



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
Grange Life Insurance Company

NAIC Group Code 00588 (Current Period), 00588 (Prior Period) NAIC Company Code 71218 Employer's ID Number 31-0739286

Organized under the Laws of Ohio, State of Domicile or Port of Entry Ohio
Country of Domicile United States

Licensed as business type: Life, Accident and Health [X] Fraternal Benefit Societies []
Incorporated/Organized 03/05/1968 Commenced Business 07/01/1968
Statutory Home Office 671 South High Street, Columbus, OH, US 43206-1066
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 671 South High Street
(Street and Number)
Columbus, OH, US 43206-1066 800-399-3797
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Mail Address P.O. Box 182828, Columbus, OH, US 43218-2828
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 3520 Broadway
(Street and Number)
Kansas City, MO, US 64111-2565 800-399-3797
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number) (Extension)

Internet Web Site Address www.grangeinsurance.com

Statutory Statement Contact Jennifer Kay Pieper, 816-753-7000
(Name) (Area Code) (Telephone Number) (Extension)
Jenny.Pieper@kclife.com 816-531-8979
(E-Mail Address) (Fax Number)

OFFICERS

Name	Title	Name	Title
WALTER EDWIN BIXBY	PRESIDENT AND CHIEF EXECUTIVE OFFICER	ALAN CRAIG MASON Jr.	GENERAL COUNSEL & SECRETARY
JENNIFER KAY PIEPER	CONTROLLER		

OTHER OFFICERS

ROBERT PHILIP BIXBY	CHAIRMAN OF THE BOARD	DAVID ARNOLD LAIRD	CHIEF FINANCIAL OFFICER
MARK ALAN MILTON	ACTUARY		

DIRECTORS OR TRUSTEES

ROBERT PHILIP BIXBY	WALTER EDWIN BIXBY	DAVID ARNOLD LAIRD	MARK ALAN MILTON
STEPHEN EDWARD ROPP			

State of Missouri
County of Jackson

ss

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

WALTER EDWIN BIXBY
PRESIDENT AND CHIEF EXECUTIVE OFFICER

ALAN CRAIG MASON Jr.
GENERAL COUNSEL & SECRETARY

JENNIFER KAY PIEPER
CONTROLLER

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

Subscribed and sworn to before me this day of ,

Kimberley A. Rose, Legal Assistant
August 26, 2025



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (b)

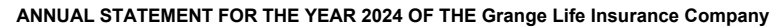
NAIC Group Code 00588		DIRECT BUSINESS IN THE STATE OF Alabama						DURING THE YEAR 2024		NAIC Company Code 71218		
Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left 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	36,112						0	18,000		1,877	151	20,028
3. Term	83,964						0					0
4. Indexed							0					0
5. Universal	31,897						0	41,450		13,640	75	55,165
6. Universal with secondary guarantees	804						0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other (f)							0					0
11. Total Individual Life	152,777	0	0	0	0	0	0	59,450	0	15,517	226	75,193
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 (f)							0					0
19. Total Group Life	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 (f)							0					0
26. Total Individual Annuities	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 (f)							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	152,777 (c)	0	0	0	0	0	0	59,450	0	15,517	226	75,193

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (Continued) ^(b)

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit						
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year ^(b)		
		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	0	0	0	0	0	
2. Whole									0	0	0	0	0	3	32,711	65	1,851,063
3. Term									0	0	0	0	0	(11)	(1,970,000)	164	51,317,498
4. Indexed									0	0	0	0	0	0	0	0	0
5. Universal									0	0	0	0	0	(1)	4,019	39	4,540,307
6. Universal with secondary guarantees									0	0	0	0	0	0	0	1	50,000
7. Variable									0	0	0	0	0	0	0	0	0
8. Variable universal									0	0	0	0	0	0	0	0	0
9. Credit									0	0	0	0	0	0	0	0	0
10. Other	(f)								0	0	0	0	0	0	0	0	0
11. Total Individual Life	0	0	0	0	0	0	0	0	0	0	0	0	0	(9)	(1,933,270)	269	57,758,868
Group Life																	
12. Whole									0	0	0					0	0
13. Term									0	0	0					0	0
14. Universal									0	0	0					0	0
15. Variable									0	0	0					0	0
16. Variable universal									0	0	0					0	0
17. Credit									0	0	0					0	(a)
18. Other	(f)								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	0
Individual Annuities																	
20. Fixed									0	0	0	0	0	0	0	0	0
21. Indexed									0	0	0	0	0	0	0	0	0
22. Variable with guarantees									0	0	0	0	0	0	0	0	0
23. Variable without guarantees									0	0	0	0	0	0	0	0	0
24. Life contingent payout									0	0	0	0	0	0	0	0	0
25. Other	(f)								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	0
Group Annuities																	
27. Fixed									0	0	0	0	0	0	0	0	0
28. Indexed									0	0	0	0	0	0	0	0	0
29. Variable with guarantees									0	0	0	0	0	0	0	0	0
30. Variable without guarantees									0	0	0	0	0	0	0	0	0
31. Life contingent payout									0	0	0	0	0	0	0	0	0
32. