



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 0000 NAIC Company Code 56340 Employer's ID Number 34-0220550
(Current) (Prior)
Organized under the Laws of OHIO, State of Domicile or Port of Entry OH
Country of Domicile United States of America
Licensed as business type: Life, Accident and Health [] Fraternal Benefit Societies [X]
Incorporated/Organized 01/09/1892 Commenced Business 10/01/1890
Statutory Home Office 6611 ROCKSIDE ROAD INDEPENDENCE, OH, US 44131
(Street and Number) (City or Town, State, Country and Zip Code)
Main Administrative Office 6611 ROCKSIDE ROAD
(Street and Number)
INDEPENDENCE, OH, US 44131 216-642-9406
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)
Mail Address 6611 ROCKSIDE ROAD INDEPENDENCE, OH, US 44131
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)
Primary Location of Books and Records 6611 ROCKSIDE ROAD
(Street and Number)
INDEPENDENCE, OH, US 44131 216-642-9406
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)
Internet Website Address WWW.FCSU.COM
Statutory Statement Contact KENNETH ANTHONY ARENDT 216-642-9406
(Name) (Area Code) (Telephone Number)
FCSU@FCSU.COM 216-642-4310
(E-mail Address) (FAX Number)

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

State of OHIO SS
County of CUYAHOGA

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
KENNETH A ARENDT
PRESIDENT
Kevin J. Collins
KEVIN J COLLINS
EXECUTIVE SECRETARY
John V. Tokarsky
JOHN V TOKARSKY
TREASURER

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

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



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)

NAIC Group Code 0000 BUSINESS IN THE STATE OF Alaska DURING THE YEAR 2024 NAIC Company Code 56340

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 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) (e)								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

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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		Alaska		DURING THE YEAR							2024		NAIC Company Code		56340		
Line of Business				13 Incurred During Current Year		Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year		Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
						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			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																		(a)			
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									
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 (d)				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
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									
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 Arizona DURING THE YEAR 2024 NAIC Company Code 56340

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 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	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	0
Individual Annuities												
20. Fixed	500						0	549,775				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	0	549,775	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	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) (e)							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	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		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Policy Exhibit					
			Claims Settled During Current Year									Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
			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		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	0				164	563,234	
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		0	0	0	0	0	0	0	0	0	0	0	0	0	164	563,234	
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					(a)	
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						
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	
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	
Accident and Health																	
34. Comprehensive individual(d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group(d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare Supplement(d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
37. Vision only(d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only(d)		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						
40. Title XVIII Medicare(d)		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						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income(d)		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						
45. Other health(d)		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	
47. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	164	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)

NAIC Group Code 0000 BUSINESS IN THE STATE OF Arkansas DURING THE YEAR 2024 NAIC Company Code 56340

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 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) (e)								XXX	XXX	XXX		
41. Title XIX Medicaid (d)								XXX	XXX	XXX		
42. Credit A&H (d)								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)											

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		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
			Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount
			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																(a)	
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						
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			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
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						
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 Colorado DURING THE YEAR 2024 NAIC Company Code 56340

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole					17		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	(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) (e)						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	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		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Policy Exhibit		In Force December 31, Current Year (b)			
			Claims Settled During Current Year				Total 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		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	0				54	1		
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		0	0	0	0	0	0	0	0	0	0	0	54	1	11,490		
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					(a)		
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							
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		
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		
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		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
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		
47. Total		0	0	0	0	0	0	0	0	0	0	0	0	54	1		

(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

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole16,451	16,451		243	2	9,194		9,439	25,950		3,834		29,784
3. Term4,536	4,536						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	20,987	0	243	2	9,194	0	9,439	25,950	0	3,834	0	29,784
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. Fixed103,366	103,366						0	286,576				286,576
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	103,366	0	0	0	0	0	0	286,576	0	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(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	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		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
			Claims Settled During Current Year		Total Settled During Current Year		23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount		27 Number of Pols/ Certs	28 Amount				
			Totals Paid		Reduction by Compromise									Amount Rejected			
			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									0	0							
2. Whole		25,949	10	25,949					10	25,949	0	1	10,000	(23)	(33,975)	993	6,414,094
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		25,949	10	25,949	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						
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					(a)	
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						
35. Comprehensive group(d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare Supplement(d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
37. Vision only(d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only(d)		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						
40. Title XVIII Medicare(d)		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						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income(d)		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						
45. Other health(d)		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		25,949	10	25,949	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)

NAIC Group Code 0000 BUSINESS IN THE STATE OF Delaware DURING THE YEAR 2024 NAIC Company Code 56340

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 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) (e)								XXX	XXX	XXX		
41. Title XIX Medicaid (d)								XXX	XXX	XXX		
42. Credit A&H (d)								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		Delaware		DURING THE YEAR		2024		NAIC Company Code		56340			
Line of Business		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
			Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount
			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																(a)	
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							
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 (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
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							
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

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members				7 Total (Col. 3+4+5+6)	Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other		8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole 7,536			68	32	963		1,063			29,401		29,401
3. Term 1,876							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	9,412	0	68	32	963	0	1,063	0	0	29,401	0	29,401
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 557,738							0	486,024				486,024
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	557,738	0	0	0	0	0	0	486,024	0	0	0	486,024
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) (e)							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	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		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Policy Exhibit					
			Claims Settled During Current Year									Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
			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		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	0	3	45,000		2,738	95	1,042,138	
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		0	0	0	0	0	0	0	0	0	3	45,000	0	2,738	95	1,042,138	
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						(a)	
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							
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	
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	
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		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
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	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

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole	12				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
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 (d)							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	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		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Policy Exhibit		In Force December 31, Current Year (b)			
			Claims Settled During Current Year				Total 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		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	0				106	20,954		
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		0	0	0	0	0	0	0	0	0	0	0	106	2	20,954		
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					(a)		
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							
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		
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		
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		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
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		
47. Total		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

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 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) (e)								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)											

24.1.ID

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		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
			Claims Settled During Current Year				Total Settled During Current Year					23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount
			Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year								
			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																(a)	
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							
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 (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
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							
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

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members				7 Total (Col. 3+4+5+6)	Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other		8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole51,095	51,095		573	47	20,169		20,790	190,048		21,753		211,801
3. Term14,686	14,686						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. Fixed12,746,202	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	XXX	XXX	XXX	0	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		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Policy Exhibit					
			Claims Settled During Current Year									Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
			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		Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life																	
1. Industrial									0	0	0						
2. Whole		208,567	37	190,903					37	190,903	17,664	6	85,000	(63)	(332,709)	2,090	17,754,034
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		208,567	37	190,903	0	0	0	0	37	190,903	17,664	6	85,000	(63)	(332,709)	2,090	17,754,034
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					(a)	
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						
35. Comprehensive group(d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare Supplement(d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
37. Vision only(d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only(d)		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						
40. Title XVIII Medicare(d)		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						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income(d)		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						
45. Other health(d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	
46. Total Accident and Health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	
47. Total		208,567	37	190,903	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

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole11,248			189		2,652		2,842	17,387		9,292		26,679
3. Term448							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. Fixed267,298							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(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	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		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Policy Exhibit		In Force December 31, Current Year (b)			
			Claims Settled During Current Year				Total 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		Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life																	
1. Industrial									0	0	0						
2. Whole		21,438	8	17,758					8	17,758	3,680	2	20,000	(8)	(41,396)	297	1,592,759
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		21,438	8	17,758	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					(a)	
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						
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			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
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			21,438	8	17,758	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

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members				7 Total (Col. 3+4+5+6)	Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other		8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole 1,409					1		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) (e)							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		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Policy Exhibit					
			Claims Settled During Current Year									Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
			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		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	0	2	50,000	(1)	(9,997)	8	195,006
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		0	0	0	0	0	0	0	0	0	0	2	50,000	(1)	(9,997)	8	195,006
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					(a)	
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						
35. Comprehensive group(d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare Supplement(d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
37. Vision only(d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only(d)		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						
40. Title XVIII Medicare(d)		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						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income(d)		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						
45. Other health(d)		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		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

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 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) (e)								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		Kansas		DURING THE YEAR		2024		NAIC Company Code		56340			
Line of Business		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
			Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount
			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																(a)	
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							
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 (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
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							
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

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 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
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	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	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
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)	(e)					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	241,947 (c)	0	0	0	0	0	0	212,621	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		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)							
			Claims Settled During Current Year				Total Settled During Current Year					23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount						
			Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year														
			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										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	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											(a)	
19. Total Group Life		0	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	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	0	
Accident and Health																							
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX												
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX												
36. Medicare Supplement (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX												
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX												
38. Dental only (d)		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												
40. Title XVIII Medicare (d)		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												
42. Credit A&H (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX												
43. Disability income (d)		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												
45. Other health (d)		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	0	0	0	0	0	
47. Total		0	0	0	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 Maryland DURING THE YEAR 2024 NAIC Company Code 56340

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial					7		0					0
2. Whole	55						7			2,640		2,640
3. Term	28						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	82	0	0	0	7	0	7	0	0	2,640	0	2,640
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	1,000						0	73,907				73,907
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	1,000	0	0	0	0	0	0	73,907	0	0	0	73,907
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)	(e)					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	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		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Policy Exhibit		In Force December 31, Current Year (b)			
			Claims Settled During Current Year				Total 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		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	0				95	4	45,831	
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		0	0	0	0	0	0	0	0	0	0	0	0	95	4	45,831	
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						(a)	
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							
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	
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	
Accident and Health																	
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare Supplement (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		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						
40. Title XVIII Medicare (d)		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						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)		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						
45. Other health (d)		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	
47. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	95	4	45,831

(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

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole 2,218	2,218				1,618		1,618	17,973		6,669		24,642
3. Term 1,218	1,218						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	3,436	0	0	0	1,618	0	1,618	17,973	0	6,669	0	24,642
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	100						0	269,868				269,868
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	0	0	0	0	0	0	269,868	0	0	0	269,868
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	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		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)			
			Claims Settled During Current Year		Total Settled During Current Year		23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount		27 Number of Pols/ Certs	28 Amount						
			Totals Paid		Reduction by Compromise									Amount Rejected					
			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									0	0	0								
2. Whole		17,973	4	17,973					4	17,973	0			(7)	(34,707)	146	895,444		
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		17,973	4	17,973	0	0	0	0	4	17,973	0	0	0	(7)	(34,707)	146	895,444		
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						(a)		
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								
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			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
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			17,973	4	17,973	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

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole27,233			457	17	12,528		13,002	79,784		10,621		90,405
3. Term10,811							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. Fixed829,409							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(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	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		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Policy Exhibit		In Force December 31, Current Year (b)				
			Claims Settled During Current Year				Total 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		Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	
Individual Life																		
1. Industrial									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								
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		85,301	31	80,301	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								
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					(a)			
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								
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		
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		
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			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
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		
47. Total			85,301	31	80,301	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

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole 6,629	6,629		6		2,129		2,134			3,059		3,059
3. Term 21	21						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	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
Individual Annuities												
20. Fixed 4,036,846	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	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
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) (e)							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	4,043,496 (c)	0	6	0	2,129	0	2,134	1,178,643	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		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
			Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount
			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									0	0	0						
2. Whole		1,669							0	0	1,669	2	15,000	(3)	(24,082)	136	1,084,637
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		1,669	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	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					(a)	
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						
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			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
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			1,669	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

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole503					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
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. Fixed288,991							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	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
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	289,494 (c)	0	0	0	73	0	73	797,307	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		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)							
			Claims Settled During Current Year		Total Settled During Current Year		23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount		27 Number of Pols/ Certs	28 Amount										
			Totals Paid		Reduction by Compromise									Amount Rejected									
			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									0	0	0												
2. Whole									0	0	0							391	6	55,551			
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		0	0	0	0	0	0	0	0	0	0	0	0	0	0	391	6	55,551					
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									(a)			
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	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	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	0	0			
Accident and Health																							
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX												
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX												
36. Medicare Supplement (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX												
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX												
38. Dental only (d)		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												
40. Title XVIII Medicare (d)		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												
42. Credit A&H (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX												
43. Disability income (d)		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												
45. Other health (d)		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	0	0	0			
47. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0	391	6	55,551					

(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

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole 2,100					51		51					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	2,100	0	0	0	51	0	51	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 290,868							0	174,509				174,509
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	290,868	0	0	0	0	0	0	174,509	0	0	0	174,509
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) (e)							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	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		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)			
			Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount		
			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									0	0	0								
2. Whole									0	0	0					843	10	376,094	
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		0	0	0	0	0	0	0	0	0	0	0	0	0	843	10	376,094		
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							(a)	
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								
35. Comprehensive group(d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
36. Medicare Supplement(d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
37. Vision only(d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
38. Dental only(d)		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								
40. Title XVIII Medicare(d)		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								
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
43. Disability income(d)		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								
45. Other health(d)		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	0	
47. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	843	10	376,094		

(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)

NAIC Group Code 0000 BUSINESS IN THE STATE OF Nevada DURING THE YEAR 2024 NAIC Company Code 56340

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole266					10		10					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	266	0	0	0	10	0	10	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							0	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	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
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	266 (c)	0	0	0	10	0	10	10,898	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		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Policy Exhibit		In Force December 31, Current Year (b)			
			Claims Settled During Current Year				Total 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		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	0				163	1	50,541	
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		0	0	0	0	0	0	0	0	0	0	0	0	163	1	50,541	
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						(a)	
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							
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	
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	
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			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
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	
47. Total		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

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole55,884			376	173	25,499		26,048	185,691		45,631		231,322
3. Term12,469							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	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. Fixed452,280							0	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		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
			Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount
			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		200,418	35	185,796					0	0	14,622	9	96,000	(60)	(401,378)	2,246	15,905,045
2. Whole									35	185,796							
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		200,418	35	185,796	0	0	0	0	35	185,796	14,622	9	96,000	(60)	(401,378)	2,246	15,905,045
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						(a)
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						
35. Comprehensive group(d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare Supplement(d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
37. Vision only(d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only(d)		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						
40. Title XVIII Medicare(d)		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						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income(d)		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						
45. Other health(d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
46. Total Accident and Health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total		200,418	35	185,796	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

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole46,628			529	30	17,003		17,562	62,113		23,438		85,551
3. Term10,295							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	56,923	0	529	30	17,003	0	17,562	62,113	0	23,438	0	85,551
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. Fixed807,610							0	673,257				673,257
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	807,610	0	0	0	0	0	0	673,257	0	0	0	673,257
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	864,533 (c)	0	529	30	17,003	0	17,562	735,370	0	23,438	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		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
			Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount
			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										0							
2. Whole		75,804	27	65,247					27	65,247	10,557	4	47,000	(46)	(640,094)	1,649	12,710,381
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	27	65,247	10,557	4	47,000	(46)	(640,094)	1,649	12,710,381
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					(a)	
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						
35. Comprehensive group(d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare Supplement(d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
37. Vision only(d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only(d)		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						
40. Title XVIII Medicare(d)		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						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income(d)		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						
45. Other health(d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	
46. Total Accident and Health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	
47. Total		75,804	27	65,247	0	0	0	0	27	65,247	10,557	4	47,000	(46)	(640,094)	1,649	12,710,381

(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

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole					1		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
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 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	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
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) (e)							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	19,915 (c)	0	0	0	1	0	1	74,242	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		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Policy Exhibit		In Force December 31, Current Year (b)			
			Claims Settled During Current Year				Total 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		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	0				14	2	55,014
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		0	0	0	0	0	0	0	0	0	0	0	0	14	2	55,014	
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						(a)
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						
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			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
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	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

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members				7 Total (Col. 3+4+5+6)	Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other		8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole225,196			2,288	368	76,721		79,378	583,711		146,099		729,810
3. Term	41,562						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	266,758	0	2,288	368	76,721	0	79,378	583,711	0	146,099	0	729,810
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. Fixed4,344,780							0	5,638,238				5,638,238
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	4,344,780	0	0	0	0	0	0	5,638,238	0	0	0	5,638,238
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	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		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)					
			Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount				
			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		601,396	132	574,632					0	0	26,764	42	379,000	(398)	(1,352,543)	8,255	55,196,547				
2. Whole									132	574,632											
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		601,396	132	574,632	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	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							(a)				
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										
35. Comprehensive group(d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX										
36. Medicare Supplement(d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX										
37. Vision only(d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX										
38. Dental only(d)		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										
40. Title XVIII Medicare(d)		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										
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX										
43. Disability income(d)		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										
45. Other health(d)		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		601,396	132	574,632	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

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole 611,843	611,843		7,717	859	244,592		253,169	1,578,156		276,231		1,854,387
3. Term 185,158	185,158						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	797,001	0	7,717	859	244,592	0	253,169	1,578,156	0	276,231	0	1,854,387
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 6,349,606	6,349,606						0	11,725,841				11,725,841
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	6,349,606	0	0	0	0	0	0	11,725,841	0	0	0	11,725,841
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) (e)							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	7,146,607 (c)	0	7,717	859	244,592	0	253,169	13,303,997	0	276,231	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		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)			
			Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount		
			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		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	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		1,680,054	416	1,580,485	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	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						(a)		
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								
35. Comprehensive group(d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
36. Medicare Supplement(d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
37. Vision only(d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
38. Dental only(d)		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								
40. Title XVIII Medicare(d)		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								
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
43. Disability income(d)		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								
45. Other health(d)		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								
47. Total		1,680,054	416	1,580,485	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)

NAIC Group Code 0000 BUSINESS IN THE STATE OF Rhode Island DURING THE YEAR 2024 NAIC Company Code 56340

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 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) (e)								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)											

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		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
			Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount
			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																(a)	
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							
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 (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
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							
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

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 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 (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) (e)							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	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		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)			
			Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount		
			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									0	0	0								
2. Whole									0	0	0								
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		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
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						(a)		
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								
35. Comprehensive group(d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
36. Medicare Supplement(d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
37. Vision only(d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
38. Dental only(d)		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								
40. Title XVIII Medicare(d)		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								
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
43. Disability income(d)		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								
45. Other health(d)		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		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 Tennessee DURING THE YEAR 2024 NAIC Company Code 56340

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 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	(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)	(e)					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	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		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)			
			Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount		
			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									0	0	0								
2. Whole									0	0	0								
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		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
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						(a)		
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								
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
36. Medicare Supplement (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
38. Dental only (d)		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								
40. Title XVIII Medicare (d)		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								
42. Credit A&H (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
43. Disability income (d)		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								
45. Other health (d)		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		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

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole144					15		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
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. Fixed5,658							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	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
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	5,802 (c)	0	0	0	15	0	15	109,147	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		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Policy Exhibit		In Force December 31, Current Year (b)			
			Claims Settled During Current Year				Total 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		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	0				202	5	36,259	
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		0	0	0	0	0	0	0	0	0	0	0	0	202	5	36,259	
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						(a)	
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							
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	
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	
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		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
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	202	5	36,259	

(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

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members				7 Total (Col. 3+4+5+6)	Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other		8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 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) (e)								XXX	XXX	XXX		
41. Title XIX Medicaid (d)								XXX	XXX	XXX		
42. Credit A&H (d)								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

24.1.UT

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		2024		NAIC Company Code		56340			
Line of Business		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
			Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount
			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																(a)	
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						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare Supplement (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		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						
40. Title XVIII Medicare (d)		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						
42. Credit A&H (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)		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						
45. Other health (d)		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						
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 DURING THE YEAR 2024 NAIC Company Code 56340

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 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) (e)								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		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
			Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount
			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																(a)	
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						
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			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
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						
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 Virginia DURING THE YEAR 2024 NAIC Company Code 56340

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members				7 Total (Col. 3+4+5+6)	Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other		8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole 4,052	4,052		9		2,509		2,518	47,232		4,483		51,716
3. Term 2,151	2,151						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	6,203	0	9	0	2,509	0	2,518	47,232	0	4,483	0	51,716
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 26,800	26,800						0	7,590				7,590
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	26,800	0	0	0	0	0	0	7,590	0	0	0	7,590
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) (e)							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	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		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Policy Exhibit		In Force December 31, Current Year (b)			
			Claims Settled During Current Year				Total 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		Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life																	
1. Industrial									0	0	0						
2. Whole		49,415	7	47,415					7	47,415	2,000		(10)	(63,803)	244	1,688,420	
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		49,415	7	47,415	0	0	0	0	7	47,415	2,000	0	0	(10)	(63,803)	244	1,688,420
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					(a)	
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						
35. Comprehensive group		(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare Supplement		(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
37. Vision only		(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only		(d) 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						
40. Title XVIII Medicare		(d) 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						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income		(d) 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						
45. Other health		(d) 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		49,415	7	47,415	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

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole 2,473	2,473		28		2,277		2,305	597				597
3. Term 42	42						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	2,515	0	28	0	2,277	0	2,305	597	0	0	0	597
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 2,545	2,545						0	150,805				150,805
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	2,545	0	0	0	0	0	0	150,805	0	0	0	150,805
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	5,060 (c)	0	28	0	2,277	0	2,305	151,401	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		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Policy Exhibit		In Force December 31, Current Year (b)				
			Claims Settled During Current Year				Total 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		Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	
Individual Life																		
1. Industrial									0	0	0							
2. Whole		596	1	596					1	596	0		(12)	(44,231)	204	1,177,834		
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		596	1	596	0	0	0	0	1	596	0	0	0	(12)	(44,231)	204	1,177,834	
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					(a)		
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							
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			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
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			596	1	596	0	0	0	0	1	596	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

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members				7 Total (Col. 3+4+5+6)	Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other		8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole 4,104	4,104		67		2,637		2,705	27,816		2,935		30,751
3. Term 866	866						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	4,970	0	67	0	2,637	0	2,705	27,816	0	2,935	0	30,751
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 2,704,785	2,704,785						0	7,269,548				7,269,548
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	2,704,785	0	0	0	0	0	0	7,269,548	0	0	0	7,269,548
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) (e)							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	2,709,754 (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		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)			
			Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount		
			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										0	0								
2. Whole		27,847	5	27,847						5	27,847	0	2	50,000	(9)	(42,740)	290	1,821,302	
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		27,847	5	27,847	0	0	0	0	5	27,847	0	2	50,000	(9)	(42,740)	290	1,821,302		
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						(a)		
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								
35. Comprehensive group(d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
36. Medicare Supplement(d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
37. Vision only(d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
38. Dental only(d)		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								
40. Title XVIII Medicare(d)		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								
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
43. Disability income(d)		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								
45. Other health(d)		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								
47. Total		27,847	5	27,847	0	0	0	0	5	27,847	0	2	50,000	(9)	(42,740)	290	1,821,302		

(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 Grand Total DURING THE YEAR 2024 NAIC Company Code 56340

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members				7 Total (Col. 3+4+5+6)	Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other		8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 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										22		Policy Exhibit					
		13		Claims Settled During Current Year										Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
				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		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
1. Industrial		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	310,883,000		
3. Term		0	0	0	0	0	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	0	0	0	0		
5. Universal		0	0	0	0	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	0	0	0	0		
7. Variable		0	0	0	0	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	0	0	0	0		
9. Credit		0	0	0	0	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	0	0	0	0		
11. 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	310,883,000		
Group Life		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
12. Whole		0	0	0	0	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	0	0	0	0		
14. Universal		0	0	0	0	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	0	0	0	0		
16. Variable universal		0	0	0	0	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	0	0	0	0		
18. Other		0	0	0	0	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	0	0	0	0		
Individual Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
20. Fixed		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
21. Indexed		0	0	0	0	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	0	0	0	0		
23. Variable without guarantees		0	0	0	0	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	0	0	0	0		
25. Other		0	0	0	0	0	0	0	0	0	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	0		
Group Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
27. Fixed		0	0	0	0	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	0	0	0	0		
29. Variable with guarantees		0	0	0	0	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	0	0	0	0		
31. Life contingent payout		0	0	0	0	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	0	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		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0		
34. Comprehensive individual		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0		
35. Comprehensive group		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0		
36. Medicare Supplement		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0		
37. Vision only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0		
38. Dental only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0		
39. Federal Employees Health Benefits Plan		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0		
40. Title XVIII Medicare		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0		
41. Title XIX Medicaid		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0		
42. Credit A&H			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0		
43. Disability income		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0		
44. Long-term care		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0		
45. Other health		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0		
46. Total Accident and Health			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0		
47. Total			2,996,427	713	2,814,902	0	0	0	713	2,814,902	181,525	179	2,111,500	(1,271)	(7,384,010)	46,262	310,883,000		

