed														
22. Variable with guarantees														
23. Variable without guarantees														
24. Life contingent payout														
25. Other														
26. Total Individual Annuities														
Group Annuities														
27. Fixed														
28. Indexed														
29. Variable with guarantees														
30. Variable without guarantees														
31. Life contingent payout														
32. Other														
33. Total Group Annuities														
Accident and Health														
34. Comprehensive individual											XXX	XXX	XXX	
35. Comprehensive group											XXX	XXX	XXX	
36. Medicare Supplement											XXX	XXX	XXX	
37. Vision only											XXX	XXX	XXX	
38. Dental only											XXX	XXX	XXX	
39. Federal Employees Health Benefits Plan											XXX	XXX	XXX	
40. Title XVIII Medicare											XXX	XXX	XXX	
41. Title XIX Medicaid											XXX	XXX	XXX	
42. Credit A&H											XXX	XXX	XXX	
43. Disability income											XXX	XXX	XXX	
44. Long-term care											XXX	XXX	XXX	
45. Other health											XXX	XXX	XXX	
46. Total Accident and Health											XXX	XXX	XXX	
47. Total				(c)										

**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE) (Continued)^(b)**

NAIC Group Code	0000	BUSINESS IN THE STATE OF		Kansas		DURING THE YEAR						2024		NAIC Company Code	56340			
Line of Business	Incurred During Current Year	13	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22	Policy Exhibit		In Force December 31, Current Year (b)				
			Claims Settled During Current Year									Issued During Year		Other Changes to In Force (Net)				
			Totals Paid	Reduction by Compromise		Amount Rejected		Total Settled During Current Year				23	24	25	26	27	28	
			14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount		Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life																		
1. Industrial																		
2. Whole																		
3. Term																		
4. Indexed																		
5. Universal																		
6. Universal with secondary guarantees																		
7. Variable																		
8. Variable universal																		
9. Credit																		
10. Other																		
11. Total Individual Life																		
Group Life																		
12. Whole																		
13. Term																		
14. Universal																		
15. Variable																		
16. Variable universal																		
17. Credit																		
18. Other																		
19. Total Group Life																		
Individual Annuities																		
20. Fixed																		
21. Indexed																		
22. Variable with guarantees																		
23. Variable without guarantees																		
24. Life contingent payout																		
25. Other																		
26. Total Individual Annuities																		
Group Annuities																		
27. Fixed																		
28. Indexed																		
29. Variable with guarantees																		
30. Variable without guarantees																		
31. Life contingent payout																		
32. Other																		
33. Total Group Annuities																		
Accident and Health																		
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
46. Total Accident and Health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
47. Total																		

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

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: 2) covering number of lives: 3) face amount \$

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ Group: \$ Total: \$

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

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code	0000	BUSINESS IN THE STATE OF		Kentucky		DURING THE YEAR 2024						NAIC Company Code	56340	
		1	2	Dividends to Policyholders/Refunds to Members						Claims and Benefits Paid				
Line of Business		Premiums and Annuities Considerations	Other Considerations	3	4	5	6	7	8	9	10	11	12	
				Paid in Cash or Left on Deposit	Applied to Pay Renewal Premiums	Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	Other	Total (Col. 3+4+5+6)	Death and Annuity Benefits	Matured Endowments	Surrender Values and Withdrawals for Life Contracts	All Other Benefits	Total (Sum Columns 8 through 11)	
Individual Life														
1. Industrial								0						0
2. Whole								0						0
3. Term								0						0
4. Indexed								0						0
5. Universal								0						0
6. Universal with secondary guarantees								0						0
7. Variable								0						0
8. Variable universal								0						0
9. Credit								0						0
10. Other								0						0
11. Total Individual Life		0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life														
12. Whole								0						0
13. Term								0						0
14. Universal								0						0
15. Variable								0						0
16. Variable universal								0						0
17. Credit								0						0
18. Other								0						0
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities														
20. Fixed		241,947							0	212,621				212,621
21. Indexed								0						0
22. Variable with guarantees								0						0
23. Variable without guarantees								0						0
24. Life contingent payout								0						0
25. Other								0						0
26. Total Individual Annuities		241,947	0	0	0	0	0	0	212,621	0	0	0	0	212,621
Group Annuities														
27. Fixed								0						0
28. Indexed								0						0
29. Variable with guarantees								0						0
30. Variable without guarantees								0						0
31. Life contingent payout								0						0
32. Other								0						0
33. Total Group Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health														
34. Comprehensive individual								0	XXX	XXX	XXX			0
35. Comprehensive group								0	XXX	XXX	XXX			0
36. Medicare Supplement								0	XXX	XXX	XXX			0
37. Vision only								0	XXX	XXX	XXX			0
38. Dental only								0	XXX	XXX	XXX			0
39. Federal Employees Health Benefits Plan								0	XXX	XXX	XXX			0
40. Title XVIII Medicare								0	XXX	XXX	XXX			0
41. Title XIX Medicaid								0	XXX	XXX	XXX			0
42. Credit A&H								0	XXX	XXX	XXX			0
43. Disability income								0	XXX	XXX	XXX			0
44. Long-term care								0	XXX	XXX	XXX			0
45. Other health								0	XXX	XXX	XXX			0
46. Total Accident and Health		0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	0
47. Total		241,947 (c)	0	0	0	0	0	0	212,621	0	0	0	0	212,621

**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE) (Continued)^(b)**

NAIC Group Code	0000	BUSINESS IN THE STATE OF		Kentucky		DURING THE YEAR						2024		NAIC Company Code	56340				
Line of Business	Incurred During Current Year	13	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22	Policy Exhibit		In Force December 31, Current Year (b)					
			Claims Settled During Current Year									Issued During Year		Other Changes to In Force (Net)					
			Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23		24		25			
14		15		16		17		18		19		20		21		26			
Number of Pols/ Certs		Amount		Number of Pols/ Certs		Amount		Number of Pols/ Certs		Amount		Number of Pols/ Certs		Amount		Number of Pols/ Certs			
Individual Life																			
1. Industrial												0	0						
2. Whole												0	0						
3. Term												0	0						
4. Indexed												0	0						
5. Universal												0	0						
6. Universal with secondary guarantees												0	0						
7. Variable												0	0						
8. Variable universal												0	0						
9. Credit												0	0						
10. Other												0	0						
11. Total Individual Life			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Group Life																			
12. Whole												0	0						
13. Term												0	0						
14. Universal												0	0						
15. Variable												0	0						
16. Variable universal												0	0						
17. Credit												0	0						
18. Other												0	0						
19. Total Group Life			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Individual Annuities																			
20. Fixed												0	0						
21. Indexed												0	0						
22. Variable with guarantees												0	0						
23. Variable without guarantees												0	0						
24. Life contingent payout												0	0						
25. Other												0	0						
26. Total Individual Annuities			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Group Annuities																			
27. Fixed												0	0						
28. Indexed												0	0						
29. Variable with guarantees												0	0						
30. Variable without guarantees												0	0						
31. Life contingent payout												0	0						
32. Other												0	0						
33. Total Group Annuities			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Accident and Health																			
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
46. Total Accident and Health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0		
47. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		

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

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: 2) covering number of lives: 3) face amount \$

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ Group: \$ Total: \$ 0

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

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code	0000	BUSINESS IN THE STATE OF		Maryland		DURING THE YEAR 2024						NAIC Company Code	56340	
		1	2	Dividends to Policyholders/Refunds to Members						Claims and Benefits Paid				
Line of Business		Premiums and Annuities Considerations	Other Considerations	3	4	5	6	7	8	9	10	11	12	
				Paid in Cash or Left on Deposit	Applied to Pay Renewal Premiums	Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	Other	Total (Col. 3+4+5+6)	Death and Annuity Benefits	Matured Endowments	Surrender Values and Withdrawals for Life Contracts	All Other Benefits	Total (Sum Columns 8 through 11)	
Individual Life														
1. Industrial								0					0	
2. Whole		55						7				2,640	2,640	
3. Term		28						0				0	0	
4. Indexed								0				0	0	
5. Universal								0				0	0	
6. Universal with secondary guarantees								0				0	0	
7. Variable								0				0	0	
8. Variable universal								0				0	0	
9. Credit								0				0	0	
10. Other								0				0	0	
11. Total Individual Life		82	0	0	0	7	0	7	0	0	0	2,640	0	2,640
Group Life														
12. Whole								0				0	0	
13. Term								0				0	0	
14. Universal								0				0	0	
15. Variable								0				0	0	
16. Variable universal								0				0	0	
17. Credit								0				0	0	
18. Other								0				0	0	
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0	
Individual Annuities														
20. Fixed		1,000						0	73,907				73,907	
21. Indexed								0				0	0	
22. Variable with guarantees								0				0	0	
23. Variable without guarantees								0				0	0	
24. Life contingent payout								0				0	0	
25. Other								0				0	0	
26. Total Individual Annuities		1,000	0	0	0	0	0	0	73,907	0	0	0	73,907	
Group Annuities														
27. Fixed								0				0	0	
28. Indexed								0				0	0	
29. Variable with guarantees								0				0	0	
30. Variable without guarantees								0				0	0	
31. Life contingent payout								0				0	0	
32. Other								0				0	0	
33. Total Group Annuities		0	0	0	0	0	0	0	0	0	0	0	0	
Accident and Health														
34. Comprehensive individual								0	XXX	XXX	XXX		0	
35. Comprehensive group								0	XXX	XXX	XXX		0	
36. Medicare Supplement								0	XXX	XXX	XXX		0	
37. Vision only								0	XXX	XXX	XXX		0	
38. Dental only								0	XXX	XXX	XXX		0	
39. Federal Employees Health Benefits Plan								0	XXX	XXX	XXX		0	
40. Title XVIII Medicare								0	XXX	XXX	XXX		0	
41. Title XIX Medicaid								0	XXX	XXX	XXX		0	
42. Credit A&H								0	XXX	XXX	XXX		0	
43. Disability income								0	XXX	XXX	XXX		0	
44. Long-term care								0	XXX	XXX	XXX		0	
45. Other health								0	XXX	XXX	XXX		0	
46. Total Accident and Health		0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	
47. Total		1,082 (c)	0	0	0	7	0	7	73,907	0	2,640	0	76,546	

**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE) (Continued)^(b)**

NAIC Group Code	0000	BUSINESS IN THE STATE OF		Maryland		DURING THE YEAR						2024		NAIC Company Code	56340				
Line of Business	Incurred During Current Year	13	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22	Policy Exhibit		In Force December 31, Current Year (b)					
			Claims Settled During Current Year									Issued During Year		Other Changes to In Force (Net)					
			Totals Paid	Reduction by Compromise		Amount Rejected		Total Settled During Current Year				23	24	25	26	27	28		
			14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount		Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	
Individual Life																			
1. Industrial												0	0	0	0	0	0		
2. Whole												0	0	0	0	0	4		
3. Term												0	0	0	0	0	0		
4. Indexed												0	0	0	0	0	0		
5. Universal												0	0	0	0	0	0		
6. Universal with secondary guarantees												0	0	0	0	0	0		
7. Variable												0	0	0	0	0	0		
8. Variable universal												0	0	0	0	0	0		
9. Credit												0	0	0	0	0	0		
10. Other												0	0	0	0	0	0		
11. Total Individual Life			0	0	0	0	0	0	0	0		0	0	0	0	95	4	45,831	
Group Life																			
12. Whole												0	0	0	0	0	0	0	
13. Term												0	0	0	0	0	0	0	
14. Universal												0	0	0	0	0	0	0	
15. Variable												0	0	0	0	0	0	0	
16. Variable universal												0	0	0	0	0	0	0	
17. Credit												0	0	0	0	0	0	0	
18. Other												0	0	0	0	0	0	0	
19. Total Group Life			0	0	0	0	0	0	0	0		0	0	0	0	0	0	0	
Individual Annuities																			
20. Fixed												0	0	0	0	0	0	0	
21. Indexed												0	0	0	0	0	0	0	
22. Variable with guarantees												0	0	0	0	0	0	0	
23. Variable without guarantees												0	0	0	0	0	0	0	
24. Life contingent payout												0	0	0	0	0	0	0	
25. Other												0	0	0	0	0	0	0	
26. Total Individual Annuities			0	0	0	0	0	0	0	0		0	0	0	0	0	0	0	
Group Annuities																			
27. Fixed												0	0	0	0	0	0	0	
28. Indexed												0	0	0	0	0	0	0	
29. Variable with guarantees												0	0	0	0	0	0	0	
30. Variable without guarantees												0	0	0	0	0	0	0	
31. Life contingent payout												0	0	0	0	0	0	0	
32. Other												0	0	0	0	0	0	0	
33. Total Group Annuities			0	0	0	0	0	0	0	0		0	0	0	0	0	0	0	
Accident and Health																			
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		
46. Total Accident and Health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		
47. Total		0	0	0	0	0	0	0	0	0		0	0	0	0	0	0	0	

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

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: 2) covering number of lives: 3) face amount \$

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ Group: \$ Total: \$ 0

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

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code	0000	BUSINESS IN THE STATE OF		Massachusetts		DURING THE YEAR 2024						NAIC Company Code	56340	
		1	2	Dividends to Policyholders/Refunds to Members						Claims and Benefits Paid				
Line of Business		Premiums and Annuities Considerations	Other Considerations	3	4	5	6	7	8	9	10	11	12	
				Paid in Cash or Left on Deposit	Applied to Pay Renewal Premiums	Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	Other	Total (Col. 3+4+5+6)	Death and Annuity Benefits	Matured Endowments	Surrender Values and Withdrawals for Life Contracts	All Other Benefits	Total (Sum Columns 8 through 11)	
Individual Life														
1. Industrial														0
2. Whole		2,218												24,642
3. Term		1,218												0
4. Indexed														0
5. Universal														0
6. Universal with secondary guarantees														0
7. Variable														0
8. Variable universal														0
9. Credit														0
10. Other														0
11. Total Individual Life		3,436	0	0	0	1,618	0	1,618	17,973	0	6,669	0		24,642
Group Life														
12. Whole														0
13. Term														0
14. Universal														0
15. Variable														0
16. Variable universal														0
17. Credit														0
18. Other														0
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0		0
Individual Annuities														
20. Fixed		100												269,868
21. Indexed														0
22. Variable with guarantees														0
23. Variable without guarantees														0
24. Life contingent payout														0
25. Other														0
26. Total Individual Annuities		100	0	0	0	0	0	0	269,868	0	0	0		269,868
Group Annuities														
27. Fixed														0
28. Indexed														0
29. Variable with guarantees														0
30. Variable without guarantees														0
31. Life contingent payout														0
32. Other														0
33. Total Group Annuities		0	0	0	0	0	0	0	0	0	0	0		0
Accident and Health														
34. Comprehensive individual														0
35. Comprehensive group														0
36. Medicare Supplement														0
37. Vision only														0
38. Dental only														0
39. Federal Employees Health Benefits Plan														0
40. Title XVIII Medicare														0
41. Title XIX Medicaid														0
42. Credit A&H														0
43. Disability income														0
44. Long-term care														0
45. Other health														0
46. Total Accident and Health		0	0	0	0	0	0	0	XXX	XXX	XXX	XXX	0	0
47. Total		3,536 (c)	0	0	0	1,618	0	1,618	287,841	0	6,669	0		294,510

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code	0000	BUSINESS IN THE STATE OF		Massachusetts		DURING THE YEAR						2024		NAIC Company Code	56340				
Line of Business	Incurred During Current Year	13	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22	Policy Exhibit		In Force December 31, Current Year (b)					
			Claims Settled During Current Year									Issued During Year		Other Changes to In Force (Net)					
			Totals Paid	Reduction by Compromise		Amount Rejected		Total Settled During Current Year				23	24	25	26	27	28		
			14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount		Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	
Individual Life																			
1. Industrial																			
2. Whole	17,973	4	17,973						0	0	0								
3. Term									4	17,973	0								
4. Indexed									0	0	0								
5. Universal									0	0	0								
6. Universal with secondary guarantees									0	0	0								
7. Variable									0	0	0								
8. Variable universal									0	0	0								
9. Credit									0	0	0								
10. Other									0	0	0								
11. Total Individual Life	17,973	4	17,973	0	0	0	0	0	4	17,973	0	0	0	(7)	(34,707)	146	895,444		
Group Life																			
12. Whole																			
13. Term																			
14. Universal																			
15. Variable																			
16. Variable universal																			
17. Credit																			
18. Other																			
19. Total Group Life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Individual Annuities																			
20. Fixed																			
21. Indexed																			
22. Variable with guarantees																			
23. Variable without guarantees																			
24. Life contingent payout																			
25. Other																			
26. Total Individual Annuities	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Group Annuities																			
27. Fixed																			
28. Indexed																			
29. Variable with guarantees																			
30. Variable without guarantees																			
31. Life contingent payout																			
32. Other																			
33. Total Group Annuities	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Accident and Health																			
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H																			
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
46. Total Accident and Health	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0		
47. Total	17,973	4	17,973	0	0	0	0	0	4	17,973	0	0	0	(7)	(34,707)	146	895,444		

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

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: 2) covering number of lives: 3) face amount \$

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ Group: \$ Total: \$ 0

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

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code	0000	BUSINESS IN THE STATE OF Michigan		DURING THE YEAR 2024							NAIC Company Code	56340	
		1	2	Dividends to Policyholders/Refunds to Members							Claims and Benefits Paid		
Line of Business		Premiums and Annuities Considerations	Other Considerations	3	4	5	6	7	8	9	10	11	12
				Paid in Cash or Left on Deposit	Applied to Pay Renewal Premiums	Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	Other	Total (Col. 3+4+5+6)	Death and Annuity Benefits	Matured Endowments	Surrender Values and Withdrawals for Life Contracts	All Other Benefits	Total (Sum Columns 8 through 11)
Individual Life													
1. Industrial		27,233		457	17	12,528		0	79,784		10,621		0
2. Whole		10,811						13,002					90,405
3. Term								0					0
4. Indexed								0					0
5. Universal								0					0
6. Universal with secondary guarantees								0					0
7. Variable								0					0
8. Variable universal								0					0
9. Credit								0					0
10. Other								0					0
11. Total Individual Life		38,044	0	457	17	12,528	0	13,002	79,784	0	10,621	0	90,405
Group Life													
12. Whole								0					0
13. Term								0					0
14. Universal								0					0
15. Variable								0					0
16. Variable universal								0					0
17. Credit								0					0
18. Other								0					0
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities													
20. Fixed		829,409						0	766,726				766,726
21. Indexed								0					0
22. Variable with guarantees								0					0
23. Variable without guarantees								0					0
24. Life contingent payout								0					0
25. Other								0					0
26. Total Individual Annuities		829,409	0	0	0	0	0	0	766,726	0	0	0	766,726
Group Annuities													
27. Fixed								0					0
28. Indexed								0					0
29. Variable with guarantees								0					0
30. Variable without guarantees								0					0
31. Life contingent payout								0					0
32. Other								0					0
33. Total Group Annuities		0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health													
34. Comprehensive individual								0	XXX	XXX	XXX		0
35. Comprehensive group								0	XXX	XXX	XXX		0
36. Medicare Supplement								0	XXX	XXX	XXX		0
37. Vision only								0	XXX	XXX	XXX		0
38. Dental only								0	XXX	XXX	XXX		0
39. Federal Employees Health Benefits Plan								0	XXX	XXX	XXX		0
40. Title XVIII Medicare								0	XXX	XXX	XXX		0
41. Title XIX Medicaid								0	XXX	XXX	XXX		0
42. Credit A&H								0	XXX	XXX	XXX		0
43. Disability income								0	XXX	XXX	XXX		0
44. Long-term care								0	XXX	XXX	XXX		0
45. Other health								0	XXX	XXX	XXX		0
46. Total Accident and Health		0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total		867,453 (c)	0	457	17	12,528	0	13,002	846,510	0	10,621	0	857,131

**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE) (Continued)^(b)**

NAIC Group Code	0000	BUSINESS IN THE STATE OF		Michigan		DURING THE YEAR						2024		NAIC Company Code	56340			
Line of Business	Incurred During Current Year	13	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22	Policy Exhibit		In Force December 31, Current Year (b)				
			Claims Settled During Current Year									Issued During Year		Other Changes to In Force (Net)				
			Totals Paid	Reduction by Compromise		Amount Rejected		Total Settled During Current Year				23	24	25	26	27	28	
			14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount		Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life																		
1. Industrial												0	0	0	0			
2. Whole	85,301	31	80,301						31	80,301	5,000	5	40,000	(39)	(87,487)	1,509	9,648,172	
3. Term									0	0	0	0	0	0				
4. Indexed									0	0	0	0	0	0				
5. Universal									0	0	0	0	0	0				
6. Universal with secondary guarantees									0	0	0	0	0	0				
7. Variable									0	0	0	0	0	0				
8. Variable universal									0	0	0	0	0	0				
9. Credit									0	0	0	0	0	0				
10. Other									0	0	0	0	0	0				
11. Total Individual Life	85,301	31	80,301	0	0	0	0	0	31	80,301	5,000	5	40,000	(39)	(87,487)	1,509	9,648,172	
Group Life																		
12. Whole												0	0	0	0			
13. Term												0	0	0	0			
14. Universal												0	0	0	0			
15. Variable												0	0	0	0			
16. Variable universal												0	0	0	0			
17. Credit												0	0	0	0		(a)	
18. Other												0	0	0	0			
19. Total Group Life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Individual Annuities																		
20. Fixed												0	0	0	0			
21. Indexed												0	0	0	0			
22. Variable with guarantees												0	0	0	0			
23. Variable without guarantees												0	0	0	0			
24. Life contingent payout												0	0	0	0			
25. Other												0	0	0	0			
26. Total Individual Annuities	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Group Annuities																		
27. Fixed												0	0	0	0			
28. Indexed												0	0	0	0			
29. Variable with guarantees												0	0	0	0			
30. Variable without guarantees												0	0	0	0			
31. Life contingent payout												0	0	0	0			
32. Other												0	0	0	0			
33. Total Group Annuities	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Accident and Health																		
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
42. Credit A&H																		
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
46. Total Accident and Health	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	
47. Total	85,301	31	80,301	0	0	0	0	0	31	80,301	5,000	5	40,000	(39)	(87,487)	1,509	9,648,172	

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

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: 2) covering number of lives: 3) face amount \$

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ Group: \$ Total: \$ 0

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

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code	0000	BUSINESS IN THE STATE OF		Minnesota		DURING THE YEAR 2024						NAIC Company Code	56340	
		1	2	Dividends to Policyholders/Refunds to Members						Claims and Benefits Paid				
Line of Business		Premiums and Annuities Considerations	Other Considerations	3	4	5	6	7	8	9	10	11	12	
				Paid in Cash or Left on Deposit	Applied to Pay Renewal Premiums	Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	Other	Total (Col. 3+4+5+6)	Death and Annuity Benefits	Matured Endowments	Surrender Values and Withdrawals for Life Contracts	All Other Benefits	Total (Sum Columns 8 through 11)	
Individual Life														
1. Industrial		6,629		6		2,129		0				3,059		0
2. Whole		21						2,134						3,059
3. Term								0						0
4. Indexed								0						0
5. Universal								0						0
6. Universal with secondary guarantees								0						0
7. Variable								0						0
8. Variable universal								0						0
9. Credit								0						0
10. Other								0						0
11. Total Individual Life		6,650	0	6	0	2,129	0	2,134	0	0	0	3,059	0	3,059
Group Life														
12. Whole								0						0
13. Term								0						0
14. Universal								0						0
15. Variable								0						0
16. Variable universal								0						0
17. Credit								0						0
18. Other								0						0
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities														
20. Fixed		4,036,846							0	1,178,643				1,178,643
21. Indexed								0						0
22. Variable with guarantees								0						0
23. Variable without guarantees								0						0
24. Life contingent payout								0						0
25. Other								0						0
26. Total Individual Annuities		4,036,846	0	0	0	0	0	0	1,178,643	0	0	0	0	1,178,643
Group Annuities														
27. Fixed									0					0
28. Indexed								0						0
29. Variable with guarantees								0						0
30. Variable without guarantees								0						0
31. Life contingent payout								0						0
32. Other								0						0
33. Total Group Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health														
34. Comprehensive individual		(d)							0	XXX	XXX	XXX		0
35. Comprehensive group		(d)							0	XXX	XXX	XXX		0
36. Medicare Supplement		(d)							0	XXX	XXX	XXX		0
37. Vision only		(d)							0	XXX	XXX	XXX		0
38. Dental only		(d)							0	XXX	XXX	XXX		0
39. Federal Employees Health Benefits Plan		(d)							0	XXX	XXX	XXX		0
40. Title XVIII Medicare		(d)							0	XXX	XXX	XXX		0
41. Title XIX Medicaid		(d)							0	XXX	XXX	XXX		0
42. Credit A&H									0	XXX	XXX	XXX		0
43. Disability income		(d)							0	XXX	XXX	XXX		0
44. Long-term care		(d)							0	XXX	XXX	XXX		0
45. Other health		(d)							0	XXX	XXX	XXX		0
46. Total Accident and Health		0	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total		4,043,496 (c)	0	6	0	2,129	0	2,134	1,178,643	0	0	3,059	0	1,181,702

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code	0000	BUSINESS IN THE STATE OF		Minnesota										DURING THE YEAR		2024		NAIC Company Code	56340			
Line of Business	Incurred During Current Year	13	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										22	Issued During Year		Policy Exhibit		In Force December 31, Current Year (b)				
			Claims Settled During Current Year								Total Settled During Current Year			23		24		25		26		
			Totals Paid	Reduction by Compromise		Amount Rejected		Total Settled During Current Year		Unpaid December 31, Current Year				Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	
Individual Life																						
1. Industrial											0	0										
2. Whole			1,669								0	0	1,669	2	15,000	(3)	(24,082)	136				1,084,637
3. Term											0	0										
4. Indexed											0	0										
5. Universal											0	0										
6. Universal with secondary guarantees											0	0										
7. Variable											0	0										
8. Variable universal											0	0										
9. Credit											0	0										
10. Other											0	0										
11. Total Individual Life			1,669	0	0	0	0	0	0	0	0	0	1,669	2	15,000	(3)	(24,082)	136			1,084,637	
Group Life																						
12. Whole											0	0										
13. Term											0	0										
14. Universal											0	0										
15. Variable											0	0										
16. Variable universal											0	0										
17. Credit											0	0										
18. Other											0	0										
19. Total Group Life			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Individual Annuities																						
20. Fixed											0	0										
21. Indexed											0	0										
22. Variable with guarantees											0	0										
23. Variable without guarantees											0	0										
24. Life contingent payout											0	0										
25. Other											0	0										
26. Total Individual Annuities			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Group Annuities																						
27. Fixed											0	0										
28. Indexed											0	0										
29. Variable with guarantees											0	0										
30. Variable without guarantees											0	0										
31. Life contingent payout											0	0										
32. Other											0	0										
33. Total Group Annuities			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Accident and Health																						
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
42. Credit A&H																						
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
46. Total Accident and Health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
47. Total		1,669	0	0	0	0	0	0	0	0	0	0	0	0	0	1,669	2	15,000	(3)	(24,082)	136	1,084,637

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

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: 2) covering number of lives: 3) face amount \$

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ Group: \$ Total: \$ 0

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

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code	0000	BUSINESS IN THE STATE OF		Missouri		DURING THE YEAR 2024						NAIC Company Code	56340	
		1	2	Dividends to Policyholders/Refunds to Members						Claims and Benefits Paid				
Line of Business		Premiums and Annuities Considerations	Other Considerations	3	4	5	6	7	8	9	10	11	12	
				Paid in Cash or Left on Deposit	Applied to Pay Renewal Premiums	Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	Other	Total (Col. 3+4+5+6)	Death and Annuity Benefits	Matured Endowments	Surrender Values and Withdrawals for Life Contracts	All Other Benefits	Total (Sum Columns 8 through 11)	
Individual Life														
1. Industrial									0					0
2. Whole		503						73	73					0
3. Term									0					0
4. Indexed									0					0
5. Universal									0					0
6. Universal with secondary guarantees									0					0
7. Variable									0					0
8. Variable universal									0					0
9. Credit									0					0
10. Other									0					0
11. Total Individual Life		503	0	0	0	73	0	73	0	0	0	0	0	0
Group Life														
12. Whole									0					0
13. Term									0					0
14. Universal									0					0
15. Variable									0					0
16. Variable universal									0					0
17. Credit									0					0
18. Other									0					0
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities														
20. Fixed		288,991							0	797,307				797,307
21. Indexed									0					0
22. Variable with guarantees									0					0
23. Variable without guarantees									0					0
24. Life contingent payout									0					0
25. Other									0					0
26. Total Individual Annuities		288,991	0	0	0	0	0	0	797,307	0	0	0	0	797,307
Group Annuities														
27. Fixed									0					0
28. Indexed									0					0
29. Variable with guarantees									0					0
30. Variable without guarantees									0					0
31. Life contingent payout									0					0
32. Other									0					0
33. Total Group Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health														
34. Comprehensive individual									0	XXX	XXX	XXX		0
35. Comprehensive group									0	XXX	XXX	XXX		0
36. Medicare Supplement									0	XXX	XXX	XXX		0
37. Vision only									0	XXX	XXX	XXX		0
38. Dental only									0	XXX	XXX	XXX		0
39. Federal Employees Health Benefits Plan									0	XXX	XXX	XXX		0
40. Title XVIII Medicare									0	XXX	XXX	XXX		0
41. Title XIX Medicaid									0	XXX	XXX	XXX		0
42. Credit A&H									0	XXX	XXX	XXX		0
43. Disability income									0	XXX	XXX	XXX		0
44. Long-term care									0	XXX	XXX	XXX		0
45. Other health									0	XXX	XXX	XXX		0
46. Total Accident and Health		0	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total		289,494 (c)	0	0	0	73	0	73	797,307	0	0	0	0	797,307

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code	0000	BUSINESS IN THE STATE OF		Missouri		DURING THE YEAR						2024		NAIC Company Code	56340				
Line of Business	Incurred During Current Year	13	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22	Policy Exhibit		In Force December 31, Current Year (b)					
			Claims Settled During Current Year									Issued During Year		Other Changes to In Force (Net)					
			Totals Paid	Reduction by Compromise		Amount Rejected		Total Settled During Current Year				23	24	25	26	27	28		
			14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount		Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	
Individual Life																			
1. Industrial																			
2. Whole																391	6		
3. Term																	55,551		
4. Indexed																			
5. Universal																			
6. Universal with secondary guarantees																			
7. Variable																			
8. Variable universal																			
9. Credit																			
10. Other																			
11. Total Individual Life			0	0	0	0	0	0	0	0	0	0	0	0	391	6	55,551		
Group Life																			
12. Whole																			
13. Term																			
14. Universal																			
15. Variable																			
16. Variable universal																			
17. Credit																			
18. Other																			
19. Total Group Life			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Individual Annuities																			
20. Fixed																			
21. Indexed																			
22. Variable with guarantees																			
23. Variable without guarantees																			
24. Life contingent payout																			
25. Other																			
26. Total Individual Annuities			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Group Annuities																			
27. Fixed																			
28. Indexed																			
29. Variable with guarantees																			
30. Variable without guarantees																			
31. Life contingent payout																			
32. Other																			
33. Total Group Annuities			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Accident and Health																			
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
42. Credit A&H																			
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
46. Total Accident and Health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0		
47. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0	391	6		
(a) Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$, current year \$ Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$, current year \$																			
(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: 2) covering number of lives: 3) face amount \$																			
(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ Group: \$ Total: \$ 0																			
(d) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products																			
(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$																			



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code	0000	BUSINESS IN THE STATE OF		Nebraska	DURING THE YEAR 2024							NAIC Company Code	56340
		1	2	Dividends to Policyholders/Refunds to Members							Claims and Benefits Paid		
Line of Business		Premiums and Annuities Considerations	Other Considerations	3	4	5	6	7	8	9	10	11	12
				Paid in Cash or Left on Deposit	Applied to Pay Renewal Premiums	Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	Other	Total (Col. 3+4+5+6)	Death and Annuity Benefits	Matured Endowments	Surrender Values and Withdrawals for Life Contracts	All Other Benefits	Total (Sum Columns 8 through 11)
Individual Life													
1. Industrial													
2. Whole		2,100											
3. Term													
4. Indexed													
5. Universal													
6. Universal with secondary guarantees													
7. Variable													
8. Variable universal													
9. Credit													
10. Other													
11. Total Individual Life		2,100	0	0	0	51	0	51	0	0	0	0	0
Group Life													
12. Whole													
13. Term													
14. Universal													
15. Variable													
16. Variable universal													
17. Credit													
18. Other													
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities													
20. Fixed		290,868											
21. Indexed													
22. Variable with guarantees													
23. Variable without guarantees													
24. Life contingent payout													
25. Other													
26. Total Individual Annuities		290,868	0	0	0	0	0	0	174,509	0	0	0	174,509
Group Annuities													
27. Fixed													
28. Indexed													
29. Variable with guarantees													
30. Variable without guarantees													
31. Life contingent payout													
32. Other													
33. Total Group Annuities		0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health													
34. Comprehensive individual													
35. Comprehensive group													
36. Medicare Supplement													
37. Vision only													
38. Dental only													
39. Federal Employees Health Benefits Plan													
40. Title XVIII Medicare													
41. Title XIX Medicaid													
42. Credit A&H													
43. Disability income													
44. Long-term care													
45. Other health													
46. Total Accident and Health		0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total		292,968 (c)	0	0	0	51	0	51	174,509	0	0	0	174,509

**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE) (Continued)^(b)**

NAIC Group Code	0000	BUSINESS IN THE STATE OF		Nebraska		DURING THE YEAR						2024		NAIC Company Code	56340				
Line of Business	Incurred During Current Year	13	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22	Policy Exhibit		In Force December 31, Current Year (b)					
			Claims Settled During Current Year									Issued During Year		Other Changes to In Force (Net)					
			Totals Paid	Reduction by Compromise		Amount Rejected		Total Settled During Current Year				23	24	25	26	27	28		
			14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount		Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	
Individual Life																			
1. Industrial																			
2. Whole																843	10		
3. Term																	376,094		
4. Indexed																			
5. Universal																			
6. Universal with secondary guarantees																			
7. Variable																			
8. Variable universal																			
9. Credit																			
10. Other																			
11. Total Individual Life			0	0	0	0	0	0	0	0	0	0	0	0	0	843	10		
Group Life																			
12. Whole																			
13. Term																			
14. Universal																			
15. Variable																			
16. Variable universal																			
17. Credit																			
18. Other																			
19. Total Group Life			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Individual Annuities																			
20. Fixed																			
21. Indexed																			
22. Variable with guarantees																			
23. Variable without guarantees																			
24. Life contingent payout																			
25. Other																			
26. Total Individual Annuities			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Group Annuities																			
27. Fixed																			
28. Indexed																			
29. Variable with guarantees																			
30. Variable without guarantees																			
31. Life contingent payout																			
32. Other																			
33. Total Group Annuities			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Accident and Health																			
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
42. Credit A&H																			
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
46. Total Accident and Health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0		
47. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0	843	10		
(a) Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$, current year \$ Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$, current year \$																			
(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: 2) covering number of lives: 3) face amount \$																			
(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ Group: \$ Total: \$ 0																			
(d) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products																			
(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$																			



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code	0000	BUSINESS IN THE STATE OF		Nevada		DURING THE YEAR 2024						NAIC Company Code	56340	
		1	2	Dividends to Policyholders/Refunds to Members						Claims and Benefits Paid				
Line of Business		Premiums and Annuities Considerations	Other Considerations	3	4	5	6	7	8	9	10	11	12	
				Paid in Cash or Left on Deposit	Applied to Pay Renewal Premiums	Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	Other	Total (Col. 3+4+5+6)	Death and Annuity Benefits	Matured Endowments	Surrender Values and Withdrawals for Life Contracts	All Other Benefits	Total (Sum Columns 8 through 11)	
Individual Life														
1. Industrial														0
2. Whole			266											0
3. Term														0
4. Indexed														0
5. Universal														0
6. Universal with secondary guarantees														0
7. Variable														0
8. Variable universal														0
9. Credit														0
10. Other														0
11. Total Individual Life		266	0	0	0	10	0	10	0	0	0	0	0	0
Group Life														
12. Whole														0
13. Term														0
14. Universal														0
15. Variable														0
16. Variable universal														0
17. Credit														0
18. Other														0
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities														
20. Fixed										10,898				10,898
21. Indexed										0				0
22. Variable with guarantees										0				0
23. Variable without guarantees										0				0
24. Life contingent payout										0				0
25. Other										0				0
26. Total Individual Annuities		0	0	0	0	0	0	0	10,898	0	0	0	0	10,898
Group Annuities														
27. Fixed										0				0
28. Indexed										0				0
29. Variable with guarantees										0				0
30. Variable without guarantees										0				0
31. Life contingent payout										0				0
32. Other										0				0
33. Total Group Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health														
34. Comprehensive individual										XXX	XXX	XXX		0
35. Comprehensive group										XXX	XXX	XXX		0
36. Medicare Supplement										XXX	XXX	XXX		0
37. Vision only										XXX	XXX	XXX		0
38. Dental only										XXX	XXX	XXX		0
39. Federal Employees Health Benefits Plan										XXX	XXX	XXX		0
40. Title XVIII Medicare										XXX	XXX	XXX		0
41. Title XIX Medicaid										XXX	XXX	XXX		0
42. Credit A&H										XXX	XXX	XXX		0
43. Disability income										XXX	XXX	XXX		0
44. Long-term care										XXX	XXX	XXX		0
45. Other health										XXX	XXX	XXX		0
46. Total Accident and Health		0	0	0	0	0	0	0	XXX	XXX	XXX	XXX	0	0
47. Total		266 (c)	0	0	0	10	0	10	10,898	0	0	0	0	10,898

**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE) (Continued)^(b)**

NAIC Group Code	0000	BUSINESS IN THE STATE OF		Nevada		DURING THE YEAR						2024		NAIC Company Code	56340				
Line of Business	Incurred During Current Year	13	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22	Policy Exhibit		In Force December 31, Current Year (b)					
			Claims Settled During Current Year									Issued During Year		Other Changes to In Force (Net)					
			Totals Paid	Reduction by Compromise		Amount Rejected		Total Settled During Current Year				23	24	25	26	27	28		
			14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount		Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	
Individual Life																			
1. Industrial																			
2. Whole																163	1		
3. Term																	50,541		
4. Indexed																			
5. Universal																			
6. Universal with secondary guarantees																			
7. Variable																			
8. Variable universal																			
9. Credit																			
10. Other																			
11. Total Individual Life			0	0	0	0	0	0	0	0	0	0	0	0	0	163	1	50,541	
Group Life																			
12. Whole																			
13. Term																			
14. Universal																			
15. Variable																			
16. Variable universal																			
17. Credit																		(a)	
18. Other																			
19. Total Group Life			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Individual Annuities																			
20. Fixed																			
21. Indexed																			
22. Variable with guarantees																			
23. Variable without guarantees																			
24. Life contingent payout																			
25. Other																			
26. Total Individual Annuities			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Group Annuities																			
27. Fixed																			
28. Indexed																			
29. Variable with guarantees																			
30. Variable without guarantees																			
31. Life contingent payout																			
32. Other																			
33. Total Group Annuities			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Accident and Health																			
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
42. Credit A&H																			
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
46. Total Accident and Health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	
47. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	163	1	50,541

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

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: 2) covering number of lives: 3) face amount \$

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ Group: \$ Total: \$ 0

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

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code	0000	BUSINESS IN THE STATE OF		New Jersey		DURING THE YEAR 2024						NAIC Company Code	56340
		1	2	Dividends to Policyholders/Refunds to Members						Claims and Benefits Paid			
Line of Business		Premiums and Annuities Considerations	Other Considerations	3	4	5	6	7	8	9	10	11	12
				Paid in Cash or Left on Deposit	Applied to Pay Renewal Premiums	Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	Other	Total (Col. 3+4+5+6)	Death and Annuity Benefits	Matured Endowments	Surrender Values and Withdrawals for Life Contracts	All Other Benefits	Total (Sum Columns 8 through 11)
Individual Life													
1. Industrial		55,884		376	173	25,499		0	185,691		45,631		0
2. Whole		12,469											231,322
3. Term													0
4. Indexed													0
5. Universal													0
6. Universal with secondary guarantees													0
7. Variable													0
8. Variable universal													0
9. Credit													0
10. Other													0
11. Total Individual Life		68,353	0	376	173	25,499	0	26,048	185,691	0	45,631	0	231,322
Group Life													
12. Whole								0					0
13. Term								0					0
14. Universal								0					0
15. Variable								0					0
16. Variable universal								0					0
17. Credit								0					0
18. Other								0					0
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities													
20. Fixed		452,280							591,947				591,947
21. Indexed									0				0
22. Variable with guarantees									0				0
23. Variable without guarantees									0				0
24. Life contingent payout									0				0
25. Other									0				0
26. Total Individual Annuities		452,280	0	0	0	0	0	0	591,947	0	0	0	591,947
Group Annuities													
27. Fixed								0					0
28. Indexed								0					0
29. Variable with guarantees								0					0
30. Variable without guarantees								0					0
31. Life contingent payout								0					0
32. Other								0					0
33. Total Group Annuities		0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health													
34. Comprehensive individual		(d)						0	XXX	XXX	XXX		0
35. Comprehensive group		(d)						0	XXX	XXX	XXX		0
36. Medicare Supplement		(d)						0	XXX	XXX	XXX		0
37. Vision only		(d)						0	XXX	XXX	XXX		0
38. Dental only		(d)						0	XXX	XXX	XXX		0
39. Federal Employees Health Benefits Plan		(d)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare		(d)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid		(d)						0	XXX	XXX	XXX		0
42. Credit A&H								0	XXX	XXX	XXX		0
43. Disability income		(d)						0	XXX	XXX	XXX		0
44. Long-term care		(d)						0	XXX	XXX	XXX		0
45. Other health		(d)						0	XXX	XXX	XXX		0
46. Total Accident and Health		0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total		520,633 (c)	0	376	173	25,499	0	26,048	777,638	0	45,631	0	823,269

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code	0000	BUSINESS IN THE STATE OF		New Jersey		DURING THE YEAR						2024		NAIC Company Code	56340		
Line of Business	Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit					
		13		Claims Settled During Current Year						22		Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount
Individual Life																	
1. Industrial																	
2. Whole	200,418	35	185,796						0	0	0	9	96,000	(60)	(401,378)	2,246	15,905,045
3. Term																	
4. Indexed																	
5. Universal																	
6. Universal with secondary guarantees																	
7. Variable																	
8. Variable universal																	
9. Credit																	
10. Other																	
11. Total Individual Life	200,418	35	185,796	0	0	0	0	0	35	185,796	14,622	9	96,000	(60)	(401,378)	2,246	15,905,045
Group Life																	
12. Whole																	
13. Term																	
14. Universal																	
15. Variable																	
16. Variable universal																	
17. Credit																	
18. Other																	
19. Total Group Life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities																	
20. Fixed																	
21. Indexed																	
22. Variable with guarantees																	
23. Variable without guarantees																	
24. Life contingent payout																	
25. Other																	
26. Total Individual Annuities	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities																	
27. Fixed																	
28. Indexed																	
29. Variable with guarantees																	
30. Variable without guarantees																	
31. Life contingent payout																	
32. Other																	
33. Total Group Annuities	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health																	
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
42. Credit A&H																	
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
46. Total Accident and Health	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
47. Total	200,418	35	185,796	0	0	0	0	0	35	185,796	14,622	9	96,000	(60)	(401,378)	2,246	15,905,045

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

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: 2) covering number of lives: 3) face amount \$

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ Group: \$ Total: \$ 0

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

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code	0000	BUSINESS IN THE STATE OF		New York		DURING THE YEAR 2024						NAIC Company Code	56340	
		1	2	Dividends to Policyholders/Refunds to Members						Claims and Benefits Paid				
Line of Business		Premiums and Annuities Considerations	Other Considerations	3	4	5	6	7	8	9	10	11	12	
				Paid in Cash or Left on Deposit	Applied to Pay Renewal Premiums	Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	Other	Total (Col. 3+4+5+6)	Death and Annuity Benefits	Matured Endowments	Surrender Values and Withdrawals for Life Contracts	All Other Benefits	Total (Sum Columns 8 through 11)	
Individual Life														
1. Industrial		46,628		529	30	17,003		17,562	62,113		23,438		0	85,551
2. Whole		10,295												0
3. Term														0
4. Indexed														0
5. Universal														0
6. Universal with secondary guarantees														0
7. Variable														0
8. Variable universal														0
9. Credit														0
10. Other														0
11. Total Individual Life		56,923	0	529	30	17,003	0	17,562	62,113	0	23,438	0	0	85,551
Group Life														
12. Whole														0
13. Term														0
14. Universal														0
15. Variable														0
16. Variable universal														0
17. Credit														0
18. Other														0
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities														
20. Fixed		807,610												673,257
21. Indexed														0
22. Variable with guarantees														0
23. Variable without guarantees														0
24. Life contingent payout														0
25. Other														0
26. Total Individual Annuities		807,610	0	0	0	0	0	0	673,257	0	0	0	0	673,257
Group Annuities														
27. Fixed														0
28. Indexed														0
29. Variable with guarantees														0
30. Variable without guarantees														0
31. Life contingent payout														0
32. Other														0
33. Total Group Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health														
34. Comprehensive individual		(d)												0
35. Comprehensive group		(d)												0
36. Medicare Supplement		(d)												0
37. Vision only		(d)												0
38. Dental only		(d)												0
39. Federal Employees Health Benefits Plan		(d)												0
40. Title XVIII Medicare		(d)												0
41. Title XIX Medicaid		(d)												0
42. Credit A&H														0
43. Disability income		(d)												0
44. Long-term care		(d)												0
45. Other health		(d)												0
46. Total Accident and Health		0	0	0	0	0	0	0	XXX	XXX	XXX	XXX	0	0
47. Total		864,533 (c)	0	529	30	17,003	0	17,562	735,370	0	23,438	0	0	758,808

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code	0000	BUSINESS IN THE STATE OF		New York		DURING THE YEAR						2024		NAIC Company Code	56340			
Line of Business	Incurred During Current Year	13	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22	Policy Exhibit		In Force December 31, Current Year (b)				
			Claims Settled During Current Year									Issued During Year		Other Changes to In Force (Net)				
			Totals Paid	Reduction by Compromise		Amount Rejected		Total Settled During Current Year				23		24		25		
			14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount		Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life																		
1. Industrial												0	0	0				
2. Whole	75,804	27	65,247						27	65,247		10,557	4	47,000	(46)	(640,094)	1,649	
3. Term												0	0	0				
4. Indexed												0	0	0				
5. Universal												0	0	0				
6. Universal with secondary guarantees												0	0	0				
7. Variable												0	0	0				
8. Variable universal												0	0	0				
9. Credit												0	0	0				
10. Other												0	0	0				
11. Total Individual Life	75,804	27	65,247	0	0	0	0	0	27	65,247		10,557	4	47,000	(46)	(640,094)	1,649	
Group Life																		
12. Whole												0	0	0				
13. Term												0	0	0				
14. Universal												0	0	0				
15. Variable												0	0	0				
16. Variable universal												0	0	0				
17. Credit												0	0	0				
18. Other												0	0	0				
19. Total Group Life	0	0	0	0	0	0	0	0	0	0		0	0	0	0	0	0	
Individual Annuities																		
20. Fixed												0	0	0				
21. Indexed												0	0	0				
22. Variable with guarantees												0	0	0				
23. Variable without guarantees												0	0	0				
24. Life contingent payout												0	0	0				
25. Other												0	0	0				
26. Total Individual Annuities	0	0	0	0	0	0	0	0	0	0		0	0	0	0	0	0	
Group Annuities																		
27. Fixed												0	0	0				
28. Indexed												0	0	0				
29. Variable with guarantees												0	0	0				
30. Variable without guarantees												0	0	0				
31. Life contingent payout												0	0	0				
32. Other												0	0	0				
33. Total Group Annuities	0	0	0	0	0	0	0	0	0	0		0	0	0	0	0	0	
Accident and Health																		
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX				
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX				
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX				
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX				
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX				
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX				
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX				
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX				
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX				
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX				
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX				
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX				
46. Total Accident and Health	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		0	0	0	0	0	0	
47. Total	75,804	27	65,247	0	0	0	0	0	27	65,247		10,557	4	47,000	(46)	(640,094)	1,649	

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

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: 2) covering number of lives: 3) face amount \$

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ Group: \$ Total: \$ 0

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

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code	0000	BUSINESS IN THE STATE OF		North Carolina		DURING THE YEAR 2024						NAIC Company Code	56340	
		1	2	Dividends to Policyholders/Refunds to Members						Claims and Benefits Paid				
Line of Business		Premiums and Annuities Considerations	Other Considerations	3	4	5	6	7	8	9	10	11	12	
				Paid in Cash or Left on Deposit	Applied to Pay Renewal Premiums	Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	Other	Total (Col. 3+4+5+6)	Death and Annuity Benefits	Matured Endowments	Surrender Values and Withdrawals for Life Contracts	All Other Benefits	Total (Sum Columns 8 through 11)	
Individual Life														
1. Industrial								0						0
2. Whole								1						0
3. Term								0						0
4. Indexed								0						0
5. Universal								0						0
6. Universal with secondary guarantees								0						0
7. Variable								0						0
8. Variable universal								0						0
9. Credit								0						0
10. Other								0						0
11. Total Individual Life		0	0	0	0	1	0	1	0	0	0	0	0	0
Group Life														
12. Whole								0						0
13. Term								0						0
14. Universal								0						0
15. Variable								0						0
16. Variable universal								0						0
17. Credit								0						0
18. Other								0						0
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities														
20. Fixed		19,915						0		74,242				74,242
21. Indexed								0						0
22. Variable with guarantees								0						0
23. Variable without guarantees								0						0
24. Life contingent payout								0						0
25. Other								0						0
26. Total Individual Annuities		19,915	0	0	0	0	0	0	74,242	0	0	0	0	74,242
Group Annuities														
27. Fixed								0						0
28. Indexed								0						0
29. Variable with guarantees								0						0
30. Variable without guarantees								0						0
31. Life contingent payout								0						0
32. Other								0						0
33. Total Group Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health														
34. Comprehensive individual								0	XXX	XXX	XXX			0
35. Comprehensive group								0	XXX	XXX	XXX			0
36. Medicare Supplement								0	XXX	XXX	XXX			0
37. Vision only								0	XXX	XXX	XXX			0
38. Dental only								0	XXX	XXX	XXX			0
39. Federal Employees Health Benefits Plan								0	XXX	XXX	XXX			0
40. Title XVIII Medicare								0	XXX	XXX	XXX			0
41. Title XIX Medicaid								0	XXX	XXX	XXX			0
42. Credit A&H								0	XXX	XXX	XXX			0
43. Disability income								0	XXX	XXX	XXX			0
44. Long-term care								0	XXX	XXX	XXX			0
45. Other health								0	XXX	XXX	XXX			0
46. Total Accident and Health		0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	0
47. Total		19,915 (c)	0	0	0	1	0	1	74,242	0	0	0	0	74,242

**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE) (Continued)^(b)**

NAIC Group Code	0000	BUSINESS IN THE STATE OF		North Carolina		DURING THE YEAR						2024		NAIC Company Code	56340			
Line of Business	Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit		In Force December 31, Current Year (b)				
		13		Claims Settled During Current Year						22		Issued During Year		Other Changes to In Force (Net)				
		14	15	16	17	18	19	20	21	23		24	25	26	27	28		
		Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	
Individual Life																		
1. Industrial										0	0							
2. Whole										0	0				14	2	55,014	
3. Term										0	0							
4. Indexed										0	0							
5. Universal										0	0							
6. Universal with secondary guarantees										0	0							
7. Variable										0	0							
8. Variable universal										0	0							
9. Credit										0	0							
10. Other										0	0							
11. Total Individual Life		0	0	0	0	0	0	0	0	0	0	0	0	0	14	2	55,014	
Group Life																		
12. Whole										0	0							
13. Term										0	0							
14. Universal										0	0							
15. Variable										0	0							
16. Variable universal										0	0							
17. Credit										0	0							
18. Other										0	0							
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Individual Annuities																		
20. Fixed										0	0							
21. Indexed										0	0							
22. Variable with guarantees										0	0							
23. Variable without guarantees										0	0							
24. Life contingent payout										0	0							
25. Other										0	0							
26. Total Individual Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Group Annuities																		
27. Fixed										0	0							
28. Indexed										0	0							
29. Variable with guarantees										0	0							
30. Variable without guarantees										0	0							
31. Life contingent payout										0	0							
32. Other										0	0							
33. Total Group Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Accident and Health																		
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
42. Credit A&H																		
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
46. Total Accident and Health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	
47. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0	14	2	55,014

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

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: 2) covering number of lives: 3) face amount \$

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ Group: \$ Total: \$ 0

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

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code	0000	BUSINESS IN THE STATE OF		Ohio	DURING THE YEAR 2024							NAIC Company Code	56340
		1	2	Dividends to Policyholders/Refunds to Members							Claims and Benefits Paid		
Line of Business		Premiums and Annuities Considerations	Other Considerations	3	4	5	6	7	8	9	10	11	12
				Paid in Cash or Left on Deposit	Applied to Pay Renewal Premiums	Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	Other	Total (Col. 3+4+5+6)	Death and Annuity Benefits	Matured Endowments	Surrender Values and Withdrawals for Life Contracts	All Other Benefits	Total (Sum Columns 8 through 11)
Individual Life													
1. Industrial		225,196		2,288	368	76,721		79,378	583,711		146,099		0
2. Whole		41,562											729,810
3. Term													0
4. Indexed													0
5. Universal													0
6. Universal with secondary guarantees													0
7. Variable													0
8. Variable universal													0
9. Credit													0
10. Other													0
11. Total Individual Life		266,758	0	2,288	368	76,721	0	79,378	583,711	0	146,099	0	729,810
Group Life													
12. Whole													0
13. Term													0
14. Universal													0
15. Variable													0
16. Variable universal													0
17. Credit													0
18. Other													0
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities													
20. Fixed		4,344,780											5,638,238
21. Indexed													0
22. Variable with guarantees													0
23. Variable without guarantees													0
24. Life contingent payout													0
25. Other													0
26. Total Individual Annuities		4,344,780	0	0	0	0	0	0	5,638,238	0	0	0	5,638,238
Group Annuities													
27. Fixed													0
28. Indexed													0
29. Variable with guarantees													0
30. Variable without guarantees													0
31. Life contingent payout													0
32. Other													0
33. Total Group Annuities		0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health													
34. Comprehensive individual		(d)											0
35. Comprehensive group		(d)											0
36. Medicare Supplement		(d)											0
37. Vision only		(d)											0
38. Dental only		(d)											0
39. Federal Employees Health Benefits Plan		(d)											0
40. Title XVIII Medicare		(d)											0
41. Title XIX Medicaid		(d)											0
42. Credit A&H													0
43. Disability income		(d)											0
44. Long-term care		(d)											0
45. Other health		(d)											0
46. Total Accident and Health		0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total		4,611,537 (c)	0	2,288	368	76,721	0	79,378	6,221,949	0	146,099	0	6,368,048

**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE) (Continued)^(b)**

NAIC Group Code	0000	BUSINESS IN THE STATE OF		Ohio		DURING THE YEAR						2024		NAIC Company Code	56340		
Line of Business	Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit		In Force December 31, Current Year (b)			
		13		Claims Settled During Current Year						22		Issued During Year		Other Changes to In Force (Net)			
		Totals Paid	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount
Individual Life																	
1. Industrial																	
2. Whole	601,396	132	574,632						0	0	26,764	42	379,000	(398)	(1,352,543)	8,255	55,196,547
3. Term									0	0	0						
4. Indexed									0	0	0						
5. Universal									0	0	0						
6. Universal with secondary guarantees									0	0	0						
7. Variable									0	0	0						
8. Variable universal									0	0	0						
9. Credit									0	0	0						
10. Other									0	0	0						
11. Total Individual Life	601,396	132	574,632	0	0	0	0	0	132	574,632	26,764	42	379,000	(398)	(1,352,543)	8,255	55,196,547
Group Life																	
12. Whole											0						
13. Term											0						
14. Universal											0						
15. Variable											0						
16. Variable universal											0						
17. Credit											0						
18. Other											0						
19. Total Group Life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities																	
20. Fixed											0						
21. Indexed											0						
22. Variable with guarantees											0						
23. Variable without guarantees											0						
24. Life contingent payout											0						
25. Other											0						
26. Total Individual Annuities	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities																	
27. Fixed											0						
28. Indexed											0						
29. Variable with guarantees											0						
30. Variable without guarantees											0						
31. Life contingent payout											0						
32. Other											0						
33. Total Group Annuities	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health																	
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
42. Credit A&H																	
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
46. Total Accident and Health	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
47. Total	601,396	132	574,632	0	0	0	0	0	132	574,632	26,764	42	379,000	(398)	(1,352,543)	8,255	55,196,547

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

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: 2) covering number of lives: 3) face amount \$

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ Group: \$ Total: \$ 0

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

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code	0000	BUSINESS IN THE STATE OF		Pennsylvania		DURING THE YEAR 2024						NAIC Company Code	56340	
		1	2	Dividends to Policyholders/Refunds to Members						Claims and Benefits Paid				
Line of Business		Premiums and Annuities Considerations	Other Considerations	3	4	5	6	7	8	9	10	11	12	
				Paid in Cash or Left on Deposit	Applied to Pay Renewal Premiums	Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	Other	Total (Col. 3+4+5+6)	Death and Annuity Benefits	Matured Endowments	Surrender Values and Withdrawals for Life Contracts	All Other Benefits	Total (Sum Columns 8 through 11)	
Individual Life														
1. Industrial		611,843		7,717	859	244,592		253,169	1,578,156		276,231		0	1,854,387
2. Whole		185,158												0
3. Term														0
4. Indexed														0
5. Universal														0
6. Universal with secondary guarantees														0
7. Variable														0
8. Variable universal														0
9. Credit														0
10. Other														0
11. Total Individual Life		797,001	0	7,717	859	244,592	0	253,169	1,578,156	0	276,231	0	0	1,854,387
Group Life														
12. Whole														0
13. Term														0
14. Universal														0
15. Variable														0
16. Variable universal														0
17. Credit														0
18. Other														0
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities														
20. Fixed		6,349,606												11,725,841
21. Indexed														0
22. Variable with guarantees														0
23. Variable without guarantees														0
24. Life contingent payout														0
25. Other														0
26. Total Individual Annuities		6,349,606	0	0	0	0	0	0	11,725,841	0	0	0	0	11,725,841
Group Annuities														
27. Fixed														0
28. Indexed														0
29. Variable with guarantees														0
30. Variable without guarantees														0
31. Life contingent payout														0
32. Other														0
33. Total Group Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health														
34. Comprehensive individual		(d)												0
35. Comprehensive group		(d)												0
36. Medicare Supplement		(d)												0
37. Vision only		(d)												0
38. Dental only		(d)												0
39. Federal Employees Health Benefits Plan		(d)												0
40. Title XVIII Medicare		(d)												0
41. Title XIX Medicaid		(d)												0
42. Credit A&H														0
43. Disability income		(d)												0
44. Long-term care		(d)												0
45. Other health		(d)												0
46. Total Accident and Health		0	0	0	0	0	0	0	XXX	XXX	XXX	XXX	0	0
47. Total		7,146,607 (c)	0	7,717	859	244,592	0	253,169	13,303,997	0	276,231	0	0	13,580,228

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code	0000	BUSINESS IN THE STATE OF		Pennsylvania										DURING THE YEAR		2024		NAIC Company Code	56340			
Line of Business	Incurred During Current Year	13	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										22	Issued During Year		Policy Exhibit		In Force December 31, Current Year (b)				
			Claims Settled During Current Year								Total Settled During Current Year			23		24		25		26		
			Totals Paid	Reduction by Compromise		Amount Rejected		Total Settled During Current Year		Unpaid December 31, Current Year				Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	
Individual Life																						
1. Industrial											0	0										
2. Whole	1,680,054	416	1,580,485								416	1,580,485	99,569	101	1,274,500	(592)	(4,279,474)	27,905	182,542,219			
3. Term											0	0										
4. Indexed											0	0										
5. Universal											0	0										
6. Universal with secondary guarantees											0	0										
7. Variable											0	0										
8. Variable universal											0	0										
9. Credit											0	0										
10. Other											0	0										
11. Total Individual Life	1,680,054	416	1,580,485	0	0	0	0	0	416	1,580,485	99,569	101	1,274,500	(592)	(4,279,474)	27,905	182,542,219					
Group Life																						
12. Whole											0	0										
13. Term											0	0										
14. Universal											0	0										
15. Variable											0	0										
16. Variable universal											0	0										
17. Credit											0	0										
18. Other											0	0										
19. Total Group Life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Individual Annuities																						
20. Fixed											0	0										
21. Indexed											0	0										
22. Variable with guarantees											0	0										
23. Variable without guarantees											0	0										
24. Life contingent payout											0	0										
25. Other											0	0										
26. Total Individual Annuities	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Group Annuities																						
27. Fixed											0	0										
28. Indexed											0	0										
29. Variable with guarantees											0	0										
30. Variable without guarantees											0	0										
31. Life contingent payout											0	0										
32. Other											0	0										
33. Total Group Annuities	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Accident and Health																						
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
46. Total Accident and Health	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
47. Total	1,680,054	416	1,580,485	0	0	0	0	0	416	1,580,485	99,569	101	1,274,500	(592)	(4,279,474)	27,905	182,542,219					

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

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: 2) covering number of lives: 3) face amount \$

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ Group: \$ Total: \$ 0

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

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE)^(b)

5 6 3 4 0 2 0 2 4 4 3 0 4 0 0 0 0

24.RI

**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE) (Continued)^(b)**

NAIC Group Code	0000	BUSINESS IN THE STATE OF		Rhode Island		DURING THE YEAR						2024		NAIC Company Code	56340				
Line of Business	Incurred During Current Year	13	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22	Policy Exhibit		In Force December 31, Current Year (b)					
			Claims Settled During Current Year									Issued During Year		Other Changes to In Force (Net)					
			Totals Paid	Reduction by Compromise		Amount Rejected		Total Settled During Current Year				23	24	25	26	27	28		
			14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount		Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	
Individual Life																			
1. Industrial																			
2. Whole																			
3. Term																			
4. Indexed																			
5. Universal																			
6. Universal with secondary guarantees																			
7. Variable																			
8. Variable universal																			
9. Credit																			
10. Other																			
11. Total Individual Life																			
Group Life																			
12. Whole																			
13. Term																			
14. Universal																			
15. Variable																			
16. Variable universal																			
17. Credit																			
18. Other																			
19. Total Group Life																			
Individual Annuities																			
20. Fixed																			
21. Indexed																			
22. Variable with guarantees																			
23. Variable without guarantees																			
24. Life contingent payout																			
25. Other																			
26. Total Individual Annuities																			
Group Annuities																			
27. Fixed																			
28. Indexed																			
29. Variable with guarantees																			
30. Variable without guarantees																			
31. Life contingent payout																			
32. Other																			
33. Total Group Annuities																			
Accident and Health																			
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
46. Total Accident and Health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
47. Total																			

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

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: 2) covering number of lives: 3) face amount \$

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ Group: \$ Total: \$

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

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code	0000	BUSINESS IN THE STATE OF		South Carolina		DURING THE YEAR 2024						NAIC Company Code	56340
		1	2	Dividends to Policyholders/Refunds to Members						Claims and Benefits Paid			
Line of Business		Premiums and Annuities Considerations	Other Considerations	3	4	5	6	7	8	9	10	11	12
				Paid in Cash or Left on Deposit	Applied to Pay Renewal Premiums	Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	Other	Total (Col. 3+4+5+6)	Death and Annuity Benefits	Matured Endowments	Surrender Values and Withdrawals for Life Contracts	All Other Benefits	Total (Sum Columns 8 through 11)
Individual Life													
1. Industrial								0					0
2. Whole								0			5,018		5,018
3. Term								0					0
4. Indexed								0					0
5. Universal								0					0
6. Universal with secondary guarantees								0					0
7. Variable								0					0
8. Variable universal								0					0
9. Credit								0					0
10. Other								0					0
11. Total Individual Life		0	0	0	0	0	0	0	0	0	5,018	0	5,018
Group Life													
12. Whole								0					0
13. Term								0					0
14. Universal								0					0
15. Variable								0					0
16. Variable universal								0					0
17. Credit								0					0
18. Other								0					0
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities													
20. Fixed		10,133							0	57,339			57,339
21. Indexed								0					0
22. Variable with guarantees								0					0
23. Variable without guarantees								0					0
24. Life contingent payout								0					0
25. Other								0					0
26. Total Individual Annuities		10,133	0	0	0	0	0	0	57,339	0	0	0	57,339
Group Annuities													
27. Fixed								0					0
28. Indexed								0					0
29. Variable with guarantees								0					0
30. Variable without guarantees								0					0
31. Life contingent payout								0					0
32. Other								0					0
33. Total Group Annuities		0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health													
34. Comprehensive individual								0	XXX	XXX	XXX		0
35. Comprehensive group								0	XXX	XXX	XXX		0
36. Medicare Supplement								0	XXX	XXX	XXX		0
37. Vision only								0	XXX	XXX	XXX		0
38. Dental only								0	XXX	XXX	XXX		0
39. Federal Employees Health Benefits Plan								0	XXX	XXX	XXX		0
40. Title XVIII Medicare								0	XXX	XXX	XXX		0
41. Title XIX Medicaid								0	XXX	XXX	XXX		0
42. Credit A&H								0	XXX	XXX	XXX		0
43. Disability income								0	XXX	XXX	XXX		0
44. Long-term care								0	XXX	XXX	XXX		0
45. Other health								0	XXX	XXX	XXX		0
46. Total Accident and Health		0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total		10,133 (c)	0	0	0	0	0	0	57,339	0	5,018	0	62,358

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code	0000	BUSINESS IN THE STATE OF		South Carolina		DURING THE YEAR						2024		NAIC Company Code	56340				
Line of Business	Incurred During Current Year	13	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22	Policy Exhibit		In Force December 31, Current Year (b)					
			Claims Settled During Current Year									Issued During Year		Other Changes to In Force (Net)					
			Totals Paid	Reduction by Compromise		Amount Rejected		Total Settled During Current Year				23	24	25	26	27	28		
			14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount		Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	
Individual Life																			
1. Industrial												0	0	0	0	0	0		
2. Whole												0	0	0	0	0	0		
3. Term												0	0	0	0	0	0		
4. Indexed												0	0	0	0	0	0		
5. Universal												0	0	0	0	0	0		
6. Universal with secondary guarantees												0	0	0	0	0	0		
7. Variable												0	0	0	0	0	0		
8. Variable universal												0	0	0	0	0	0		
9. Credit												0	0	0	0	0	0		
10. Other												0	0	0	0	0	0		
11. Total Individual Life			0	0	0	0	0	0	0	0		0	0	0	0	0	0		
Group Life																			
12. Whole												0	0	0	0	0	0		
13. Term												0	0	0	0	0	0		
14. Universal												0	0	0	0	0	0		
15. Variable												0	0	0	0	0	0		
16. Variable universal												0	0	0	0	0	0		
17. Credit												0	0	0	0	0	0		
18. Other												0	0	0	0	0	0		
19. Total Group Life			0	0	0	0	0	0	0	0		0	0	0	0	0	0		
Individual Annuities																			
20. Fixed												0	0	0	0	0	0		
21. Indexed												0	0	0	0	0	0		
22. Variable with guarantees												0	0	0	0	0	0		
23. Variable without guarantees												0	0	0	0	0	0		
24. Life contingent payout												0	0	0	0	0	0		
25. Other												0	0	0	0	0	0		
26. Total Individual Annuities			0	0	0	0	0	0	0	0		0	0	0	0	0	0		
Group Annuities																			
27. Fixed												0	0	0	0	0	0		
28. Indexed												0	0	0	0	0	0		
29. Variable with guarantees												0	0	0	0	0	0		
30. Variable without guarantees												0	0	0	0	0	0		
31. Life contingent payout												0	0	0	0	0	0		
32. Other												0	0	0	0	0	0		
33. Total Group Annuities			0	0	0	0	0	0	0	0		0	0	0	0	0	0		
Accident and Health																			
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		
46. Total Accident and Health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		
47. Total		0	0	0	0	0	0	0	0	0		0	0	0	0	0	0		

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

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: 2) covering number of lives: 3) face amount \$

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ Group: \$ Total: \$ 0

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

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code	0000	BUSINESS IN THE STATE OF		Tennessee		DURING THE YEAR 2024						NAIC Company Code	56340
		1	2	Dividends to Policyholders/Refunds to Members						Claims and Benefits Paid			
Line of Business		Premiums and Annuities Considerations	Other Considerations	3	4	5	6	7	8	9	10	11	12
				Paid in Cash or Left on Deposit	Applied to Pay Renewal Premiums	Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	Other	Total (Col. 3+4+5+6)	Death and Annuity Benefits	Matured Endowments	Surrender Values and Withdrawals for Life Contracts	All Other Benefits	Total (Sum Columns 8 through 11)
Individual Life													
1. Industrial								0					0
2. Whole								0			2,223		2,223
3. Term								0					0
4. Indexed								0					0
5. Universal								0					0
6. Universal with secondary guarantees								0					0
7. Variable								0					0
8. Variable universal								0					0
9. Credit								0					0
10. Other								0					0
11. Total Individual Life		0	0	0	0	0	0	0	0	0	2,223	0	2,223
Group Life													
12. Whole								0					0
13. Term								0					0
14. Universal								0					0
15. Variable								0					0
16. Variable universal								0					0
17. Credit								0					0
18. Other								0					0
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities													
20. Fixed		66,699						0	35,096				35,096
21. Indexed								0					0
22. Variable with guarantees								0					0
23. Variable without guarantees								0					0
24. Life contingent payout								0					0
25. Other								0					0
26. Total Individual Annuities		66,699	0	0	0	0	0	0	35,096	0	0	0	35,096
Group Annuities													
27. Fixed								0					0
28. Indexed								0					0
29. Variable with guarantees								0					0
30. Variable without guarantees								0					0
31. Life contingent payout								0					0
32. Other								0					0
33. Total Group Annuities		0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health													
34. Comprehensive individual								0	XXX	XXX	XXX		0
35. Comprehensive group								0	XXX	XXX	XXX		0
36. Medicare Supplement								0	XXX	XXX	XXX		0
37. Vision only								0	XXX	XXX	XXX		0
38. Dental only								0	XXX	XXX	XXX		0
39. Federal Employees Health Benefits Plan								0	XXX	XXX	XXX		0
40. Title XVIII Medicare								0	XXX	XXX	XXX		0
41. Title XIX Medicaid								0	XXX	XXX	XXX		0
42. Credit A&H								0	XXX	XXX	XXX		0
43. Disability income								0	XXX	XXX	XXX		0
44. Long-term care								0	XXX	XXX	XXX		0
45. Other health								0	XXX	XXX	XXX		0
46. Total Accident and Health		0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total		66,699 (c)	0	0	0	0	0	0	35,096	0	2,223	0	37,319

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code	0000	BUSINESS IN THE STATE OF		Tennessee		DURING THE YEAR						2024		NAIC Company Code	56340						
Line of Business	Incurred During Current Year	13	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22	Policy Exhibit		In Force December 31, Current Year (b)							
			Claims Settled During Current Year									Issued During Year		Other Changes to In Force (Net)							
			Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23		24		25		26			
14		15		16		17		18		19		20		21		27		28			
Number of Pols/ Certs		Amount		Number of Pols/ Certs		Amount		Number of Pols/ Certs		Amount		Number of Pols/ Certs		Amount		Number of Pols/ Certs		Amount			
Individual Life																					
1. Industrial												0	0	0	0						
2. Whole												0	0	0	0						
3. Term												0	0	0	0						
4. Indexed												0	0	0	0						
5. Universal												0	0	0	0						
6. Universal with secondary guarantees												0	0	0	0						
7. Variable												0	0	0	0						
8. Variable universal												0	0	0	0						
9. Credit												0	0	0	0						
10. Other												0	0	0	0						
11. Total Individual Life			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Group Life																					
12. Whole												0	0	0	0						
13. Term												0	0	0	0						
14. Universal												0	0	0	0						
15. Variable												0	0	0	0						
16. Variable universal												0	0	0	0						
17. Credit												0	0	0	0						
18. Other												0	0	0	0						
19. Total Group Life			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Individual Annuities												0	0	0	0						
20. Fixed												0	0	0	0						
21. Indexed												0	0	0	0						
22. Variable with guarantees												0	0	0	0						
23. Variable without guarantees												0	0	0	0						
24. Life contingent payout												0	0	0	0						
25. Other												0	0	0	0						
26. Total Individual Annuities			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Group Annuities												0	0	0	0						
27. Fixed												0	0	0	0						
28. Indexed												0	0	0	0						
29. Variable with guarantees												0	0	0	0						
30. Variable without guarantees												0	0	0	0						
31. Life contingent payout												0	0	0	0						
32. Other												0	0	0	0						
33. Total Group Annuities			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Accident and Health																					
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H																					
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
46. Total Accident and Health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0		
47. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		

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

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: 2) covering number of lives: 3) face amount \$

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ Group: \$ Total: \$ 0

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

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code	0000	BUSINESS IN THE STATE OF		Texas		DURING THE YEAR 2024						NAIC Company Code	56340	
		1	2	Dividends to Policyholders/Refunds to Members						Claims and Benefits Paid				
Line of Business		Premiums and Annuities Considerations	Other Considerations	3	4	5	6	7	8	9	10	11	12	
				Paid in Cash or Left on Deposit	Applied to Pay Renewal Premiums	Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	Other	Total (Col. 3+4+5+6)	Death and Annuity Benefits	Matured Endowments	Surrender Values and Withdrawals for Life Contracts	All Other Benefits	Total (Sum Columns 8 through 11)	
Individual Life														
1. Industrial									0					0
2. Whole			144						15					0
3. Term									0					0
4. Indexed									0					0
5. Universal									0					0
6. Universal with secondary guarantees									0					0
7. Variable									0					0
8. Variable universal									0					0
9. Credit									0					0
10. Other									0					0
11. Total Individual Life		144	0	0	0	15	0	15	0	0	0	0	0	0
Group Life														
12. Whole									0					0
13. Term									0					0
14. Universal									0					0
15. Variable									0					0
16. Variable universal									0					0
17. Credit									0					0
18. Other									0					0
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities														
20. Fixed		5,658							0	109,147				109,147
21. Indexed									0					0
22. Variable with guarantees									0					0
23. Variable without guarantees									0					0
24. Life contingent payout									0					0
25. Other									0					0
26. Total Individual Annuities		5,658	0	0	0	0	0	0	109,147	0	0	0	0	109,147
Group Annuities														
27. Fixed									0					0
28. Indexed									0					0
29. Variable with guarantees									0					0
30. Variable without guarantees									0					0
31. Life contingent payout									0					0
32. Other									0					0
33. Total Group Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health														
34. Comprehensive individual									0	XXX	XXX	XXX		0
35. Comprehensive group									0	XXX	XXX	XXX		0
36. Medicare Supplement									0	XXX	XXX	XXX		0
37. Vision only									0	XXX	XXX	XXX		0
38. Dental only									0	XXX	XXX	XXX		0
39. Federal Employees Health Benefits Plan									0	XXX	XXX	XXX		0
40. Title XVIII Medicare									0	XXX	XXX	XXX		0
41. Title XIX Medicaid									0	XXX	XXX	XXX		0
42. Credit A&H									0	XXX	XXX	XXX		0
43. Disability income									0	XXX	XXX	XXX		0
44. Long-term care									0	XXX	XXX	XXX		0
45. Other health									0	XXX	XXX	XXX		0
46. Total Accident and Health		0	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total		5,802 (c)	0	0	0	15	0	15	109,147	0	0	0	0	109,147

**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE) (Continued)^(b)**

NAIC Group Code	0000	BUSINESS IN THE STATE OF		Texas		DURING THE YEAR						2024		NAIC Company Code	56340				
Line of Business	Incurred During Current Year	13	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22	Policy Exhibit		In Force December 31, Current Year (b)					
			Claims Settled During Current Year									Issued During Year		Other Changes to In Force (Net)					
			Totals Paid	Reduction by Compromise		Amount Rejected		Total Settled During Current Year				23	24	25	26	27	28		
			14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount		Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	
Individual Life																			
1. Industrial																			
2. Whole																202	5		
3. Term																	36,259		
4. Indexed																			
5. Universal																			
6. Universal with secondary guarantees																			
7. Variable																			
8. Variable universal																			
9. Credit																			
10. Other																			
11. Total Individual Life			0	0	0	0	0	0	0	0	0	0	0	0	202	5	36,259		
Group Life																			
12. Whole																			
13. Term																			
14. Universal																			
15. Variable																			
16. Variable universal																			
17. Credit																			
18. Other																			
19. Total Group Life			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Individual Annuities																			
20. Fixed																			
21. Indexed																			
22. Variable with guarantees																			
23. Variable without guarantees																			
24. Life contingent payout																			
25. Other																			
26. Total Individual Annuities			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Group Annuities																			
27. Fixed																			
28. Indexed																			
29. Variable with guarantees																			
30. Variable without guarantees																			
31. Life contingent payout																			
32. Other																			
33. Total Group Annuities			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Accident and Health																			
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
42. Credit A&H																			
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
46. Total Accident and Health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0		
47. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0	202	5		
(a) Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$, current year \$ Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$, current year \$																			
(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: 2) covering number of lives: 3) face amount \$																			
(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ Group: \$ Total: \$ 0																			
(d) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products																			
(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$																			



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code	0000	BUSINESS IN THE STATE OF		Utah	DURING THE YEAR 2024							NAIC Company Code	56340
		1	2	Dividends to Policyholders/Refunds to Members							Claims and Benefits Paid		
Line of Business		Premiums and Annuities Considerations	Other Considerations	3	4	5	6	7	8	9	10	11	12
				Paid in Cash or Left on Deposit	Applied to Pay Renewal Premiums	Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	Other	Total (Col. 3+4+5+6)	Death and Annuity Benefits	Matured Endowments	Surrender Values and Withdrawals for Life Contracts	All Other Benefits	Total (Sum Columns 8 through 11)
Individual Life													
1. Industrial													
2. Whole													
3. Term													
4. Indexed													
5. Universal													
6. Universal with secondary guarantees													
7. Variable													
8. Variable universal													
9. Credit													
10. Other													
11. Total Individual Life													
Group Life													
12. Whole													
13. Term													
14. Universal													
15. Variable													
16. Variable universal													
17. Credit													
18. Other													
19. Total Group Life													
Individual Annuities													
20. Fixed													
21. Indexed													
22. Variable with guarantees													
23. Variable without guarantees													
24. Life contingent payout													
25. Other													
26. Total Individual Annuities													
Group Annuities													
27. Fixed													
28. Indexed													
29. Variable with guarantees													
30. Variable without guarantees													
31. Life contingent payout													
32. Other													
33. Total Group Annuities													
Accident and Health													
34. Comprehensive individual	(d)												
35. Comprehensive group	(d)												
36. Medicare Supplement	(d)												
37. Vision only	(d)												
38. Dental only	(d)												
39. Federal Employees Health Benefits Plan	(d)												
40. Title XVIII Medicare	(d)												
41. Title XIX Medicaid	(d)												
42. Credit A&H													
43. Disability income	(d)												
44. Long-term care	(d)												
45. Other health	(d)												
46. Total Accident and Health													
47. Total		(c)											

NONE

**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE) (Continued)^(b)**

NAIC Group Code	0000	BUSINESS IN THE STATE OF		Utah	DURING THE YEAR								NAIC Company Code		56340	
Line of Business		Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								Policy Exhibit		In Force December 31, Current Year (b)			
			Claims Settled During Current Year													
			Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		Unpaid December 31, Current Year	Number of Pols/ Certs	Issued During Year	Other Changes to In Force (Net)	In Force December 31, Current Year (b)	
			14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount						
Individual Life																
1. Industrial																
2. Whole																
3. Term																
4. Indexed																
5. Universal																
6. Universal with secondary guarantees																
7. Variable																
8. Variable universal																
9. Credit																
10. Other																
11. Total Individual Life																
Group Life																
12. Whole																
13. Term																
14. Universal																
15. Variable																
16. Variable universal																
17. Credit																
18. Other																
19. Total Group Life																
Individual Annuities																
20. Fixed																
21. Indexed																
22. Variable with guarantees																
23. Variable without guarantees																
24. Life contingent payout																
25. Other																
26. Total Individual Annuities																
Group Annuities																
27. Fixed																
28. Indexed																
29. Variable with guarantees																
30. Variable without guarantees																
31. Life contingent payout																
32. Other																
33. Total Group Annuities																
Accident and Health																
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
46. Total Accident and Health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
47. Total																

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

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: 2) covering number of lives: 3) face amount \$

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ Group: \$ Total: \$

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

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code	0000	BUSINESS IN THE STATE OF	Vermont	Dividends to Policyholders/Refunds to Members							DURING THE YEAR 2024			NAIC Company Code	56340
		1	2	3	4	5	6	7	8	9	10	11	12		
Line of Business		Premiums and Annuities Considerations	Other Considerations	Paid in Cash or Left on Deposit	Applied to Pay Renewal Premiums	Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	Other	Total (Col. 3+4+5+6)	Death and Annuity Benefits	Matured Endowments	Surrender Values and Withdrawals for Life Contracts	All Other Benefits	Total (Sum Columns 8 through 11)		
Individual Life															
1. Industrial															
2. Whole															
3. Term															
4. Indexed															
5. Universal															
6. Universal with secondary guarantees															
7. Variable															
8. Variable universal															
9. Credit															
10. Other															
11. Total Individual Life															
Group Life															
12. Whole															
13. Term															
14. Universal															
15. Variable															
16. Variable universal															
17. Credit															
18. Other															
19. Total Group Life															
Individual Annuities															
20. Fixed															
21. Indexed															
22. Variable with guarantees															
23. Variable without guarantees															
24. Life contingent payout															
25. Other															
26. Total Individual Annuities															
Group Annuities															
27. Fixed															
28. Indexed															
29. Variable with guarantees															
30. Variable without guarantees															
31. Life contingent payout															
32. Other															
33. Total Group Annuities															
Accident and Health															
34. Comprehensive individual	(d)										XXX	XXX	XXX		
35. Comprehensive group	(d)										XXX	XXX	XXX		
36. Medicare Supplement	(d)										XXX	XXX	XXX		
37. Vision only	(d)										XXX	XXX	XXX		
38. Dental only	(d)										XXX	XXX	XXX		
39. Federal Employees Health Benefits Plan	(d)										XXX	XXX	XXX		
40. Title XVIII Medicare	(d)										XXX	XXX	XXX		
41. Title XIX Medicaid	(d)										XXX	XXX	XXX		
42. Credit A&H											XXX	XXX	XXX		
43. Disability income	(d)										XXX	XXX	XXX		
44. Long-term care	(d)										XXX	XXX	XXX		
45. Other health	(d)										XXX	XXX	XXX		
46. Total Accident and Health											XXX	XXX	XXX		
47. Total			(c)												

NONE

**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE) (Continued)^(b)**

NAIC Group Code	0000	BUSINESS IN THE STATE OF		Vermont		DURING THE YEAR						2024		NAIC Company Code	56340				
Line of Business	Incurred During Current Year	13	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22	Policy Exhibit		In Force December 31, Current Year (b)					
			Claims Settled During Current Year									Issued During Year		Other Changes to In Force (Net)					
			Totals Paid	Reduction by Compromise		Amount Rejected		Total Settled During Current Year				23	24	25	26	27	28		
			14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount		Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	
Individual Life																			
1. Industrial																			
2. Whole																			
3. Term																			
4. Indexed																			
5. Universal																			
6. Universal with secondary guarantees																			
7. Variable																			
8. Variable universal																			
9. Credit																			
10. Other																			
11. Total Individual Life																			
Group Life																			
12. Whole																			
13. Term																			
14. Universal																			
15. Variable																			
16. Variable universal																			
17. Credit																			
18. Other																			
19. Total Group Life																			
Individual Annuities																			
20. Fixed																			
21. Indexed																			
22. Variable with guarantees																			
23. Variable without guarantees																			
24. Life contingent payout																			
25. Other																			
26. Total Individual Annuities																			
Group Annuities																			
27. Fixed																			
28. Indexed																			
29. Variable with guarantees																			
30. Variable without guarantees																			
31. Life contingent payout																			
32. Other																			
33. Total Group Annuities																			
Accident and Health																			
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
46. Total Accident and Health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
47. Total																			

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

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: 2) covering number of lives: 3) face amount \$

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ Group: \$ Total: \$

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

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$

NONE



5 6 3 4 0 2 0 2 4 4 3 0 4 7 1 0 0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code	0000	BUSINESS IN THE STATE OF		Virginia		DURING THE YEAR 2024						NAIC Company Code	56340	
		1	2	Dividends to Policyholders/Refunds to Members						Claims and Benefits Paid				
Line of Business		Premiums and Annuities Considerations	Other Considerations	3	4	5	6	7	8	9	10	11	12	
				Paid in Cash or Left on Deposit	Applied to Pay Renewal Premiums	Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	Other	Total (Col. 3+4+5+6)	Death and Annuity Benefits	Matured Endowments	Surrender Values and Withdrawals for Life Contracts	All Other Benefits	Total (Sum Columns 8 through 11)	
Individual Life														
1. Industrial														0
2. Whole		4,052		9		2,509		2,518	47,232		4,483			51,716
3. Term		2,151												0
4. Indexed														0
5. Universal														0
6. Universal with secondary guarantees														0
7. Variable														0
8. Variable universal														0
9. Credit														0
10. Other														0
11. Total Individual Life		6,203	0	9	0	2,509	0	2,518	47,232	0	4,483	0		51,716
Group Life														
12. Whole														0
13. Term														0
14. Universal														0
15. Variable														0
16. Variable universal														0
17. Credit														0
18. Other														0
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0		0
Individual Annuities														
20. Fixed		26,800												7,590
21. Indexed														0
22. Variable with guarantees														0
23. Variable without guarantees														0
24. Life contingent payout														0
25. Other														0
26. Total Individual Annuities		26,800	0	0	0	0	0	0	7,590	0	0	0		7,590
Group Annuities														
27. Fixed														0
28. Indexed														0
29. Variable with guarantees														0
30. Variable without guarantees														0
31. Life contingent payout														0
32. Other														0
33. Total Group Annuities		0	0	0	0	0	0	0	0	0	0	0		0
Accident and Health														
34. Comprehensive individual														0
35. Comprehensive group														0
36. Medicare Supplement														0
37. Vision only														0
38. Dental only														0
39. Federal Employees Health Benefits Plan														0
40. Title XVIII Medicare														0
41. Title XIX Medicaid														0
42. Credit A&H														0
43. Disability income														0
44. Long-term care														0
45. Other health														0
46. Total Accident and Health		0	0	0	0	0	0	0	XXX	XXX	XXX		0	0
47. Total		33,003 (c)	0	9	0	2,509	0	2,518	54,822	0	4,483	0		59,306

**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE) (Continued)^(b)**

NAIC Group Code	0000	BUSINESS IN THE STATE OF		Virginia		DURING THE YEAR						2024		NAIC Company Code	56340				
Line of Business	Incurred During Current Year	13	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22	Policy Exhibit		In Force December 31, Current Year (b)					
			Claims Settled During Current Year									Issued During Year		Other Changes to In Force (Net)					
			Totals Paid	Reduction by Compromise		Amount Rejected		Total Settled During Current Year				23	24	25	26	27	28		
			14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount		Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	
Individual Life																			
1. Industrial																			
2. Whole	49,415	7	47,415						0	0	0	0				(10)	(63,803)	244	
3. Term																		1,688,420	
4. Indexed																			
5. Universal																			
6. Universal with secondary guarantees																			
7. Variable																			
8. Variable universal																			
9. Credit																			
10. Other																			
11. Total Individual Life	49,415	7	47,415	0	0	0	0	0	7	47,415	2,000	0	0	(10)	(63,803)	244	1,688,420		
Group Life																			
12. Whole																			
13. Term																			
14. Universal																			
15. Variable																			
16. Variable universal																			
17. Credit																		(a)	
18. Other																			
19. Total Group Life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Individual Annuities																			
20. Fixed																			
21. Indexed																			
22. Variable with guarantees																			
23. Variable without guarantees																			
24. Life contingent payout																			
25. Other																			
26. Total Individual Annuities	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Group Annuities																			
27. Fixed																			
28. Indexed																			
29. Variable with guarantees																			
30. Variable without guarantees																			
31. Life contingent payout																			
32. Other																			
33. Total Group Annuities	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Accident and Health																			
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
42. Credit A&H																			
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
46. Total Accident and Health	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	
47. Total	49,415	7	47,415	0	0	0	0	0	7	47,415	2,000	0	0	(10)	(63,803)	244	1,688,420		

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

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: 2) covering number of lives: 3) face amount \$

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ Group: \$ Total: \$ 0

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

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code	0000	BUSINESS IN THE STATE OF		West Virginia		DURING THE YEAR 2024						NAIC Company Code	56340	
		1	2	Dividends to Policyholders/Refunds to Members						Claims and Benefits Paid				
Line of Business		Premiums and Annuities Considerations	Other Considerations	3	4	5	6	7	8	9	10	11	12	
				Paid in Cash or Left on Deposit	Applied to Pay Renewal Premiums	Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	Other	Total (Col. 3+4+5+6)	Death and Annuity Benefits	Matured Endowments	Surrender Values and Withdrawals for Life Contracts	All Other Benefits	Total (Sum Columns 8 through 11)	
Individual Life														
1. Industrial														0
2. Whole		2,473												597
3. Term		42												0
4. Indexed														0
5. Universal														0
6. Universal with secondary guarantees														0
7. Variable														0
8. Variable universal														0
9. Credit														0
10. Other														0
11. Total Individual Life		2,515	0	28	0	2,277	0	2,305	597	0	0	0	0	597
Group Life														
12. Whole														0
13. Term														0
14. Universal														0
15. Variable														0
16. Variable universal														0
17. Credit														0
18. Other														0
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities														
20. Fixed		2,545												150,805
21. Indexed														0
22. Variable with guarantees														0
23. Variable without guarantees														0
24. Life contingent payout														0
25. Other														0
26. Total Individual Annuities		2,545	0	0	0	0	0	0	150,805	0	0	0	0	150,805
Group Annuities														
27. Fixed														0
28. Indexed														0
29. Variable with guarantees														0
30. Variable without guarantees														0
31. Life contingent payout														0
32. Other														0
33. Total Group Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health														
34. Comprehensive individual														0
35. Comprehensive group														0
36. Medicare Supplement														0
37. Vision only														0
38. Dental only														0
39. Federal Employees Health Benefits Plan														0
40. Title XVIII Medicare														0
41. Title XIX Medicaid														0
42. Credit A&H														0
43. Disability income														0
44. Long-term care														0
45. Other health														0
46. Total Accident and Health		0	0	0	0	0	0	0	XXX	XXX	XXX	XXX	0	0
47. Total		5,060 (c)	0	28	0	2,277	0	2,305	151,401	0	0	0	0	151,401

**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE) (Continued)^(b)**

NAIC Group Code	0000	BUSINESS IN THE STATE OF		West Virginia		DURING THE YEAR						2024		NAIC Company Code	56340				
Line of Business	Incurred During Current Year	13	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22	Policy Exhibit		In Force December 31, Current Year (b)					
			Claims Settled During Current Year									Issued During Year		Other Changes to In Force (Net)					
			Totals Paid	Reduction by Compromise		Amount Rejected		Total Settled During Current Year				23	24	25	26	27	28		
			14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount		Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	
Individual Life																			
1. Industrial																			
2. Whole	596	1	596					0	1	596	0				(12)	(44,231)	204	1,177,834	
3. Term																			
4. Indexed																			
5. Universal																			
6. Universal with secondary guarantees																			
7. Variable																			
8. Variable universal																			
9. Credit																			
10. Other																			
11. Total Individual Life	596	1	596	0	0	0	0	0	1	596	0	0	0	(12)	(44,231)	204	1,177,834		
Group Life																			
12. Whole																			
13. Term																			
14. Universal																			
15. Variable																			
16. Variable universal																			
17. Credit																		(a)	
18. Other																			
19. Total Group Life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Individual Annuities																			
20. Fixed																			
21. Indexed																			
22. Variable with guarantees																			
23. Variable without guarantees																			
24. Life contingent payout																			
25. Other																			
26. Total Individual Annuities	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Group Annuities																			
27. Fixed																			
28. Indexed																			
29. Variable with guarantees																			
30. Variable without guarantees																			
31. Life contingent payout																			
32. Other																			
33. Total Group Annuities	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Accident and Health																			
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
42. Credit A&H																			
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
46. Total Accident and Health	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	
47. Total	596	1	596	0	0	0	0	0	1	596	0	0	0	0	(12)	(44,231)	204	1,177,834	

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

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: 2) covering number of lives: 3) face amount \$

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ Group: \$ Total: \$ 0

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

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code	0000	BUSINESS IN THE STATE OF		Wisconsin		DURING THE YEAR 2024						NAIC Company Code	56340	
		1	2	Dividends to Policyholders/Refunds to Members						Claims and Benefits Paid				
Line of Business		Premiums and Annuities Considerations	Other Considerations	3	4	5	6	7	8	9	10	11	12	
				Paid in Cash or Left on Deposit	Applied to Pay Renewal Premiums	Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	Other	Total (Col. 3+4+5+6)	Death and Annuity Benefits	Matured Endowments	Surrender Values and Withdrawals for Life Contracts	All Other Benefits	Total (Sum Columns 8 through 11)	
Individual Life														
1. Industrial														
2. Whole		4,104												0
3. Term		.866												30,751
4. Indexed														0
5. Universal														0
6. Universal with secondary guarantees														0
7. Variable														0
8. Variable universal														0
9. Credit														0
10. Other														0
11. Total Individual Life		4,970	0	67	0	2,637	0	2,705	27,816	0	2,935	0		30,751
Group Life														
12. Whole														0
13. Term														0
14. Universal														0
15. Variable														0
16. Variable universal														0
17. Credit														0
18. Other														0
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0		0
Individual Annuities														
20. Fixed		2,704,785												7,269,548
21. Indexed														0
22. Variable with guarantees														0
23. Variable without guarantees														0
24. Life contingent payout														0
25. Other														0
26. Total Individual Annuities		2,704,785	0	0	0	0	0	0	7,269,548	0	0	0		7,269,548
Group Annuities														
27. Fixed														0
28. Indexed														0
29. Variable with guarantees														0
30. Variable without guarantees														0
31. Life contingent payout														0
32. Other														0
33. Total Group Annuities		0	0	0	0	0	0	0	0	0	0	0		0
Accident and Health														
34. Comprehensive individual														0
35. Comprehensive group														0
36. Medicare Supplement														0
37. Vision only														0
38. Dental only														0
39. Federal Employees Health Benefits Plan														0
40. Title XVIII Medicare														0
41. Title XIX Medicaid														0
42. Credit A&H														0
43. Disability income														0
44. Long-term care														0
45. Other health														0
46. Total Accident and Health		0	0	0	0	0	0	0	XXX	XXX	XXX		0	0
47. Total		2,709,754 (c)	0	67	0	2,637	0	2,705	7,297,364	0	2,935	0		7,300,300

**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE) (Continued)^(b)**

NAIC Group Code	0000	BUSINESS IN THE STATE OF		Wisconsin		DURING THE YEAR						2024		NAIC Company Code	56340				
Line of Business	Incurred During Current Year	13	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22	Policy Exhibit		In Force December 31, Current Year (b)					
			Claims Settled During Current Year									Issued During Year		Other Changes to In Force (Net)					
			Totals Paid	Reduction by Compromise		Amount Rejected		Total Settled During Current Year				23	24	25	26	27	28		
			14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount		Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	
Individual Life																			
1. Industrial																			
2. Whole	27,847		5	27,847					5	27,847		0	2	50,000	(9)	(42,740)	290		
3. Term									0	0		0	0						
4. Indexed									0	0		0	0						
5. Universal									0	0		0	0						
6. Universal with secondary guarantees									0	0		0	0						
7. Variable									0	0		0	0						
8. Variable universal									0	0		0	0						
9. Credit									0	0		0	0						
10. Other									0	0		0	0						
11. Total Individual Life	27,847		5	27,847	0	0	0	0	5	27,847		0	2	50,000	(9)	(42,740)	290		
Group Life																			
12. Whole												0	0						
13. Term												0	0						
14. Universal												0	0						
15. Variable												0	0						
16. Variable universal												0	0						
17. Credit												0	0						
18. Other												0	0						
19. Total Group Life	0	0	0	0	0	0	0	0	0	0		0	0	0	0	0	0		
Individual Annuities																			
20. Fixed												0	0						
21. Indexed												0	0						
22. Variable with guarantees												0	0						
23. Variable without guarantees												0	0						
24. Life contingent payout												0	0						
25. Other												0	0						
26. Total Individual Annuities	0	0	0	0	0	0	0	0	0	0		0	0	0	0	0	0		
Group Annuities																			
27. Fixed												0	0						
28. Indexed												0	0						
29. Variable with guarantees												0	0						
30. Variable without guarantees												0	0						
31. Life contingent payout												0	0						
32. Other												0	0						
33. Total Group Annuities	0	0	0	0	0	0	0	0	0	0		0	0	0	0	0	0		
Accident and Health																			
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX						
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX						
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX						
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX						
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX						
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX						
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX						
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX						
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX						
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX						
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX						
46. Total Accident and Health	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	0	0	0	0		
47. Total	27,847	5	27,847	0	0	0	0	0	5	27,847		0	2	50,000	(9)	(42,740)	290		
(a)	Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$											Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$		, current year \$			
(b)	Corporate Owned Life Insurance/BOLI: 1) Number of policies:											2) covering number of lives:		3) face amount \$					
(c)	Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$											Group: \$		Total: \$		0			
(d)	For health business on indicated lines report: Number of persons insured under PPO managed care products											and number of persons insured under indemnity only products							
(e)	For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$																		



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code	0000	BUSINESS IN THE STATE OF		Grand Total	DURING THE YEAR 2024							NAIC Company Code	56340
		1	2	Dividends to Policyholders/Refunds to Members							Claims and Benefits Paid		
Line of Business		Premiums and Annuities Considerations	Other Considerations	3	4	5	6	7	8	9	10	11	12
				Paid in Cash or Left on Deposit	Applied to Pay Renewal Premiums	Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	Other	Total (Col. 3+4+5+6)	Death and Annuity Benefits	Matured Endowments	Surrender Values and Withdrawals for Life Contracts	All Other Benefits	Total (Sum Columns 8 through 11)
Individual Life													
1. Industrial		0	0	0	0	0	0	0	0	0	0	0	0
2. Whole		1,077,099	0	12,550	1,529	420,681	0	434,760	2,816,458	0	594,034	0	3,410,491
3. Term		286,167	0	0	0	0	0	0	0	0	0	0	0
4. Indexed		0	0	0	0	0	0	0	0	0	0	0	0
5. Universal		0	0	0	0	0	0	0	0	0	0	0	0
6. Universal with secondary guarantees		0	0	0	0	0	0	0	0	0	0	0	0
7. Variable		0	0	0	0	0	0	0	0	0	0	0	0
8. Variable universal		0	0	0	0	0	0	0	0	0	0	0	0
9. Credit		0	0	0	0	0	0	0	0	0	0	0	0
10. Other		0	0	0	0	0	0	0	0	0	0	0	0
11. Total Individual Life		1,363,266	0	12,550	1,529	420,681	0	434,760	2,816,458	0	594,034	0	3,410,491
Group Life													
12. Whole		0	0	0	0	0	0	0	0	0	0	0	0
13. Term		0	0	0	0	0	0	0	0	0	0	0	0
14. Universal		0	0	0	0	0	0	0	0	0	0	0	0
15. Variable		0	0	0	0	0	0	0	0	0	0	0	0
16. Variable universal		0	0	0	0	0	0	0	0	0	0	0	0
17. Credit		0	0	0	0	0	0	0	0	0	0	0	0
18. Other		0	0	0	0	0	0	0	0	0	0	0	0
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities													
20. Fixed		37,374,411	0	0	0	0	0	0	40,985,609	0	0	0	40,985,609
21. Indexed		0	0	0	0	0	0	0	0	0	0	0	0
22. Variable with guarantees		0	0	0	0	0	0	0	0	0	0	0	0
23. Variable without guarantees		0	0	0	0	0	0	0	0	0	0	0	0
24. Life contingent payout		0	0	0	0	0	0	0	0	0	0	0	0
25. Other		0	0	0	0	0	0	0	0	0	0	0	0
26. Total Individual Annuities		37,374,411	0	0	0	0	0	0	40,985,609	0	0	0	40,985,609
Group Annuities													
27. Fixed		0	0	0	0	0	0	0	0	0	0	0	0
28. Indexed		0	0	0	0	0	0	0	0	0	0	0	0
29. Variable with guarantees		0	0	0	0	0	0	0	0	0	0	0	0
30. Variable without guarantees		0	0	0	0	0	0	0	0	0	0	0	0
31. Life contingent payout		0	0	0	0	0	0	0	0	0	0	0	0
32. Other		0	0	0	0	0	0	0	0	0	0	0	0
33. Total Group Annuities		0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health													
34. Comprehensive individual	(d)	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
35. Comprehensive group	(d)	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
36. Medicare Supplement	(d)	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
37. Vision only	(d)	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
38. Dental only	(d)	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
39. Federal Employees Health Benefits Plan	(d)	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
40. Title XVIII Medicare	(d)	0 (e)	0	0	0	0	0	0	XXX	XXX	XXX	0	0
41. Title XIX Medicaid	(d)	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
42. Credit A&H		0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
43. Disability income	(d)	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
44. Long-term care	(d)	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
45. Other health	(d)	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
46. Total Accident and Health		0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total		38,737,677 (c)	0	12,550	1,529	420,681	0	434,760	43,802,066	0	594,034	0	44,396,100

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code	0000	BUSINESS IN THE STATE OF		Grand Total		DURING THE YEAR						2024		NAIC Company Code		56340								
Line of Business		Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits													Policy Exhibit									
		13 Incurred During Current Year		Claims Settled During Current Year								22 Unpaid December 31, Current Year		Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)						
				14 Totals Paid	15 Number of Pols/ Certs	16 Reduction by Compromise	17 Number of Pols/ Certs	18 Amount Rejected	19 Number of Pols/ Certs	20 Total Settled During Current Year	21 Number of Pols/ Certs	23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount							
Life																								
Industrial		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					
Whole		2,996,427	713	2,814,902	0	0	0	0	0	0	0	0	181,525	179	2,111,500	(1,271)	(7,384,010)	46,262	310,883					
Term		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					
Indexed		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					
Universal		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					
Universal with secondary guarantees		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					
Variable		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					
Variable universal		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					
Credit		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					
Other		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					
Total Individual Life		2,996,427	713	2,814,902	0	0	0	0	713	2,814,902	181,525	179	2,111,500	(1,271)	(7,384,010)	46,262	310,883							
Group Life																								
Whole		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					
Term		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					
Universal		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					
Variable		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					
Variable universal		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					
Credit		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					
Other		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					
Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					
Annuities																								
Fixed		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					
Indexed		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					
Variable with guarantees		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					
Variable without guarantees		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					
Life contingent payout		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					
Other		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					
Total Individual Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					
Annuities																								
Fixed		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					
Indexed		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					
Variable with guarantees		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					
Variable without guarantees		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					
Life contingent payout		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					
Other		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					
Total Group Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					
Health																								
Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0					
Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0					
Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0					
Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0					
Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0					
Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0					
Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0					
Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0					
Credit A&H	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0					
Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0					
Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0					
Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0					
Total Accident and Health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0					
		2,996,427	713	2,814,902	0	0	0	0	713	2,814,902	181,525	179	2,111,500	(1,271)	(7,384,010)	46,262	310,883							

(a) Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ 0, current year \$ 0 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$ 0, current year \$ 0

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: 0 2) covering number of lives: 0 3) face amount \$ 0

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ 0 Group: \$ 0 Total: \$ 0

(d) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
FORM FOR CALCULATING THE INTEREST MAINTENANCE RESERVE

INTEREST MAINTENANCE RESERVE

	1 Amount
1. Reserve as of December 31, Prior Year	472,129
2. Current year's realized pre-tax capital gains/(losses) of \$ 271,960 transferred into the reserve net of taxes of \$	271,960
3. Adjustment for current year's liability gains/(losses) released from the reserve	0
4. Balance before reduction for amount transferred to Summary of Operations (Line 1 + Line 2 + Line 3)	744,089
5. Current year's amortization released to Summary of Operations (Amortization, Line 1, Column 4)	373,918
6. Reserve as of December 31, current year (Line 4 minus Line 5)	370,171

AMORTIZATION

Year of Amortization	1 Reserve as of December 31, Prior Year	2 Current Year's Realized Capital Gains/(Losses) Transferred into the Reserve Net of Taxes	3 Adjustment for Current Year's Liability Gains/(Losses) Released From the Reserve	4 Balance Before Reduction for Current Year's Amortization (Cols. 1 + 2 + 3)
1. 2024	350,172	23,746	0	373,918
2. 2025	308,732	30,020	0	338,753
3. 2026	255,284	10,849	0	266,133
4. 2027	198,080	10,536	0	208,616
5. 2028	128,889	10,269	0	139,158
6. 2029	68,693	9,839	0	78,532
7. 2030	17,995	11,180	0	29,175
8. 2031	(16,367)	13,200	0	(3,167)
9. 2032	(38,075)	15,517	0	(22,558)
10. 2033	(50,037)	18,261	0	(31,776)
11. 2034	(58,156)	20,946	0	(37,209)
12. 2035	(61,078)	20,484	0	(40,595)
13. 2036	(71,000)	17,113	0	(53,887)
14. 2037	(83,044)	12,993	0	(70,052)
15. 2038	(91,538)	9,150	0	(82,388)
16. 2039	(89,884)	4,837	0	(85,047)
17. 2040	(83,792)	3,059	0	(80,733)
18. 2041	(70,635)	4,030	0	(66,605)
19. 2042	(54,546)	5,002	0	(49,544)
20. 2043	(33,885)	6,208	0	(27,677)
21. 2044	(18,226)	7,415	0	(10,811)
22. 2045	(13,083)	7,139	0	(5,945)
23. 2046	(8,270)	5,058	0	(3,213)
24. 2047	(5,484)	3,065	0	(2,419)
25. 2048	(4,313)	837	0	(3,476)
26. 2049	(2,890)	(1,537)	0	(4,427)
27. 2050	(1,422)	(2,535)	0	(3,957)
28. 2051	(236)	(2,010)	0	(2,246)
29. 2052	126	(1,486)	0	(1,360)
30. 2053	120	(918)	0	(798)
31. 2054 and Later	(1)	(306)	0	(307)
32. Total (Lines 1 to 31)	472,129	271,960	0	744,089

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU

ASSET VALUATION RESERVE

	Default Component			Equity Component			7 Total Amount (Cols. 3 + 6)
	1 Other Than Mortgage Loans	2 Mortgage Loans	3 Total (Cols. 1 + 2)	4 Common Stock	5 Real Estate and Other Invested Assets	6 Total (Cols. 4 + 5)	
1. Reserve as of December 31, prior year	4,184,897	344,040	4,528,937	305,940	91,040	396,980	4,925,917
2. Realized capital gains/(losses) net of taxes - General Account	2,151		2,151	215,119		215,119	217,270
3. Realized capital gains/(losses) net of taxes - Separate Accounts			0			0	0
4. Unrealized capital gains/(losses) net of deferred taxes - General Account			0	(189,292)	1,628,796	1,439,504	1,439,504
5. Unrealized capital gains/(losses) net of deferred taxes - Separate Accounts			0			0	0
6. Capital gains credited/(losses charged) to contract benefits, payments or reserves			0			0	0
7. Basic contribution	1,028,712	104,346	1,133,058	0	5,032	5,032	1,138,090
8. Accumulated balances (Lines 1 through 5 - 6 + 7)	5,215,761	448,386	5,664,147	331,767	1,724,868	2,056,635	7,720,782
9. Maximum reserve	5,054,477	531,720	5,586,197	275,674	91,207	366,881	5,953,078
10. Reserve objective	2,945,855	408,476	3,354,331	275,674	74,098	349,772	3,704,103
11. 20% of (Line 10 - Line 8)	(453,981)	(7,982)	(461,963)	(11,219)	(330,154)	(341,373)	(803,336)
12. Balance before transfers (Lines 8 + 11)	4,761,779	440,404	5,202,183	320,548	1,394,714	1,715,263	6,917,446
13. Transfers			0			0	0
14. Voluntary contribution			0			0	0
15. Adjustment down to maximum/up to zero			0	(44,874)	(1,303,507)	(1,348,381)	(1,348,381)
16. Reserve as of December 31, current year (Lines 12 + 13 + 14 + 15)	4,761,779	440,404	5,202,183	275,674	91,207	366,882	5,569,065

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU

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

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution		Reserve Objective		Maximum Reserve	
							5 Factor	6 Amount (Cols. 4 x 5)	7 Factor	8 Amount (Cols. 4 x 7)	9 Factor	10 Amount (Cols. 4 x 9)
LONG-TERM BONDS												
1.		Exempt Obligations		XXX..	XXX..	0	0.0000	0	0.0000	0	0.0000	
2.1	1	NAIC Designation Category 1.A	39,122,246	XXX..	XXX..	39,122,246	0.0002	7,824	0.0007	27,386	0.0013	
2.2	1	NAIC Designation Category 1.B	8,155,858	XXX..	XXX..	8,155,858	0.0004	3,262	0.0011	8,971	0.0023	
2.3	1	NAIC Designation Category 1.C	17,646,023	XXX..	XXX..	17,646,023	0.0006	10,588	0.0018	31,763	0.0035	
2.4	1	NAIC Designation Category 1.D	16,424,876	XXX..	XXX..	16,424,876	0.0007	11,497	0.0022	36,135	0.0044	
2.5	1	NAIC Designation Category 1.E	22,733,611	XXX..	XXX..	22,733,611	0.0009	20,460	0.0027	61,381	0.0055	
2.6	1	NAIC Designation Category 1.F	72,075,711	XXX..	XXX..	72,075,711	0.0011	79,283	0.0034	245,057	0.0068	
2.7	1	NAIC Designation Category 1.G	69,907,963	XXX..	XXX..	69,907,963	0.0014	97,871	0.0042	293,613	0.0085	
2.8		Subtotal NAIC 1 (2.1+2.2+2.3+2.4+2.5+2.6+2.7)	246,066,288	XXX	XXX	246,066,288	XXX	230,786	XXX	704,306	XXX	
3.1	2	NAIC Designation Category 2.A	68,907,014	XXX..	XXX..	68,907,014	0.0021	144,705	0.0063	434,114	0.0105	
3.2	2	NAIC Designation Category 2.B	109,218,975	XXX..	XXX..	109,218,975	0.0025	273,047	0.0076	830,064	0.0127	
3.3	2	NAIC Designation Category 2.C	40,462,148	XXX..	XXX..	40,462,148	0.0036	145,664	0.0108	436,991	0.0180	
3.4		Subtotal NAIC 2 (3.1+3.2+3.3)	218,588,137	XXX	XXX	218,588,137	XXX	563,416	XXX	1,701,170	XXX	
4.1	3	NAIC Designation Category 3.A	3,018,742	XXX..	XXX..	3,018,742	0.0069	20,829	0.0183	55,243	0.0262	
4.2	3	NAIC Designation Category 3.B	2,132,696	XXX..	XXX..	2,132,696	0.0099	21,114	0.0264	56,303	0.0377	
4.3	3	NAIC Designation Category 3.C	1,826,124	XXX..	XXX..	1,826,124	0.0131	23,922	0.0350	63,914	0.0500	
4.4		Subtotal NAIC 3 (4.1+4.2+4.3)	6,977,562	XXX	XXX	6,977,562	XXX	65,865	XXX	175,460	XXX	
5.1	4	NAIC Designation Category 4.A	2,007,294	XXX..	XXX..	2,007,294	0.0184	36,934	0.0430	86,314	0.0615	
5.2	4	NAIC Designation Category 4.B	2,903,473	XXX..	XXX..	2,903,473	0.0238	69,103	0.0555	161,143	0.0793	
5.3	4	NAIC Designation Category 4.C		XXX..	XXX..	0	0.0310	0	0.0724	0	0.1034	
5.4		Subtotal NAIC 4 (5.1+5.2+5.3)	4,910,767	XXX	XXX	4,910,767	XXX	106,037	XXX	247,456	XXX	
6.1	5	NAIC Designation Category 5.A	0	XXX..	XXX..	0	0.0472	0	0.0846	0	0.1410	
6.2	5	NAIC Designation Category 5.B	250,000	XXX..	XXX..	250,000	0.0663	16,575	0.1188	29,700	0.1980	
6.3	5	NAIC Designation Category 5.C	503,083	XXX..	XXX..	503,083	0.0836	42,058	0.1498	75,362	0.2496	
6.4		Subtotal NAIC 5 (6.1+6.2+6.3)	753,083	XXX	XXX	753,083	XXX	58,633	XXX	105,062	XXX	
7.	6	NAIC 6		XXX..	XXX..	0	0.0000	0	0.2370	0	0.2370	
8.		Total Unrated Multi-class Securities Acquired by Conversion		XXX..	XXX..	0	XXX	0	XXX	0	0	
9.		Total Long-Term Bonds (1+2.8+3.4+4.4+5.4+6.4+7+8)	477,295,837	XXX	XXX	477,295,837	XXX	1,024,737	XXX	2,933,455	XXX	
		PREFERRED STOCKS										
10.	1	Highest Quality	3,750,000	XXX..	XXX..	3,750,000	0.0005	1,875	0.0016	6,000	0.0033	
11.	2	High Quality	1,000,000	XXX..	XXX..	1,000,000	0.0021	2,100	0.0064	6,400	0.0106	
12.	3	Medium Quality		XXX..	XXX..	0	0.0099	0	0.0263	0	0.0376	
13.	4	Low Quality		XXX..	XXX..	0	0.0245	0	0.0572	0	0.0817	
14.	5	Lower Quality		XXX..	XXX..	0	0.0630	0	0.1128	0	0.1880	
15.	6	In or Near Default		XXX..	XXX..	0	0.0000	0	0.2370	0	0.2370	
16.		Affiliated Life with AVR		XXX..	XXX..	0	0.0000	0	0.0000	0	0.0000	
17.		Total Preferred Stocks (Sum of Lines 10 through 16)	4,750,000	XXX	XXX	4,750,000	XXX	3,975	XXX	12,400	XXX	
											22,975	

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU

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

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution		Reserve Objective		Maximum Reserve	
							5 Factor	6 Amount (Cols. 4 x 5)	7 Factor	8 Amount (Cols. 4 x 7)	9 Factor	10 Amount (Cols. 4 x 9)
18.		SHORT-TERM BONDS										
19.1	1	Exempt Obligations		XXX..	XXX..	0	0.0000	0	0.0000	0	0.0000	0
19.1	1	NAIC Designation Category 1.A		XXX..	XXX..	0	0.0002	0	0.0007	0	0.0013	0
19.2	1	NAIC Designation Category 1.B		XXX..	XXX..	0	0.0004	0	0.0011	0	0.0023	0
19.3	1	NAIC Designation Category 1.C		XXX..	XXX..	0	0.0006	0	0.0018	0	0.0035	0
19.4	1	NAIC Designation Category 1.D		XXX..	XXX..	0	0.0007	0	0.0022	0	0.0044	0
19.5	1	NAIC Designation Category 1.E		XXX..	XXX..	0	0.0009	0	0.0027	0	0.0055	0
19.6	1	NAIC Designation Category 1.F		XXX..	XXX..	0	0.0011	0	0.0034	0	0.0068	0
19.7	1	NAIC Designation Category 1.G		XXX..	XXX..	0	0.0014	0	0.0042	0	0.0085	0
19.8		Subtotal NAIC 1 (19.1+19.2+19.3+19.4+19.5+19.6+19.7)	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
20.1	2	NAIC Designation Category 2.A		XXX..	XXX..	0	0.0021	0	0.0063	0	0.0105	0
20.2	2	NAIC Designation Category 2.B		XXX..	XXX..	0	0.0025	0	0.0076	0	0.0127	0
20.3	2	NAIC Designation Category 2.C		XXX..	XXX..	0	0.0036	0	0.0108	0	0.0180	0
20.4		Subtotal NAIC 2 (20.1+20.2+20.3)	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
21.1	3	NAIC Designation Category 3.A		XXX..	XXX..	0	0.0069	0	0.0183	0	0.0262	0
21.2	3	NAIC Designation Category 3.B		XXX..	XXX..	0	0.0099	0	0.0264	0	0.0377	0
21.3	3	NAIC Designation Category 3.C		XXX..	XXX..	0	0.0131	0	0.0350	0	0.0500	0
21.4		Subtotal NAIC 3 (21.1+21.2+21.3)	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
22.1	4	NAIC Designation Category 4.A		XXX..	XXX..	0	0.0184	0	0.0430	0	0.0615	0
22.2	4	NAIC Designation Category 4.B		XXX..	XXX..	0	0.0238	0	0.0555	0	0.0793	0
22.3	4	NAIC Designation Category 4.C		XXX..	XXX..	0	0.0310	0	0.0724	0	0.1034	0
22.4		Subtotal NAIC 4 (22.1+22.2+22.3)	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
23.1	5	NAIC Designation Category 5.A		XXX..	XXX..	0	0.0472	0	0.0846	0	0.1410	0
23.2	5	NAIC Designation Category 5.B		XXX..	XXX..	0	0.0663	0	0.1188	0	0.1980	0
23.3	5	NAIC Designation Category 5.C		XXX..	XXX..	0	0.0836	0	0.1498	0	0.2496	0
23.4		Subtotal NAIC 5 (23.1+23.2+23.3)	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
24.	6	NAIC 6		XXX..	XXX..	0	0.0000	0	0.2370	0	0.2370	0
25.		Total Short-Term Bonds (18+19.8+20.4+21.4+22.4+23.4+24)	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
		DERIVATIVE INSTRUMENTS										
26.		Exchange Traded		XXX..	XXX..	0	0.0005	0	0.0016	0	0.0033	0
27.	1	Highest Quality		XXX..	XXX..	0	0.0005	0	0.0016	0	0.0033	0
28.	2	High Quality		XXX..	XXX..	0	0.0021	0	0.0064	0	0.0106	0
29.	3	Medium Quality		XXX..	XXX..	0	0.0099	0	0.0263	0	0.0376	0
30.	4	Low Quality		XXX..	XXX..	0	0.0245	0	0.0572	0	0.0817	0
31.	5	Lower Quality		XXX..	XXX..	0	0.0630	0	0.1128	0	0.1880	0
32.	6	In or Near Default		XXX..	XXX..	0	0.0000	0	0.2370	0	0.2370	0
33.		Total Derivative Instruments	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
34.		Total (Lines 9 + 17 + 25 + 33)	482,045,837	XXX	XXX	482,045,837	XXX	1,028,712	XXX	2,945,855	XXX	5,054,477

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU

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

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution		Reserve Objective		Maximum Reserve	
							5 Factor	6 Amount (Cols. 4 x 5)	7 Factor	8 Amount (Cols. 4 x 7)	9 Factor	10 Amount (Cols. 4 x 9)
32		MORTGAGE LOANS										
		In Good Standing:										
35.		Farm Mortgages - CM1 - Highest Quality .....		....XXX.....		0	0.0011	0	0.0057	0	0.0074	0
36.		Farm Mortgages - CM2 - High Quality .....		....XXX.....		0	0.0040	0	0.0114	0	0.0149	0
37.		Farm Mortgages - CM3 - Medium Quality .....		....XXX.....		0	0.0069	0	0.0200	0	0.0257	0
38.		Farm Mortgages - CM4 - Low Medium Quality .....		....XXX.....		0	0.0120	0	0.0343	0	0.0428	0
39.		Farm Mortgages - CM5 - Low Quality .....		....XXX.....		0	0.0183	0	0.0486	0	0.0628	0
40.		Residential Mortgages - Insured or Guaranteed .....		....XXX.....		0	0.0003	0	0.0007	0	0.0011	0
41.		Residential Mortgages - All Other .....		....XXX.....		0	0.0015	0	0.0034	0	0.0046	0
42.		Commercial Mortgages - Insured or Guaranteed .....		....XXX.....		0	0.0003	0	0.0007	0	0.0011	0
43.		Commercial Mortgages - All Other - CM1 - Highest Quality	43,309,673	....XXX.....	43,309,673	0.0011	47,641	0.0057	246,865	0.0074	320,492	
44.		Commercial Mortgages - All Other - CM2 - High Quality	14,176,396	....XXX.....	14,176,396	0.0040	56,706	0.0114	161,611	0.0149	211,228	
45.		Commercial Mortgages - All Other - CM3 - Medium Quality .....		....XXX.....		0	0.0069	0	0.0200	0	0.0257	0
46.		Commercial Mortgages - All Other - CM4 - Low Medium Quality .....		....XXX.....		0	0.0120	0	0.0343	0	0.0428	0
47.		Commercial Mortgages - All Other - CM5 - Low Quality .....		....XXX.....		0	0.0183	0	0.0486	0	0.0628	0
Overdue, Not in Process:												
48.		Farm Mortgages .....		....XXX.....		0	0.0480	0	0.0868	0	0.1371	0
49.		Residential Mortgages - Insured or Guaranteed .....		....XXX.....		0	0.0006	0	0.0014	0	0.0023	0
50.		Residential Mortgages - All Other .....		....XXX.....		0	0.0029	0	0.0066	0	0.0103	0
51.		Commercial Mortgages - Insured or Guaranteed .....		....XXX.....		0	0.0006	0	0.0014	0	0.0023	0
52.		Commercial Mortgages - All Other .....		....XXX.....		0	0.0480	0	0.0868	0	0.1371	0
In Process of Foreclosure:												
53.		Farm Mortgages .....		....XXX.....		0	0.0000	0	0.1942	0	0.1942	0
54.		Residential Mortgages - Insured or Guaranteed .....		....XXX.....		0	0.0000	0	0.0046	0	0.0046	0
55.		Residential Mortgages - All Other .....		....XXX.....		0	0.0000	0	0.0149	0	0.0149	0
56.		Commercial Mortgages - Insured or Guaranteed .....		....XXX.....		0	0.0000	0	0.0046	0	0.0046	0
57.		Commercial Mortgages - All Other .....		....XXX.....		0	0.0000	0	0.1942	0	0.1942	0
58.		Total Schedule B Mortgages (Sum of Lines 35 through 57)	57,486,069	0	XXX	57,486,069	XXX	104,346	XXX	408,476	XXX	531,720
59.		Schedule DA Mortgages			XXX	0	0.0034	0	0.0114	0	0.0149	0
60.		Total Mortgage Loans on Real Estate (Lines 58 + 59)	57,486,069	0	XXX	57,486,069	XXX	104,346	XXX	408,476	XXX	531,720

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU

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

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution		Reserve Objective		Maximum Reserve	
							5 Factor	6 Amount (Cols. 4 x 5)	7 Factor	8 Amount (Cols. 4 x 7)	9 Factor	10 Amount (Cols. 4 x 9)
33		COMMON STOCK	1,744,773	XXX	XXX	1,744,773	0.0000	0	0.1580 (a)	275,674	0.1580 (a)	275,674
		Unaffiliated - Public	1,744,773	XXX	XXX	0	0.0000	0	0.1945	0	0.1945	0
		Unaffiliated - Private		XXX	XXX	0	0.0000	0	0.0061	0	0.0097	0
		Federal Home Loan Bank		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
		Affiliated - Life with AVR		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
		Affiliated - Investment Subsidiary:										
		Fixed Income - Exempt Obligations				0	XXX		XXX		XXX	
		Fixed Income - Highest Quality				0	XXX		XXX		XXX	
		Fixed Income - High Quality				0	XXX		XXX		XXX	
		Fixed Income - Medium Quality				0	XXX		XXX		XXX	
		Fixed Income - Low Quality				0	XXX		XXX		XXX	
		Fixed Income - Lower Quality				0	XXX		XXX		XXX	
		Fixed Income - In/Near Default				0	XXX		XXX		XXX	
		Unaffiliated Common Stock - Public				0	0.0000	0	0.1580 (a)	0	0.1580 (a)	0
		Unaffiliated Common Stock - Private				0	0.0000	0	0.1945	0	0.1945	0
		Real Estate				0	(b)	0	(b)	0	(b)	0
		Affiliated - Certain Other (See SVO Purposes and Procedures Manual)		XXX	XXX	0	0.0000	0	0.1580	0	0.1580	0
		Affiliated - All Other		XXX	XXX	0	0.0000	0	0.1945	0	0.1945	0
		Total Common Stock (Sum of Lines 1 through 16)	1,744,773	0	0	1,744,773	XXX	0	XXX	275,674	XXX	275,674
		REAL ESTATE										
		Home Office Property (General Account only)	433,860			433,860	0.0000	0	0.0912	39,568	0.0912	39,568
		Investment Properties	202,060			202,060	0.0000	0	0.0912	18,428	0.0912	18,428
		Properties Acquired in Satisfaction of Debt				0	0.0000	0	0.1337	0	0.1337	0
		Total Real Estate (Sum of Lines 18 through 20)	635,920	0	0	635,920	XXX	0	XXX	57,996	XXX	57,996
22.	1	OTHER INVESTED ASSETS INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF BONDS										
		Exempt Obligations		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
		Highest Quality	10,063,973	XXX	XXX	10,063,973	0.0005	5,032	0.0016	16,102	0.0033	33,211
		High Quality		XXX	XXX	0	0.0021	0	0.0064	0	0.0106	0
		Medium Quality		XXX	XXX	0	0.0099	0	0.0263	0	0.0376	0
		Low Quality		XXX	XXX	0	0.0245	0	0.0572	0	0.0817	0
		Lower Quality		XXX	XXX	0	0.0630	0	0.1128	0	0.1880	0
		In or Near Default		XXX	XXX	0	0.0000	0	0.2370	0	0.2370	0
		Total with Bond Characteristics (Sum of Lines 22 through 28)	10,063,973	XXX	XXX	10,063,973	XXX	5,032	XXX	16,102	XXX	33,211

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

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution		Reserve Objective		Maximum Reserve	
							5 Factor	6 Amount (Cols. 4 x 5)	7 Factor	8 Amount (Cols. 4 x 7)	9 Factor	10 Amount (Cols. 4 x 9)
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF PREFERRED STOCKS										
30.	1	Highest Quality		XXX	XXX	0	0.0005	0	0.0016	0	0.0033	0
31.	2	High Quality		XXX	XXX	0	0.0021	0	0.0064	0	0.0106	0
32.	3	Medium Quality		XXX	XXX	0	0.0099	0	0.0263	0	0.0376	0
33.	4	Low Quality		XXX	XXX	0	0.0245	0	0.0572	0	0.0817	0
34.	5	Lower Quality.....		XXX	XXX	0	0.0630	0	0.1128	0	0.1880	0
35.	6	In or Near Default		XXX	XXX	0	0.0000	0	0.2370	0	0.2370	0
36.		Affiliated Life with AVR		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
37.		Total with Preferred Stock Characteristics (Sum of Lines 30 through 36)	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF MORTGAGE LOANS										
		In Good Standing Affiliated:										
38.		Mortgages - CM1 - Highest Quality		XXX	XXX	0	0.0011	0	0.0057	0	0.0074	0
39.		Mortgages - CM2 - High Quality		XXX	XXX	0	0.0040	0	0.0114	0	0.0149	0
40.		Mortgages - CM3 - Medium Quality		XXX	XXX	0	0.0069	0	0.0200	0	0.0257	0
41.		Mortgages - CM4 - Low Medium Quality		XXX	XXX	0	0.0120	0	0.0343	0	0.0428	0
42.		Mortgages - CM5 - Low Quality		XXX	XXX	0	0.0183	0	0.0486	0	0.0628	0
43.		Residential Mortgages - Insured or Guaranteed		XXX	XXX	0	0.0003	0	0.0007	0	0.0011	0
44.		Residential Mortgages - All Other		XXX	XXX	0	0.0015	0	0.0034	0	0.0046	0
45.		Commercial Mortgages - Insured or Guaranteed		XXX	XXX	0	0.0003	0	0.0007	0	0.0011	0
		Overdue, Not in Process Affiliated:										
46.		Farm Mortgages		XXX	XXX	0	0.0480	0	0.0868	0	0.1371	0
47.		Residential Mortgages - Insured or Guaranteed		XXX	XXX	0	0.0006	0	0.0014	0	0.0023	0
48.		Residential Mortgages - All Other		XXX	XXX	0	0.0029	0	0.0066	0	0.0103	0
49.		Commercial Mortgages - Insured or Guaranteed		XXX	XXX	0	0.0006	0	0.0014	0	0.0023	0
50.		Commercial Mortgages - All Other		XXX	XXX	0	0.0480	0	0.0868	0	0.1371	0
		In Process of Foreclosure Affiliated:										
51.		Farm Mortgages		XXX	XXX	0	0.0000	0	0.1942	0	0.1942	0
52.		Residential Mortgages - Insured or Guaranteed		XXX	XXX	0	0.0000	0	0.0046	0	0.0046	0
53.		Residential Mortgages - All Other		XXX	XXX	0	0.0000	0	0.0149	0	0.0149	0
54.		Commercial Mortgages - Insured or Guaranteed		XXX	XXX	0	0.0000	0	0.0046	0	0.0046	0
55.		Commercial Mortgages - All Other		XXX	XXX	0	0.0000	0	0.1942	0	0.1942	0
56.		Total Affiliated (Sum of Lines 38 through 55)	0	0	XXX	0	XXX	0	XXX	0	XXX	0
57.		Unaffiliated - In Good Standing With Covenants		XXX	XXX	0	(c)	0	(c)	0	(c)	0
58.		Unaffiliated - In Good Standing Defeased With Government Securities		XXX	XXX	0	0.0011	0	0.0057	0	0.0074	0
59.		Unaffiliated - In Good Standing Primarily Senior		XXX	XXX	0	0.0040	0	0.0114	0	0.0149	0
60.		Unaffiliated - In Good Standing All Other		XXX	XXX	0	0.0069	0	0.0200	0	0.0257	0
61.		Unaffiliated - Overdue, Not in Process		XXX	XXX	0	0.0480	0	0.0868	0	0.1371	0
62.		Unaffiliated - In Process of Foreclosure		XXX	XXX	0	0.0000	0	0.1942	0	0.1942	0
63.		Total Unaffiliated (Sum of Lines 57 through 62)	0	0	XXX	0	XXX	0	XXX	0	XXX	0
64.		Total with Mortgage Loan Characteristics (Lines 56 + 63)	0	0	XXX	0	XXX	0	XXX	0	XXX	0

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

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution		Reserve Objective		Maximum Reserve	
							5 Factor	6 Amount (Cols. 4 x 5)	7 Factor	8 Amount (Cols. 4 x 7)	9 Factor	10 Amount (Cols. 4 x 9)
65.		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF COMMON STOCK										
66.		Unaffiliated Public		XXX	XXX	0	0.0000	0	0.1580 (a)	0	0.1580 (a)	
67.		Unaffiliated Private		XXX	XXX	0	0.0000	0	0.1945	0	0.1945	
68.		Affiliated Life with AVR		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	
69.		Affiliated Certain Other (See SVO Purposes & Procedures Manual)		XXX	XXX	0	0.0000	0	0.1580	0	0.1580	
70.		Affiliated Other - All Other		XXX	XXX	0	0.0000	0	0.1945	0	0.1945	
		Total with Common Stock Characteristics (Sum of Lines 65 through 69)	0	XXX	XXX	0	XXX	0	XXX	0	XXX	
71.		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF REAL ESTATE										
72.		Home Office Property (General Account only)				0	0.0000	0	0.0912	0	0.0912	
73.		Investment Properties				0	0.0000	0	0.0912	0	0.0912	
74.		Properties Acquired in Satisfaction of Debt				0	0.0000	0	0.1337	0	0.1337	
		Total with Real Estate Characteristics (Sum of Lines 71 through 73)	0	0	0	0	XXX	0	XXX	0	XXX	
75.		LOW INCOME HOUSING TAX CREDIT INVESTMENTS										
76.		Guaranteed Federal Low Income Housing Tax Credit	0			0	0.0003	0	0.0006	0	0.0010	
77.		Non-guaranteed Federal Low Income Housing Tax Credit	0			0	0.0063	0	0.0120	0	0.0190	
78.		Guaranteed State Low Income Housing Tax Credit	0			0	0.0003	0	0.0006	0	0.0010	
79.		Non-guaranteed State Low Income Housing Tax Credit	0			0	0.0063	0	0.0120	0	0.0190	
80.		All Other Low Income Housing Tax Credit	0			0	0.0273	0	0.0600	0	0.0975	
		Total LIHTC (Sum of Lines 75 through 79)	0	0	0	0	XXX	0	XXX	0	XXX	
81.		RESIDUAL TRANCES OR INTERESTS										
82.		Fixed Income Instruments - Unaffiliated	0	XXX	XXX	0	0.0000	0	0.1580	0	0.1580	
83.		Fixed Income Instruments - Affiliated	0	XXX	XXX	0	0.0000	0	0.1580	0	0.1580	
84.		Common Stock - Unaffiliated	0	XXX	XXX	0	0.0000	0	0.1580	0	0.1580	
85.		Common Stock - Affiliated	0	XXX	XXX	0	0.0000	0	0.1580	0	0.1580	
86.		Preferred Stock - Unaffiliated	0	XXX	XXX	0	0.0000	0	0.1580	0	0.1580	
87.		Preferred Stock - Affiliated	0	XXX	XXX	0	0.0000	0	0.1580	0	0.1580	
88.		Real Estate - Unaffiliated	0			0	0.0000	0	0.1580	0	0.1580	
89.		Real Estate - Affiliated	0			0	0.0000	0	0.1580	0	0.1580	
90.		Mortgage Loans - Unaffiliated	0	XXX	XXX	0	0.0000	0	0.1580	0	0.1580	
91.		Mortgage Loans - Affiliated	0	XXX	XXX	0	0.0000	0	0.1580	0	0.1580	
92.		Other - Unaffiliated	0	XXX	XXX	0	0.0000	0	0.1580	0	0.1580	
93.		Other - Affiliated	0	XXX	XXX	0	0.0000	0	0.1580	0	0.1580	
		Total Residual Trances or Interests (Sum of Lines 81 through 92)	0	0	0	0	XXX	0	XXX	0	XXX	
94.		ALL OTHER INVESTMENTS										
95.		NAIC 1 Working Capital Finance Investments		XXX		0	0.0000	0	0.0042	0	0.0042	
96.		NAIC 2 Working Capital Finance Investments		XXX		0	0.0000	0	0.0137	0	0.0137	
97.		Other Invested Assets - Schedule BA		XXX		0	0.0000	0	0.1580	0	0.1580	
98.		Other Short-Term Invested Assets - Schedule DA		XXX		0	0.0000	0	0.1580	0	0.1580	
		Total All Other (Sum of Lines 94, 95, 96 and 97)	0	XXX	0	0	XXX	0	XXX	0	XXX	
99.		Total Other Invested Assets - Schedules BA & DA (Sum of Lines 29, 37, 64, 70, 74, 80, 93 and 98)	10,063,973	0	0	10,063,973	XXX	5,032	XXX	16,102	XXX	
											33,211	

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

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

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

Asset Valuation Reserve - Replications (Synthetic) Assets

N O N E

Schedule F - Claims

N O N E

Schedule H - Part 1 - Analysis of Underwriting Operations

N O N E

Schedule H - Part 2 - Reserves and Liabilities

N O N E

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

N O N E

Schedule H - Part 4 - Reinsurance

N O N E

Schedule H - Part 5 - Health Claims

N O N E

Schedule S - Part 1 - Section 1

N O N E

Schedule S - Part 1 - Section 2

N O N E

Schedule S - Part 2

N O N E

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU

SCHEDULE S - PART 3 - SECTION 1

Reinsurance Ceded Life Insurance, Annuities, Deposit Funds and Other Liabilities Without Life or Disability Contingencies, and Related Benefits Listed by Reinsuring Company as of December 31, Current Year

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domi- ciliary Juris- diction	6 Type of Reinsurance Ceded	7 Type of Business Ceded	8 Amount in Force at End of Year	Reserve Credit Taken		11 Premiums	Outstanding Surplus Relief		14 Modified Coinsurance Reserve	15 Funds Withheld Under Coinsurance
								9 Current Year	10 Prior Year		12 Current Year	13 Prior Year		
0399999.	Total General Account - Authorized U.S. Affiliates						0	0	0	0	0	0	0	0
0699999.	Total General Account - Authorized Non-U.S. Affiliates						0	0	0	0	0	0	0	0
0799999.	Total General Account - Authorized Affiliates						0	0	0	0	0	0	0	0
... 88099	... 75-1608507 .. 07/01/2005 . OPTIMUM REINSURANCE CO.	TX.....	... CO/I.....	... XXXL	6,712,365				38,131					
... 88099	... 75-1608507 .. 07/01/2005 . OPTIMUM REINSURANCE CO.	TX.....	... YRT/I.....	... XXXL	3,040,635				6,636					
0899999.	General Account - Authorized U.S. Non-Affiliates						9,753,000	0	0	44,767	0	0	0	0
1099999.	Total General Account - Authorized Non-Affiliates						9,753,000	0	0	44,767	0	0	0	0
1199999.	Total General Account Authorized						9,753,000	0	0	44,767	0	0	0	0
1499999.	Total General Account - Unauthorized U.S. Affiliates						0	0	0	0	0	0	0	0
1799999.	Total General Account - Unauthorized Non-U.S. Affiliates						0	0	0	0	0	0	0	0
1899999.	Total General Account - Unauthorized Affiliates						0	0	0	0	0	0	0	0
2199999.	Total General Account - Unauthorized Non-Affiliates						0	0	0	0	0	0	0	0
2299999.	Total General Account Unauthorized						0	0	0	0	0	0	0	0
2599999.	Total General Account - Certified U.S. Affiliates						0	0	0	0	0	0	0	0
2899999.	Total General Account - Certified Non-U.S. Affiliates						0	0	0	0	0	0	0	0
2999999.	Total General Account - Certified Affiliates						0	0	0	0	0	0	0	0
3299999.	Total General Account - Certified Non-Affiliates						0	0	0	0	0	0	0	0
3399999.	Total General Account Certified						0	0	0	0	0	0	0	0
3699999.	Total General Account - Reciprocal Jurisdiction U.S. Affiliates						0	0	0	0	0	0	0	0
3999999.	Total General Account - Reciprocal Jurisdiction Non-U.S. Affiliates						0	0	0	0	0	0	0	0
4099999.	Total General Account - Reciprocal Jurisdiction Affiliates						0	0	0	0	0	0	0	0
4399999.	Total General Account - Reciprocal Jurisdiction Non-Affiliates						0	0	0	0	0	0	0	0
4499999.	Total General Account Reciprocal Jurisdiction						0	0	0	0	0	0	0	0
4599999.	Total General Account Authorized, Unauthorized, Reciprocal Jurisdiction and Certified						9,753,000	0	0	44,767	0	0	0	0
4899999.	Total Separate Accounts - Authorized U.S. Affiliates						0	0	0	0	0	0	0	0
5199999.	Total Separate Accounts - Authorized Non-U.S. Affiliates						0	0	0	0	0	0	0	0
5299999.	Total Separate Accounts - Authorized Affiliates						0	0	0	0	0	0	0	0
5599999.	Total Separate Accounts - Authorized Non-Affiliates						0	0	0	0	0	0	0	0
5699999.	Total Separate Accounts Authorized						0	0	0	0	0	0	0	0
5999999.	Total Separate Accounts - Unauthorized U.S. Affiliates						0	0	0	0	0	0	0	0
6299999.	Total Separate Accounts - Unauthorized Non-U.S. Affiliates						0	0	0	0	0	0	0	0
6399999.	Total Separate Accounts - Unauthorized Affiliates						0	0	0	0	0	0	0	0
6699999.	Total Separate Accounts - Unauthorized Non-Affiliates						0	0	0	0	0	0	0	0
6799999.	Total Separate Accounts Unauthorized						0	0	0	0	0	0	0	0
7099999.	Total Separate Accounts - Certified U.S. Affiliates						0	0	0	0	0	0	0	0
7399999.	Total Separate Accounts - Certified Non-U.S. Affiliates						0	0	0	0	0	0	0	0
7499999.	Total Separate Accounts - Certified Affiliates						0	0	0	0	0	0	0	0
7799999.	Total Separate Accounts - Certified Non-Affiliates						0	0	0	0	0	0	0	0
7899999.	Total Separate Accounts Certified						0	0	0	0	0	0	0	0
8199999.	Total Separate Accounts - Reciprocal Jurisdiction U.S. Affiliates						0	0	0	0	0	0	0	0
8499999.	Total Separate Accounts - Reciprocal Jurisdiction Non-U.S. Affiliates						0	0	0	0	0	0	0	0
8599999.	Total Separate Accounts - Reciprocal Jurisdiction Affiliates						0	0	0	0	0	0	0	0
8899999.	Total Separate Accounts - Reciprocal Jurisdiction Non-Affiliates						0	0	0	0	0	0	0	0
8999999.	Total Separate Accounts Reciprocal Jurisdiction						0	0	0	0	0	0	0	0
9099999.	Total Separate Accounts Authorized, Unauthorized, Reciprocal Jurisdiction and Certified						0	0	0	0	0	0	0	0
9199999.	Total U.S. (Sum of 0399999, 0899999, 1499999, 1999999, 2599999, 3099999, 3699999, 4199999, 4899999, 5399999, 5999999, 6499999, 7099999, 7599999, 8199999 and 8699999)						9,753,000	0	0	44,767	0	0	0	0
9299999.	Total Non-U.S. (Sum of 0699999, 0999999, 1799999, 2099999, 2899999, 3199999, 3999999, 4299999, 5199999, 5499999, 6299999, 6599999, 7399999, 7699999, 8499999 and 8799999)						0	0	0	0	0	0	0	0
9999999 - Totals							9,753,000	0	0	44,767	0	0	0	0

Schedule S - Part 3 - Section 2

N O N E

Schedule S - Part 4

N O N E

Schedule S - Part 4 - Bank Footnote

N O N E

Schedule S - Part 5

N O N E

Schedule S - Part 5 - Bank Footnote

N O N E

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU

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

	1 2024	2 2023	3 2022	4 2021	5 2020
A. OPERATIONS ITEMS					
1. Premiums and annuity considerations for life and accident and health contracts	45	41	48	34	37
2. Commissions and reinsurance expense allowances	0	0	0	0	0
3. Contract claims	0	0	0	0	0
4. Surrender benefits and withdrawals for life contracts					
5. Dividends to policyholders and refunds to members					
6. Reserve adjustments on reinsurance ceded	0	0	0	0	0
7. Increase in aggregate reserve for life and accident and health contracts					
B. BALANCE SHEET ITEMS					
8. Premiums and annuity considerations for life and accident and health contracts deferred and uncollected	0	0	0	0	0
9. Aggregate reserves for life and accident and health contracts	0	0	0	0	0
10. Liability for deposit-type contracts					
11. Contract claims unpaid	0	0	0	0	0
12. Amounts recoverable on reinsurance	0	0	0	0	0
13. Experience rating refunds due or unpaid					
14. Policyholders' dividends and refunds to members (not included in Line 10)					
15. Commissions and reinsurance expense allowances due					
16. Unauthorized reinsurance offset	0	0	0	0	0
17. Offset for reinsurance with Certified Reinsurers		0	0	0	0
C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)					
18. Funds deposited by and withheld from (F)	0	0	0	0	0
19. Letters of credit (L)	0	0	0	0	0
20. Trust agreements (T)	0	0	0	0	0
21. Other (O)	0	0	0	0	0
D. REINSURANCE WITH CERTIFIED REINSURERS (DEPOSITS BY AND FUNDS WITHHELD FROM)					
22. Multiple Beneficiary Trust	0	0	0	0	0
23. Funds deposited by and withheld from (F)	0	0	0	0	0
24. Letters of credit (L)	0	0	0	0	0
25. Trust agreements (T)	0	0	0	0	0
26. Other (O)		0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU

SCHEDULE S - PART 7

Restatement of Balance Sheet to Identify Net Credit for Ceded Reinsurance

	1 As Reported (net of ceded)	2 Restatement Adjustments	3 Restated (gross of ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12)	581,553,531		581,553,531
2. Reinsurance (Line 16)	0	0	0
3. Premiums and considerations (Line 15)	98,853	0	98,853
4. Net credit for ceded reinsurance	XXX	38,088	38,088
5. All other admitted assets (balance)	5,803,579		5,803,579
6. Total assets excluding Separate Accounts (Line 26)	587,455,963	38,088	587,494,051
7. Separate Account assets (Line 27)	0		0
8. Total assets (Line 28)	587,455,963	38,088	587,494,051
LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
9. Contract reserves (Lines 1 and 2)	501,785,847	38,088	501,823,935
10. Liability for deposit-type contracts (Line 3)	16,274,734		16,274,734
11. Claim reserves (Line 4)	300,000	0	300,000
12. Policyholder dividends/member refunds/reserves (Lines 5 through 7)	400,000		400,000
13. Premium & annuity considerations received in advance (Line 8)	44,106		44,106
14. Other contract liabilities (Line 9)	370,171		370,171
15. Reinsurance in unauthorized companies (Line 24.02 minus inset amount)	0	0	0
16. Funds held under reinsurance treaties with unauthorized reinsurers (Line 24.03 minus inset amount)	0		0
17. Reinsurance with Certified Reinsurers (Line 24.02 inset amount)	0		0
18. Funds held under reinsurance treaties with Certified Reinsurers (Line 24.03 inset amount)			0
19. All other liabilities (balance)	13,862,614		13,862,614
20. Total liabilities excluding Separate Accounts (Line 26)	533,037,472	38,088	533,075,560
21. Separate Account liabilities (Line 27)			0
22. Total liabilities (Line 28)	533,037,472	38,088	533,075,560
23. Capital & surplus (Line 38)	54,418,491	XXX	54,418,491
24. Total liabilities, capital & surplus (Line 39)	587,455,963	38,088	587,494,051
NET CREDIT FOR CEDED REINSURANCE			
25. Contract reserves	38,088		
26. Claim reserves	0		
27. Policyholder dividends/reserves	0		
28. Premium & annuity considerations received in advance	0		
29. Liability for deposit-type contracts	0		
30. Other contract liabilities	0		
31. Reinsurance ceded assets	0		
32. Other ceded reinsurance recoverables	0		
33. Total ceded reinsurance recoverables	38,088		
34. Premiums and considerations	0		
35. Reinsurance in unauthorized companies	0		
36. Funds held under reinsurance treaties with unauthorized reinsurers	0		
37. Reinsurance with Certified Reinsurers	0		
38. Funds held under reinsurance treaties with Certified Reinsurers	0		
39. Other ceded reinsurance payables/offsets	0		
40. Total ceded reinsurance payable/offsets	0		
41. Total net credit for ceded reinsurance	38,088		

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU

SCHEDULE T - PART 2
INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

States, Etc.		Direct Business Only					
		1 Life (Group and Individual)	2 Annuities (Group and Individual)	3 Disability Income (Group and Individual)	4 Long-Term Care (Group and Individual)	5 Deposit-Type Contracts	6 Totals
1. Alabama	AL	0	0			0	0
2. Alaska	AK	0	0			0	0
3. Arizona	AZ	23	500			0	523
4. Arkansas	AR	0	0			0	0
5. California	CA	0	0			0	0
6. Colorado	CO	0	361,000			0	361,000
7. Connecticut	CT	20,987	103,366			0	124,353
8. Delaware	DE	0	0			0	0
9. District of Columbia	DC	0	0			0	0
10. Florida	FL	9,412	557,738			0	567,150
11. Georgia	GA	12	100,000			0	100,012
12. Hawaii	HI	0	0			0	0
13. Idaho	ID	0	0			0	0
14. Illinois	IL	65,781	12,746,202			0	12,811,983
15. Indiana	IN	11,696	267,298			0	278,994
16. Iowa	IA	1,409	2,758,335			0	2,759,744
17. Kansas	KS	0	0			0	0
18. Kentucky	KY	0	241,947			0	241,947
19. Louisiana	LA	0	0			0	0
20. Maine	ME	0	0			0	0
21. Maryland	MD	82	1,000			0	1,082
22. Massachusetts	MA	3,436	100			0	3,536
23. Michigan	MI	38,044	829,409			0	867,453
24. Minnesota	MN	6,650	4,036,846			0	4,043,496
25. Mississippi	MS	0	0			0	0
26. Missouri	MO	503	288,991			0	289,494
27. Montana	MT	0	0			0	0
28. Nebraska	NE	2,100	290,868			0	292,968
29. Nevada	NV	266	0			0	266
30. New Hampshire	NH	0	0			0	0
31. New Jersey	NJ	68,353	452,280			0	520,633
32. New Mexico	NM	0	0			0	0
33. New York	NY	56,923	807,610			0	864,533
34. North Carolina	NC	0	19,915			0	19,915
35. North Dakota	ND	0	0			0	0
36. Ohio	OH	266,758	4,344,780			0	4,611,537
37. Oklahoma	OK	0	0			0	0
38. Oregon	OR	0	0			0	0
39. Pennsylvania	PA	797,001	6,349,606			0	7,146,607
40. Rhode Island	RI	0	0			0	0
41. South Carolina	SC	0	10,133			0	10,133
42. South Dakota	SD	0	0			0	0
43. Tennessee	TN	0	66,699			0	66,699
44. Texas	TX	144	5,658			0	5,802
45. Utah	UT	0	0			0	0
46. Vermont	VT	0	0			0	0
47. Virginia	VA	6,203	26,800			0	33,003
48. Washington	WA	0	0			0	0
49. West Virginia	WV	2,515	2,545			0	5,060
50. Wisconsin	WI	4,970	2,704,785			0	2,709,754
51. Wyoming	WY	0	0			0	0
52. American Samoa	AS	0	0			0	0
53. Guam	GU	0	0			0	0
54. Puerto Rico	PR	0	0			0	0
55. U.S. Virgin Islands	VI	0	0			0	0
56. Northern Mariana Islands	MP	0	0			0	0
57. Canada	CAN	0	0			0	0
58. Aggregate Other Alien	OT	0	0			0	0
59. Total		1,363,266	37,374,411	0	0	0	38,737,677

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

N O N E

Schedule Y - Part 1A - Explanations

N O N E

Schedule Y - Part 2

N O N E

Schedule Y - Part 3

N O N E

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES**REQUIRED FILINGS**

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

		Responses
MARCH FILING		
1.	Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	YES
2.	Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?	YES
3.	Will the confidential Risk-based Capital Report be filed with the state of domicile, if required, by March 1?	YES
4.	Will an actuarial opinion be filed by March 1?	YES
APRIL FILING		
5.	Will Management's Discussion and Analysis be filed by April 1?	YES
6.	Will the Life, Health & Annuity Guaranty Association Assessable Premium Exhibit - Parts 1 and 2 be filed with the state of domicile and the NAIC by April 1? (Not applicable to fraternal benefit societies)	WAIVED
7.	Will the Supplemental Investment Risks Interrogatories be filed by April 1?	YES
JUNE FILING		
8.	Will an audited financial report be filed by June 1?	YES
9.	Will Accountant's Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	YES
SUPPLEMENTAL FILINGS		
<p>The following supplemental reports are required to be filed as part of your annual statement filing <u>if your company is engaged in the type of business covered by the supplement. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below.</u> If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.</p>		
MARCH FILING		
10.	Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1? (Not applicable to fraternal benefit societies) ..	NO
11.	Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	NO
12.	Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?	NO
13.	Will the actuarial opinion on participating and non-participating policies as required in Interrogatories 1 and 2 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1?	YES
14.	Will the actuarial opinion on non-guaranteed elements as required in interrogatory #3 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1?	YES
15.	Will the actuarial opinion on X-Factors be filed with the state of domicile and electronically with the NAIC by March 1?	NO
16.	Will the actuarial opinion on Separate Accounts Funding Guaranteed Minimum Benefit be filed with the state of domicile and electronically with the NAIC by March 1?	NO
17.	Will the actuarial opinion on Synthetic Guaranteed Investment Contracts be filed with the state of domicile and electronically with the NAIC by March 1?	NO
18.	Will the Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1?	NO
19.	Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1?	NO
20.	Will the Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI be filed with the state of domicile and electronically with the NAIC by March 1?	NO
21.	Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Average Market Value) be filed with the state of domicile and electronically with the NAIC by March 1?	NO
22.	Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value) be filed with the state of domicile and electronically with the NAIC by March 1?	NO
23.	Will the C-3 RBC Certifications required under C-3 Phase I be filed with the state of domicile and electronically with the NAIC by March 1?	YES
24.	Will the C-3 RBC Certifications required under C-3 Phase II be filed with the state of domicile and electronically with the NAIC by March 1?	NO
25.	Will the Actuarial Certifications Related to Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities be filed with the state of domicile and electronically with the NAIC by March 1?	NO

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

26. Will the actuarial opinion required by the Modified Guaranteed Annuity Model Regulation be filed with the state of domicile and electronically with the NAIC by March 1?	.....	NO
27. Will the Actuarial Certification regarding the use of 2001 Preferred Class Tables required by the Model Regulation Permitting the Recognition of Preferred Mortality Tables for Use in Determining Minimum Reserve Liabilities be filed with the state of domicile and electronically with the NAIC by March 1?	.....	NO
28. Will the Worker's Compensation Carve-Out Supplement be filed by March 1? (Not applicable to fraternal benefit societies)	.....	NO
29. Will Supplemental Schedule O be filed with the state of domicile and the NAIC by March 1?	.....	YES
30. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	.....	YES
31. Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1?	.....	NO
32. Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1?	.....	NO
33. Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?	.....	NO
34. Will the VM-20 Reserves Supplement be filed with the state of domicile and the NAIC by March 1?	.....	YES
35. Will the Health Supplement be filed with the state of domicile and the NAIC by March 1?	.....	NO
36. Will the Market Conduct Annual Statement (MCAS) Premium Exhibit for Year be filed with appropriate jurisdictions and with the NAIC by March 1?	.....	NO

APRIL FILING

37. Will the confidential Regulatory Asset Adequacy Issues Summary (RAAIS) required by the Valuation Manual be filed with the state of domicile by April 1?	.....	YES
38. Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?	.....	NO
39. Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1? (Not applicable to fraternal benefit societies)	.....	NO
40. Will the Accident and Health Policy Experience Exhibit be filed by April 1?	.....	NO
41. Will the Supplemental Health Care Exhibit (Parts 1 and 2) be filed with the state of domicile and the NAIC by April 1?	.....	NO
42. Will the confidential Actuarial Memorandum required by Actuarial Guideline XXXVIII 8D be filed with the state of domicile by April 30?	.....	YES
43. Will the Supplemental Term and Universal Life Insurance Reinsurance Exhibit be filed with the state of domicile and the NAIC by April 1?	.....	NO
44. Will the Variable Annuities Supplement be filed with the state of domicile and the NAIC by April 1?	.....	NO
45. Will the confidential Executive Summary of the PBR Actuarial Report be filed with the state of domicile by April 1?	.....	NO
46. Will the confidential Life Summary of the PBR Actuarial Report be filed with the state of domicile by April 1?	.....	NO
47. Will the confidential Variable Annuities Summary of the PBR Actuarial Report be filed with the state of domicile by April 1?	.....	NO