(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 products0 and number of persons insured under indemnity only products0

(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				
	1	2	3	4
Year of Amortization	Reserve as of December 31, Prior Year	Current Year's Realized Capital Gains/(Losses) Transferred into the Reserve Net of Taxes	Adjustment for Current Year's Liability Gains/(Losses) Released From the Reserve	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
	1	2	3	4	5	6	
	Other Than Mortgage Loans	Mortgage Loans	Total (Cols. 1 + 2)	Common Stock	Real Estate and Other Invested Assets	Total (Cols. 4 + 5)	Total Amount (Cols. 3 + 6)
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 Num- ber	NAIC Desig- nation	Description	1	2	3	4	Basic Contribution		Reserve Objective		Maximum Reserve	
			Book/Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	5	6	7	8	9	10
							Factor	Amount (Cols.4 x 5)	Factor	Amount (Cols. 4 x 7)	Factor	Amount (Cols. 4 x 9)
		LONG-TERM BONDS										
1.		Exempt Obligations		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
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	50,859
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	18,758
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	61,761
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	72,269
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	125,035
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	490,115
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	594,218
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	1,413,015
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	723,524
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	1,387,081
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	728,319
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	2,838,923
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	79,091
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	80,403
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	91,306
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	250,800
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	123,449
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	230,245
5.3	4	NAIC Designation Category 4.C		XXX	XXX	0	0.0310	0	0.0724	0	0.1034	0
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	353,694
6.1	5	NAIC Designation Category 5.A	0	XXX	XXX	0	0.0472	0	0.0846	0	0.1410	0
6.2	5	NAIC Designation Category 5.B	250,000	XXX	XXX	250,000	0.0663	16,575	0.1188	29,700	0.1980	49,500
6.3	5	NAIC Designation Category 5.C	503,083	XXX	XXX	503,083	0.0836	42,058	0.1498	75,362	0.2496	125,570
6.4		Subtotal NAIC 5 (6.1+6.2+6.3)	753,083	XXX	XXX	753,083	XXX	58,633	XXX	105,062	XXX	175,070
7.	6	NAIC 6	0	XXX	XXX	0	0.0000	0	0.2370	0	0.2370	0
8.		Total Unrated Multi-class Securities Acquired by Conversion		XXX	XXX	0	XXX	0	XXX	0	XXX	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	5,031,502
		PREFERRED STOCKS										
10.	1	Highest Quality	3,750,000	XXX	XXX	3,750,000	0.0005	1,875	0.0016	6,000	0.0033	12,375
11.	2	High Quality	1,000,000	XXX	XXX	1,000,000	0.0021	2,100	0.0064	6,400	0.0106	10,600
12.	3	Medium Quality		XXX	XXX	0	0.0099	0	0.0263	0	0.0376	0
13.	4	Low Quality		XXX	XXX	0	0.0245	0	0.0572	0	0.0817	0
14.	5	Lower Quality		XXX	XXX	0	0.0630	0	0.1128	0	0.1880	0
15.	6	In or Near Default		XXX	XXX	0	0.0000	0	0.2370	0	0.2370	0
16.		Affiliated Life with AVR		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
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 Num- ber	NAIC Desig- nation	Description	1	2	3	4	Basic Contribution		Reserve Objective		Maximum Reserve		
			Book/Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	5	6	7	8	9	10	
							Factor	Amount (Cols.4 x 5)	Factor	Amount (Cols. 4 x 7)	Factor	Amount (Cols. 4 x 9)	
SHORT-TERM BONDS													
18.		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 Num- ber	NAIC Desig- nation	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)
		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	2	3	4	Basic Contribution		Reserve Objective		Maximum Reserve	
			Book/Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	5	6	7	8	9	10
							Factor	Amount (Cols.4 x 5)	Factor	Amount (Cols. 4 x 7)	Factor	Amount (Cols. 4 x 9)
COMMON STOCK												
1.		Unaffiliated - Public	1,744,773	XXX	XXX	1,744,773	0.0000	0	0.1580 (a)	275,674	0.1580 (a)	275,674
2.		Unaffiliated - Private		XXX	XXX	0	0.0000	0	0.1945	0	0.1945	0
3.		Federal Home Loan Bank		XXX	XXX	0	0.0000	0	0.0061	0	0.0097	0
4.		Affiliated - Life with AVR		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
Affiliated - Investment Subsidiary:												
5.		Fixed Income - Exempt Obligations				0	XXX		XXX		XXX	
6.		Fixed Income - Highest Quality				0	XXX		XXX		XXX	
7.		Fixed Income - High Quality				0	XXX		XXX		XXX	
8.		Fixed Income - Medium Quality				0	XXX		XXX		XXX	
9.		Fixed Income - Low Quality				0	XXX		XXX		XXX	
10.		Fixed Income - Lower Quality				0	XXX		XXX		XXX	
11.		Fixed Income - In/Near Default				0	XXX		XXX		XXX	
12.		Unaffiliated Common Stock - Public				0	0.0000	0	0.1580 (a)	0	0.1580 (a)	0
13.		Unaffiliated Common Stock - Private				0	0.0000	0	0.1945	0	0.1945	0
14.		Real Estate				0	(b)	0	(b)	0	(b)	0
15.		Affiliated - Certain Other (See SVO Purposes and Procedures Manual)		XXX	XXX	0	0.0000	0	0.1580	0	0.1580	0
16.		Affiliated - All Other		XXX	XXX	0	0.0000	0	0.1945	0	0.1945	0
17.		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												
18.		Home Office Property (General Account only)	433,860			433,860	0.0000	0	0.0912	39,568	0.0912	39,568
19.		Investment Properties	202,060			202,060	0.0000	0	0.0912	18,428	0.0912	18,428
20.		Properties Acquired in Satisfaction of Debt				0	0.0000	0	0.1337	0	0.1337	0
21.		Total Real Estate (Sum of Lines 18 through 20)	635,920	0	0	635,920	XXX	0	XXX	57,996	XXX	57,996
OTHER INVESTED ASSETS												
INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF BONDS												
22.		Exempt Obligations		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
23.	1	Highest Quality	10,063,973	XXX	XXX	10,063,973	0.0005	5,032	0.0016	16,102	0.0033	33,211
24.	2	High Quality		XXX	XXX	0	0.0021	0	0.0064	0	0.0106	0
25.	3	Medium Quality		XXX	XXX	0	0.0099	0	0.0263	0	0.0376	0
26.	4	Low Quality		XXX	XXX	0	0.0245	0	0.0572	0	0.0817	0
27.	5	Lower Quality		XXX	XXX	0	0.0630	0	0.1128	0	0.1880	0
28.	6	In or Near Default		XXX	XXX	0	0.0000	0	0.2370	0	0.2370	0
29.		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

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU

ASSET VALUATION RESERVE (Continued)

BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS

EQUITY AND OTHER INVESTED ASSET COMPONENT

Line Number	NAIC Designation	Description	1	2	3	4	Basic Contribution		Reserve Objective		Maximum Reserve	
			Book/Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	5	6	7	8	9	10
							Factor	Amount (Cols.4 x 5)	Factor	Amount (Cols. 4 x 7)	Factor	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	0	0.0011	0	0.0057	0	0.0074	0
39.		Mortgages - CM2 - High Quality			XXX	0	0.0040	0	0.0114	0	0.0149	0
40.		Mortgages - CM3 - Medium Quality			XXX	0	0.0069	0	0.0200	0	0.0257	0
41.		Mortgages - CM4 - Low Medium Quality			XXX	0	0.0120	0	0.0343	0	0.0428	0
42.		Mortgages - CM5 - Low Quality			XXX	0	0.0183	0	0.0486	0	0.0628	0
43.		Residential Mortgages - Insured or Guaranteed			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	0	0.0003	0	0.0007	0	0.0011	0
		Overdue, Not in Process Affiliated:										
46.		Farm Mortgages			XXX	0	0.0480	0	0.0868	0	0.1371	0
47.		Residential Mortgages - Insured or Guaranteed			XXX	0	0.0006	0	0.0014	0	0.0023	0
48.		Residential Mortgages - All Other			XXX	0	0.0029	0	0.0066	0	0.0103	0
49.		Commercial Mortgages - Insured or Guaranteed			XXX	0	0.0006	0	0.0014	0	0.0023	0
50.		Commercial Mortgages - All Other			XXX	0	0.0480	0	0.0868	0	0.1371	0
		In Process of Foreclosure Affiliated:										
51.		Farm Mortgages			XXX	0	0.0000	0	0.1942	0	0.1942	0
52.		Residential Mortgages - Insured or Guaranteed			XXX	0	0.0000	0	0.0046	0	0.0046	0
53.		Residential Mortgages - All Other			XXX	0	0.0000	0	0.0149	0	0.0149	0
54.		Commercial Mortgages - Insured or Guaranteed			XXX	0	0.0000	0	0.0046	0	0.0046	0
55.		Commercial Mortgages - All Other			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	0	(c)	0	(c)	0	(c)	0
58.		Unaffiliated - In Good Standing Defeased With Government Securities			XXX	0	0.0011	0	0.0057	0	0.0074	0
59.		Unaffiliated - In Good Standing Primarily Senior			XXX	0	0.0040	0	0.0114	0	0.0149	0
60.		Unaffiliated - In Good Standing All Other			XXX	0	0.0069	0	0.0200	0	0.0257	0
61.		Unaffiliated - Overdue, Not in Process			XXX	0	0.0480	0	0.0868	0	0.1371	0
62.		Unaffiliated - In Process of Foreclosure			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