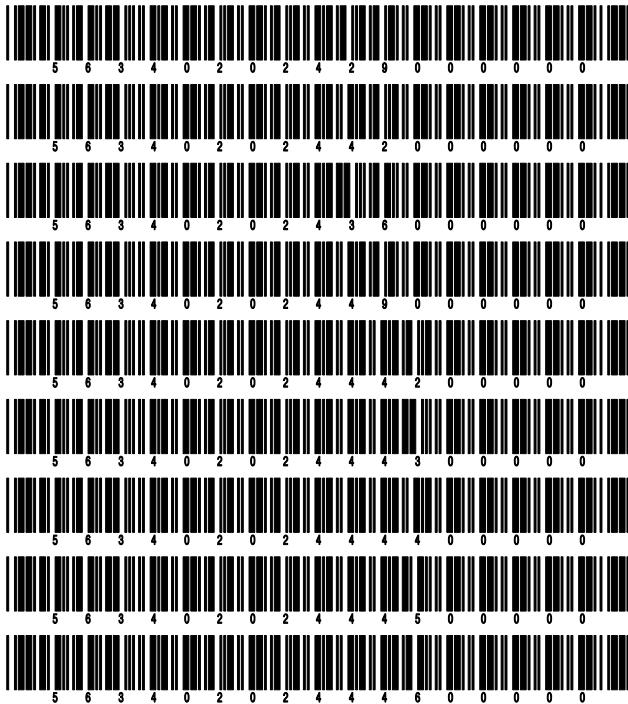
AUGUST FILING

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

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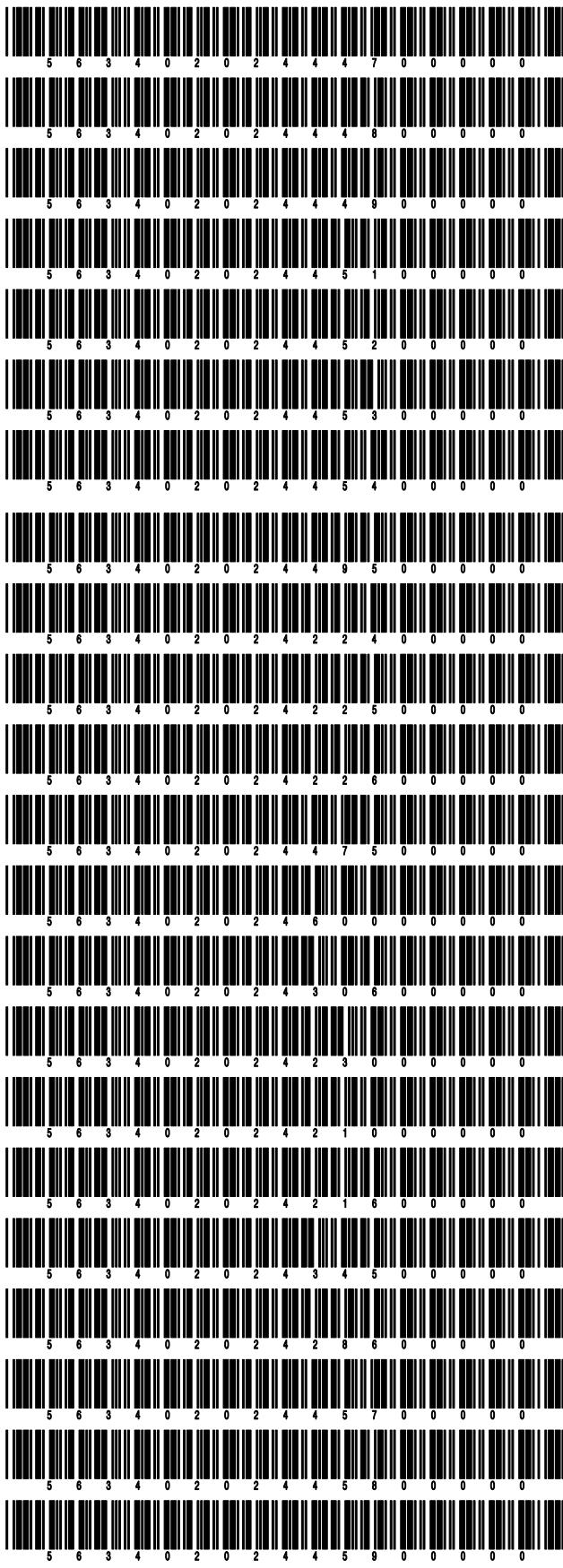
Bar Codes:

6. Life, Health & Annuity Assessable Premium Exhibit - Parts 1 and 2 [Document Identifier 290]
10. SIS Stockholder Information Supplement [Document Identifier 420]
11. Medicare Supplement Insurance Experience Exhibit [Document Identifier 360]
12. Trusteed Surplus Statement [Document Identifier 490]
15. Actuarial Opinion on X-Factors [Document Identifier 442]
16. Actuarial Opinion on Separate Accounts Funding Guaranteed Minimum Benefit [Document Identifier 443]
17. Actuarial Opinion on Synthetic Guaranteed Investment Contracts [Document Identifier 444]
18. Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV [Document Identifier 445]
19. Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXV [Document Identifier 446]



SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

20. Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI [Document Identifier 447]
21. Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI [Document Identifier 448]
22. Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value) [Document Identifier 449]
24. C-3 RBC Certifications Required Under C-3 Phase II [Document Identifier 451]
25. Actuarial Certifications Related to Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities [Document Identifier 452]
26. Modified Guaranteed Annuity Model Regulation [Document Identifier 453]
27. Actuarial Certification regarding the use of 2001 Preferred Class Tables required by the Model Regulation Permitting the Recognition of Preferred Mortality Tables for Use in Determining Minimum Reserve Liabilities [Document Identifier 454]
28. Workers' Compensation Carve-Out Supplement [Document Identifier 495]
31. Relief from the five-year rotation requirement for lead audit partner [Document Identifier 224]
32. Relief from the one-year cooling off period for independent CPA [Document Identifier 225]
33. Relief from the Requirements for Audit Committees [Document Identifier 226]
35. Health Care Receivables Supplement [Document Identifier 475]
36. Market Conduct Annual Statement (MCAS) Premium Exhibit [Document Identifier 600]
38. Long-Term Care Experience Reporting Forms [Document Identifier 306]
39. Credit Insurance Experience Exhibit [Document Identifier 230]
40. Accident and Health Policy Experience Exhibit [Document Identifier 210]
41. Supplemental Health Care Exhibit (Parts 1 and 2) [Document Identifier 216]
43. Supplemental Term and Universal Life Insurance Reinsurance Exhibit [Document Identifier 345]
44. Variable Annuities Supplement [Document Identifier 286]
45. Executive Summary of the PBR Actuarial Report [Document Identifier 457]
46. Life Summary of the PBR Actuarial Report [Document Identifier 458]
47. Variable Annuities Summary of the PBR Actuarial Report [Document Identifier 459]



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU
OVERFLOW PAGE FOR WRITE-INS

Additional Write-ins for Liabilities Line 25

	1 Current Year	2 Prior Year
2504. Account Payable LL	177,404	134,357
2597. Summary of remaining write-ins for Line 25 from overflow page	177,404	134,357



SUPPLEMENT FOR THE YEAR 2024 OF THE FCSU

MEDICARE PART D COVERAGE SUPPLEMENT

(Net of Reinsurance)

NAIC Group Code 0000

(To Be Filed by March 1)

NAIC Company Code 56340

	Individual Coverage		Group Coverage		5 Total Cash
	1 Insured	2 Uninsured	3 Insured	4 Uninsured	
1. Premiums Collected					
1.1 Standard Coverage					
1.1.1 With Reinsurance Coverage		XXX		XXX	
1.1.2 Without Reinsurance Coverage		XXX		XXX	
1.1.3 Risk-Corridor Payment Adjustments		XXX		XXX	
1.2 Supplemental Benefits		XXX		XXX	
2. Premiums Due and Uncollected-change					
2.1 Standard Coverage					
2.1.1 With Reinsurance Coverage		XXX		XXX	XXX
2.1.2 Without Reinsurance Coverage		XXX		XXX	XXX
2.2 Supplemental Benefits		XXX		XXX	XXX
3. Unearned Premium and Advance Premium-change					
3.1 Standard Coverage					
3.1.1 With Reinsurance Coverage		XXX		XXX	XXX
3.1.2 Without Reinsurance Coverage		XXX		XXX	XXX
3.2 Supplemental Benefits		XXX		XXX	XXX
4. Risk-Corridor Payment Adjustments-change					
4.1 Receivable		XXX		XXX	XXX
4.2 Payable		XXX		XXX	XXX
5. Earned Premiums					
5.1 Standard Coverage					
5.1.1 With Reinsurance Coverage		XXX		XXX	XXX
5.1.2 Without Reinsurance Coverage		XXX		XXX	XXX
5.1.3 Risk-Corridor Payment Adjustments		XXX		XXX	XXX
5.2 Supplemental Benefits		XXX		XXX	XXX
6. Total Premiums		XXX		XXX	
7. Claims Paid					
7.1 Standard Coverage					
7.1.1 With Reinsurance Coverage		XX		XXX	
7.1.2 Without Reinsurance Coverage		XX		XXX	
7.2 Supplemental Benefits		XXX		XXX	
8. Claim Reserves and Liabilities-change					
8.1 Standard Coverage					
8.1.1 With Reinsurance Coverage		XXX		XXX	XXX
8.1.2 Without Reinsurance Coverage		XXX		XXX	XXX
8.2 Supplemental Benefits		XXX		XXX	XXX
9. Health Care Receivables-change					
9.1 Standard Coverage					
9.1.1 With Reinsurance Coverage		XXX		XXX	XXX
9.1.2 Without Reinsurance Coverage		XXX		XXX	XXX
9.2 Supplemental Benefits		XXX		XXX	XXX
10. Claims Incurred					
10.1 Standard Coverage					
10.1.1 With Reinsurance Coverage		XXX		XXX	XXX
10.1.2 Without Reinsurance Coverage		XXX		XXX	XXX
10.2 Supplemental Benefits		XXX		XXX	XXX
11. Total Claims		XXX		XXX	
12. Reinsurance Coverage and Low Income Cost Sharing					
12.1 Claims Paid - Net of Reimbursements Applied	XXX		XXX		
12.2 Reimbursements Received but Not Applied-change	XXX		XXX		
12.3 Reimbursements Receivable-change	XXX		XXX		XXX
12.4 Health Care Receivables-change	XXX		XXX		XXX
13. Aggregate Policy Reserves-change					XXX
14. Expenses Paid		XXX		XXX	
15. Expenses Incurred		XXX		XXX	XXX
16. Underwriting Gain/Loss		XXX		XXX	XXX
17. Cash Flow Results	XXX	XXX	XXX	XXX	



SUPPLEMENT FOR THE YEAR 2024 OF THE FCSU

VM-20 RESERVES SUPPLEMENT – PART 1A

Life Insurance Reserves Valued According to VM-20 by Product Type

For The Year Ended December 31, 2024

(To Be Filed by March 1)

NAIC Group Code	0000	NAIC Company Code 56340		
		Prior Year	Current Year	
		1	2	3
		Reported Reserve	Reported Reserve	Due and Deferred Premium Asset
1.	Post-Reinsurance-Ceded Reserve			
1.1.	Term Life Insurance.....			
1.2.	Universal Life With Secondary Guarantee			
1.3.	Non-Participating Whole Life			
1.4.	Participating Whole Life			
1.5.	Universal Life Without Secondary Guarantee			
1.6.	Variable Universal Life Without Secondary Guarantee			
1.7.	Variable Life Without Secondary Guarantee			
1.8.	Indexed Life Without Secondary Guarantee			
1.9.	Aggregate Write-Ins for Other Products	0	0	0
2.	Total Post-Reinsurance-Ceded Reserve (Sum of Lines 1.1 through 1.9)	0	0	XXX
3.	Pre-Reinsurance-Ceded Reserve			
3.1.	Term Life Insurance.....			
3.2.	Universal Life With Secondary Guarantee			
3.3.	Non-Participating Whole Life			
3.4.	Participating Whole Life			
3.5.	Universal Life Without Secondary Guarantee			
3.6.	Variable Universal Life Without Secondary Guarantee			
3.7.	Variable Life Without Secondary Guarantee			
3.8.	Indexed Life Without Secondary Guarantee			
3.9.	Aggregate Write-Ins for Other Products	0	0	0
4.	Total Pre-Reinsurance-Ceded Reserve (Sum of Lines 3.1 through 3.9)	0	0	XXX
5.	Total Reserves Ceded (Line 4 minus Line 2)	0	0	XXX
DETAILS OF WRITE-INS				
1.901.				
1.902.				
1.903.				
1.998.	Summary of remaining write-ins for Line 1.9 from overflow page	0	0	0
1.999.	Totals (Lines 1.901 through 1.903 plus 1.998) (Line 1.9 above)	0	0	0
3.901.				
3.902.				
3.903.				
3.998.	Summary of remaining write-ins for Line 3.9 from overflow page	0	0	0
3.999.	Totals (Lines 3.901 through 3.903 plus 3.998) (Line 3.9 above)	0	0	0

SUPPLEMENT FOR THE YEAR 2024 OF THE FCSU
VM-20 RESERVES SUPPLEMENT – PART 1B

Life Insurance Reserves Valued According to VM-20 by Product Type
 For The Year Ended December 31, 2024
 (To Be Filed by March 1)
 (\$000 Omitted for Face Amounts)

	Current Year											
	SECTION A					SECTION B				SECTION C		
	1 Net Premium Reserve	2 Deterministic Reserve	3 Stochastic Reserve	4 Number of Policies	5 Face Amount	6 Net Premium Reserve	7 Deterministic Reserve	8 Number of Policies	9 Face Amount	10 Net Premium Reserve	11 Number of Policies	12 Face Amount
1. Post-Reinsurance-Ceded Reserve												
1.1. Term Life Insurance				XXX	XXX			XXX	XXX	XXX	XXX	XXX
1.2. Universal Life With Secondary Guarantee				XXX	XXX			XXX	XXX	XXX	XXX	XXX
1.3. Non-Participating Whole Life				XXX	XXX			XXX	XXX	XXX	XXX	XXX
1.4. Participating Whole Life				XXX	XXX			XXX	XXX	XXX	XXX	XXX
1.5. Universal Life Without Secondary Guarantee				XXX	XXX			XXX	XXX	XXX	XXX	XXX
1.6. Variable Universal Life Without Secondary Guarantee				XXX	XXX			XXX	XXX	XXX	XXX	XXX
1.7. Variable Life Without Secondary Guarantee				XXX	XXX			XXX	XXX	XXX	XXX	XXX
1.8. Indexed Life Without Secondary Guarantee				XXX	XXX			XXX	XXX	XXX	XXX	XXX
1.9. Aggregate Write-Ins for Other Products				XXX	XXX			XXX	XXX	XXX	XXX	XXX
2. Total Post-Reinsurance-Ceded Reserve (Sum of Lines 1.1 through 1.9)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3. Pre-Reinsurance-Ceded Reserve												
3.1. Term Life Insurance										XXX		
3.2. Universal Life With Secondary Guarantee												
3.3. Non-Participating Whole Life												
3.4. Participating Whole Life												
3.5. Universal Life Without Secondary Guarantee												
3.6. Variable Universal Life Without Secondary Guarantee												
3.7. Variable Life Without Secondary Guarantee												
3.8. Indexed Life Without Secondary Guarantee												
3.9. Aggregate Write-Ins for Other Products												
4. Total Pre-Reinsurance-Ceded Reserve (Sum of Lines 3.1 through 3.9)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
5. Total Reserves Ceded (Line 4 minus Line 2)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
DETAILS OF WRITE-INS												
1.901.					XXX	XXX			XXX	XXX	XXX	XXX
1.902.					XXX	XXX			XXX	XXX	XXX	XXX
1.903.					XXX	XXX			XXX	XXX	XXX	XXX
1.998. Summary of remaining write-ins for Line 1.9 from overflow page					XXX	XXX			XXX	XXX	XXX	XXX
1.999. Totals (Lines 1.901 through 1.903 plus 1.998) (Line 1.9 above)					XXX	XXX			XXX	XXX	XXX	XXX
3.901.												
3.902.												
3.903.												
3.998. Summary of remaining write-ins for Line 3.9 from overflow page												
3.999. Totals (Lines 3.901 through 3.903 plus 3.998) (Line 3.9 above)												

SUPPLEMENT FOR THE YEAR 2024 OF THE FCSU
VM-20 RESERVES SUPPLEMENT – PART 2

Life PBR Exemption
For The Year Ended December 31, 2024
(To Be Filed by March 1)

Life PBR Exemption as defined in the NAIC adopted Valuation Manual (VM)

1. Has the company been allowed a Life PBR Exemption from the reserve requirements of VM-20 of the Valuation Manual by their state of domicile? Yes [] No []
2. If the response to Question 1 is "Yes", then check the source of the "Life PBR Exemption" definition? (Check either 2.1, 2.2 or 2.3)
 - 2.1 NAIC Adopted VM []
 - 2.2 State Statute (SVL) [] Complete items "a" and "b" as appropriate.
 - a. Is the criteria in the State Statute (SVL) different from the NAIC adopted VM? Yes [] No []
 - b. If the answer to "a" above is "Yes", provide the criteria the state has used to allow the Life PBR Exemption (e.g., Group/Legal Entity criteria) and the minimum reserve requirements that are required by the state of domicile (if the minimum reserve requirements are the same as the Adopted VM, write SAME AS NAIC VM):
.....
- 2.3 State Regulation [] Complete items "a" and "b" as appropriate.
 - a. Is the criteria in the State Regulation different from the NAIC adopted VM? Yes [] No []
 - b. If the answer to "a" above is "Yes", provide the criteria of the state's Life PBR Exemption that the company has met and the minimum reserve requirements that are required by the state of domicile (if the minimum reserve requirements are the same as the Adopted VM, write SAME AS NAIC VM):
.....
3. If the criteria for the "Life PBR Exemption" is the same as or substantially similar to the NAIC adopted VM (i.e., Question 2.1 is checked or Question 2.2.a is "No" or Question 2.3.a is "No"), then provide the most recent year that the company filed a statement of exemption that was allowed. If such calendar year is not the current calendar year for this statement, also provide confirmation that the company meets the criteria for utilizing an ongoing statement of exemption, meaning that none of the following apply:
 - 1) the company fails to meet either of the conditions in VM Section II, Subsection 1.G.2,
 - 2) the policies exempted contain those in VM Section II, Subsection 1.G.3, or
 - 3) the domiciliary commissioner contacted the company prior to Sept. 1 and notified them that the statement of exemption was not allowed:
.....

VM-20 RESERVES SUPPLEMENT – PART 3

Other Exclusions from Life PBR
For The Year Ended December 31, 2024
(To Be Filed by March 1)

- 1A. Has the company filed and been granted a Single State Company Exemption from the reserve requirements of VM-20 of the Valuation Manual by their state of domicile? Yes [] No []
- 1B. If the answer to question 1A is "Yes" please discuss any business covered under the Single State Exemption.
.....
- 2A. If the answer to question 1A is "Yes", does the company have risks for policies issued outside its state of domicile? Yes [] No []
- 2B. If the answer to question 2A is "Yes" please discuss the risks for policies issued outside the state of domicile, how those risks came to be a responsibility of the company, and why the company would still be considered a Single State Company with such risks.
.....
3. Is all of the company's individual ordinary life insurance business excluded from the requirements of VM-20 pursuant to Section II.B of the Valuation Manual? Yes [] No []

NONE



SUPPLEMENT FOR THE YEAR 2024 OF THE FCSU

SCHEDULE O SUPPLEMENTFor The Year Ended December 31, 2024
(To Be Filed by March 1)

Of The FIRST CATHOLIC SLOVAK UNION OF THE UNITED STATES OF AMERICA & CANADA

ADDRESS (City, State and Zip Code) INDEPENDENCE , OH 44131

NAIC Group Code 0000 NAIC Company Code 56340 Employer's Identification Number (FEIN) 34-0220550

SUPPLEMENTAL SCHEDULE O - PART 1**Development of Incurred Losses**

(\$000 Omitted)

Section A - Group Accident and Health

Years in Which Losses Were Incurred	Cumulative Net Amounts Paid Policyholders				
	1 2020	2 2021	3 2022	4 2023	5 2024(a)
1. Prior					
2. 2020					
3. 2021	XX				
4. 2022	XXX	XX			
5. 2023	XXX	XX	XXX		
6. 2024	XXX	XXX	XXX	XXX	XXX

Section B - Other Accident and Health

1. Prior					
2. 2020					
3. 2021	XXX				
4. 2022	XX	X			
5. 2023	XX	XX	XXX		
6. 2024	XXX	XX		XXX	XXX

Section C - Credit Accident and Health

1. Prior					
2. 2020					
3. 2021	XXX				
4. 2022	XX	X			
5. 2023	XX	XX	XXX		
6. 2024	XXX	XX		XXX	XXX

Section D -

1. Prior					
2. 2020					
3. 2021	XXX				
4. 2022	XX	X			
5. 2023	XX	XX	XXX		
6. 2024	XXX	XX		XXX	XXX

Section E -

1. Prior					
2. 2020					
3. 2021	XXX				
4. 2022	XX	X			
5. 2023	XX	XX	XXX		
6. 2024	XXX	XX		XXX	XXX

Section F -

1. Prior					
2. 2020					
3. 2021	XXX				
4. 2022	XX	X			
5. 2023	XX	XX	XXX		
6. 2024	XXX	XX		XXX	XXX

Section G -

1. Prior					
2. 2020					
3. 2021	XXX				
4. 2022	XX	X			
5. 2023	XX	XX	XXX		
6. 2024	XXX	XX		XXX	XXX

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

Supplement Schedule O - Part 2 Section A

N O N E

Supplement Schedule O - Part 2 Section B

N O N E

Supplement Schedule O - Part 2 Section C

N O N E

Supplement Schedule O - Part 2 Section D

N O N E

Supplement Schedule O - Part 2 Section E

N O N E

Supplement Schedule O - Part 2 Section F

N O N E

Supplement Schedule O - Part 2 Section G

N O N E

Supplement Schedule O - Part 3 Section A

N O N E

Supplement Schedule O - Part 3 Section B

N O N E

Supplement Schedule O - Part 3 Section C

N O N E

Supplement Schedule O - Part 3 Section D

N O N E

Supplement Schedule O - Part 3 Section E

N O N E

Supplement Schedule O - Part 3 Section F

N O N E

Supplement Schedule O - Part 3 Section G

N O N E

SUPPLEMENT FOR THE YEAR 2024 OF THE FCSU

SCHEDULE O SUPPLEMENT**SUPPLEMENTAL SCHEDULE O - PART 4**

Development of Incurred Losses

(\$000 Omitted)

Section A - Group Accident and Health

Years in Which Losses Were Incurred	Sum of Net Cumulative Amount Paid Policyholders, Cost Containment Expenses, and Claim and Cost Containment Liability and Reserve Outstanding at End of Year				
	1 2020	2 2021	3 2022	4 2023	5 2024
1. 2020					
2. 2021	XXX				
3. 2022	XXX	XX			
4. 2023	XXX	XXX	XXX		
5. 2024	XXX	XXX	XXX	XXX	

Section B - Other Accident and Health

1. 2020					
2. 2021	XXX				
3. 2022	XXX				
4. 2023	XX	XX			
5. 2024	XX	XX	XXX	XXX	

Section C - Credit Accident and Health

1. 2020					
2. 2021	XXX				
3. 2022	XXX				
4. 2023	XX	XX			
5. 2024	XX	XX	XXX	XXX	

Section D -

1. 2020					
2. 2021	XXX				
3. 2022	XXX				
4. 2023	XX	XX			
5. 2024	XX	XX	XXX	XXX	

Section E -

1. 2020					
2. 2021	XXX				
3. 2022	XXX				
4. 2023	XX	XX			
5. 2024	XX	XX	XXX	XXX	

Section F -

1. 2020					
2. 2021	XXX				
3. 2022	XXX				
4. 2023	XX	XX			
5. 2024	XX	XX	XXX	XXX	

Section G -

1. 2020					
2. 2021	XXX				
3. 2022	XXX				
4. 2023	XX	XX			
5. 2024	XX	XX	XXX	XXX	

SUPPLEMENTAL SCHEDULE O - PART 5

(\$000 OMITTED)

Reserve and Liability Methodology - Exhibits 6 and 8

Line of Business	1 Methodology	2 Amount
1. Industrial Life		
2. Ordinary Life		300
3. Individual Annuity		
4. Supplementary Contracts		
5. Credit Life		
6. Group Life		
7. Group Annuities		
8. Group Accident and Health		
9. Credit Accident and Health		
10. Other Accident and Health		
11. Total		300