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU

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 COMMON STOCK										
65.		Unaffiliated Public		XXX	XXX	0	0.0000	0	0.1580 (a)	0	0.1580 (a)	0
66.		Unaffiliated Private		XXX	XXX	0	0.0000	0	0.1945	0	0.1945	0
67.		Affiliated Life with AVR		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
68.		Affiliated Certain Other (See SVO Purposes & Procedures Manual)		XXX	XXX	0	0.0000	0	0.1580	0	0.1580	0
69.		Affiliated Other - All Other		XXX	XXX	0	0.0000	0	0.1945	0	0.1945	0
70.		Total with Common Stock Characteristics (Sum of Lines 65 through 69)	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF REAL ESTATE										
71.		Home Office Property (General Account only)				0	0.0000	0	0.0912	0	0.0912	0
72.		Investment Properties				0	0.0000	0	0.0912	0	0.0912	0
73.		Properties Acquired in Satisfaction of Debt				0	0.0000	0	0.1337	0	0.1337	0
74.		Total with Real Estate Characteristics (Sum of Lines 71 through 73)	0	0	0	0	XXX	0	XXX	0	XXX	0
		LOW INCOME HOUSING TAX CREDIT INVESTMENTS										
75.		Guaranteed Federal Low Income Housing Tax Credit	0			0	0.0003	0	0.0006	0	0.0010	0
76.		Non-guaranteed Federal Low Income Housing Tax Credit	0			0	0.0063	0	0.0120	0	0.0190	0
77.		Guaranteed State Low Income Housing Tax Credit	0			0	0.0003	0	0.0006	0	0.0010	0
78.		Non-guaranteed State Low Income Housing Tax Credit	0			0	0.0063	0	0.0120	0	0.0190	0
79.		All Other Low Income Housing Tax Credit	0			0	0.0273	0	0.0600	0	0.0975	0
80.		Total LIHTC (Sum of Lines 75 through 79)	0	0	0	0	XXX	0	XXX	0	XXX	0
		RESIDUAL TRANCHES OR INTERESTS										
81.		Fixed Income Instruments - Unaffiliated	0	XXX	XXX	0	0.0000	0	0.1580	0	0.1580	0
82.		Fixed Income Instruments - Affiliated	0	XXX	XXX	0	0.0000	0	0.1580	0	0.1580	0
83.		Common Stock - Unaffiliated	0	XXX	XXX	0	0.0000	0	0.1580	0	0.1580	0
84.		Common Stock - Affiliated	0	XXX	XXX	0	0.0000	0	0.1580	0	0.1580	0
85.		Preferred Stock - Unaffiliated	0	XXX	XXX	0	0.0000	0	0.1580	0	0.1580	0
86.		Preferred Stock - Affiliated	0	XXX	XXX	0	0.0000	0	0.1580	0	0.1580	0
87.		Real Estate - Unaffiliated	0			0	0.0000	0	0.1580	0	0.1580	0
88.		Real Estate - Affiliated	0			0	0.0000	0	0.1580	0	0.1580	0
89.		Mortgage Loans - Unaffiliated	0	XXX	XXX	0	0.0000	0	0.1580	0	0.1580	0
90.		Mortgage Loans - Affiliated	0	XXX	XXX	0	0.0000	0	0.1580	0	0.1580	0
91.		Other - Unaffiliated	0	XXX	XXX	0	0.0000	0	0.1580	0	0.1580	0
92.		Other - Affiliated	0	XXX	XXX	0	0.0000	0	0.1580	0	0.1580	0
93.		Total Residual Tranches or Interests (Sum of Lines 81 through 92)	0	0	0	0	XXX	0	XXX	0	XXX	0
		ALL OTHER INVESTMENTS										
94.		NAIC 1 Working Capital Finance Investments		XXX		0	0.0000	0	0.0042	0	0.0042	0
95.		NAIC 2 Working Capital Finance Investments		XXX		0	0.0000	0	0.0137	0	0.0137	0
96.		Other Invested Assets - Schedule BA		XXX		0	0.0000	0	0.1580	0	0.1580	0
97.		Other Short-Term Invested Assets - Schedule DA		XXX		0	0.0000	0	0.1580	0	0.1580	0
98.		Total All Other (Sum of Lines 94, 95, 96 and 97)	0	XXX	0	0	XXX	0	XXX	0	XXX	0
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	10		12	13		
								Current Year	Prior Year		Current Year	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 6

Five 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
23. Funds deposited by and withheld from (F)		0	0	0	0
24. Letters of credit (L)		0	0	0	0
25. Trust agreements (T)		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

			Direct Business Only					
			1	2	3	4	5	6
States, Etc.			Life (Group and Individual)	Annuities (Group and Individual)	Disability Income (Group and Individual)	Long-Term Care (Group and Individual)	Deposit-Type Contracts	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

The following supplemental reports are required to be filed as part of your annual statement filing if your company is engaged in the type of business covered by the supplement. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a “NONE” report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

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

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU

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:

10.
11.
12.
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47.

- 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.

Trusted Surplus Statement [Document Identifier 490]
15.

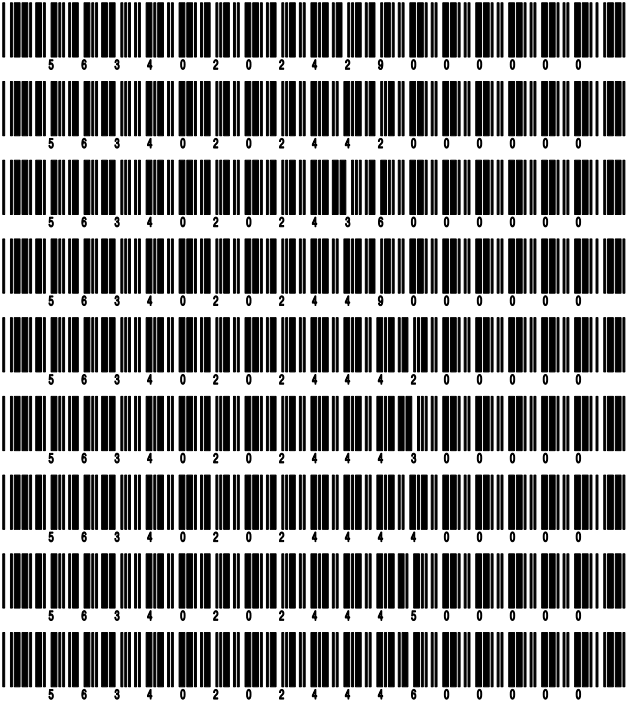
Actuarial Opinion on X-Factors [Document Identifier 442]
16.

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]	 5 6 3 4 0 2 0 2 4 4 4 7 0 0 0 0 0
21.	Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI [Document Identifier 448]	 5 6 3 4 0 2 0 2 4 4 4 8 0 0 0 0 0
22.	Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value) [Document Identifier 449]	 5 6 3 4 0 2 0 2 4 4 4 9 0 0 0 0 0
24.	C-3 RBC Certifications Required Under C-3 Phase II [Document Identifier 451]	 5 6 3 4 0 2 0 2 4 4 5 1 0 0 0 0 0
25.	Actuarial Certifications Related to Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities [Document Identifier 452]	 5 6 3 4 0 2 0 2 4 4 5 2 0 0 0 0 0
26.	Modified Guaranteed Annuity Model Regulation [Document Identifier 453]	 5 6 3 4 0 2 0 2 4 4 5 3 0 0 0 0 0
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]	 5 6 3 4 0 2 0 2 4 4 5 4 0 0 0 0 0
28.	Workers' Compensation Carve-Out Supplement [Document Identifier 495]	 5 6 3 4 0 2 0 2 4 4 9 5 0 0 0 0 0
31.	Relief from the five-year rotation requirement for lead audit partner [Document Identifier 224]	 5 6 3 4 0 2 0 2 4 2 2 4 0 0 0 0 0
32.	Relief from the one-year cooling off period for independent CPA [Document Identifier 225]	 5 6 3 4 0 2 0 2 4 2 2 5 0 0 0 0 0
33.	Relief from the Requirements for Audit Committees [Document Identifier 226]	 5 6 3 4 0 2 0 2 4 2 2 6 0 0 0 0 0
35.	Health Care Receivables Supplement [Document Identifier 475]	 5 6 3 4 0 2 0 2 4 4 7 5 0 0 0 0 0
36.	Market Conduct Annual Statement (MCAS) Premium Exhibit [Document Identifier 600]	 5 6 3 4 0 2 0 2 4 6 0 0 0 0 0 0 0
38.	Long-Term Care Experience Reporting Forms [Document Identifier 306]	 5 6 3 4 0 2 0 2 4 3 0 6 0 0 0 0 0
39.	Credit Insurance Experience Exhibit [Document Identifier 230]	 5 6 3 4 0 2 0 2 4 2 3 0 0 0 0 0 0
40.	Accident and Health Policy Experience Exhibit [Document Identifier 210]	 5 6 3 4 0 2 0 2 4 2 1 0 0 0 0 0 0
41.	Supplemental Health Care Exhibit (Parts 1 and 2) [Document Identifier 216]	 5 6 3 4 0 2 0 2 4 2 1 6 0 0 0 0 0
43.	Supplemental Term and Universal Life Insurance Reinsurance Exhibit [Document Identifier 345]	 5 6 3 4 0 2 0 2 4 3 4 5 0 0 0 0 0
44.	Variable Annuities Supplement [Document Identifier 286]	 5 6 3 4 0 2 0 2 4 2 8 6 0 0 0 0 0
45.	Executive Summary of the PBR Actuarial Report [Document Identifier 457]	 5 6 3 4 0 2 0 2 4 4 5 7 0 0 0 0 0
46.	Life Summary of the PBR Actuarial Report [Document Identifier 458]	 5 6 3 4 0 2 0 2 4 4 5 8 0 0 0 0 0
47.	Variable Annuities Summary of the PBR Actuarial Report [Document Identifier 459]	 5 6 3 4 0 2 0 2 4 4 5 9 0 0 0 0 0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE FCSU

OVERFLOW PAGE FOR WRITE-INS

Additional Write-ins for Liabilities Line 25

		1	2
		Current Year	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			
		1 Insured	2 Uninsured	3 Insured	4 Uninsured	Total Cash			
1. Premiums Collected									
1.1 Standard Coverage									
1.11 With Reinsurance Coverage			XXX		XXX				
1.12 Without Reinsurance Coverage			XXX		XXX				
1.13 Risk-Corridor Payment Adjustments			XXX		XXX				
1.2 Supplemental Benefits			XXX		XXX				
2. Premiums Due and Uncollected-change									
2.1 Standard Coverage									
2.11 With Reinsurance Coverage			XXX		XXX			XXX	
2.12 Without Reinsurance Coverage			XXX		XXX			XXX	
2.2 Supplemental Benefits			XXX		XXX			XXX	
3. Unearned Premium and Advance Premium-change									
3.1 Standard Coverage									
3.11 With Reinsurance Coverage			XXX		XXX			XXX	
3.12 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									
5.11 With Reinsurance Coverage			XXX		XXX			XXX	
5.12 Without Reinsurance Coverage			XXX		XXX			XXX	
5.13 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									
7.11 With Reinsurance Coverage			XXX		XXX				
7.12 Without Reinsurance Coverage			XXX		XXX				
7.2 Supplemental Benefits			XXX		XXX				
8. Claim Reserves and Liabilities-change									
8.1 Standard Coverage									
8.11 With Reinsurance Coverage			XXX		XXX			XXX	
8.12 Without Reinsurance Coverage			XXX		XXX			XXX	
8.2 Supplemental Benefits			XXX		XXX			XXX	
9. Health Care Receivables-change									
9.1 Standard Coverage									
9.11 With Reinsurance Coverage			XXX		XXX			XXX	
9.12 Without Reinsurance Coverage			XXX		XXX			XXX	
9.2 Supplemental Benefits			XXX		XXX			XXX	
10. Claims Incurred									
10.1 Standard Coverage									
10.11 With Reinsurance Coverage			XXX		XXX			XXX	
10.12 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				

NONE



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

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)

[illegible]

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 [X] 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 [X]	
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 [X]
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 [X]
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 Exemption from the reserve requirements of VM-20 of the Valuation Manual by their state of domicile?	Yes [] No [X]
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 [X]
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 [X]



SUPPLEMENT FOR THE YEAR 2024 OF THE FCSU
SCHEDULE O SUPPLEMENT

For 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	NONE				
2.	2020					
3.	2021					
4.	2022					
5.	2023					
6.	2024					

Section B - Other Accident and Health

1.	Prior	NONE				
2.	2020					
3.	2021					
4.	2022					
5.	2023					
6.	2024					

Section C - Credit Accident and Health

1.	Prior	NONE				
2.	2020					
3.	2021					
4.	2022					
5.	2023					
6.	2024					

Section D -

1.	Prior	NONE				
2.	2020					
3.	2021					
4.	2022					
5.	2023					
6.	2024					

Section E -

1.	Prior	NONE				
2.	2020					
3.	2021					
4.	2022					
5.	2023					
6.	2024					

Section F -

1.	Prior	NONE				
2.	2020					
3.	2021					
4.	2022					
5.	2023					
6.	2024					

Section G -

1.	Prior	NONE				
2.	2020					
3.	2021					
4.	2022					
5.	2023					
6.	2024					

(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	4 2023	5 2024
1.	2020	NONE				
2.	2021					
3.	2022					
4.	2023					
5.	2024					

Section B - Other Accident and Health

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

Section C - Credit Accident and Health

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

Section D -

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

Section E -

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

Section F -

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

Section G -

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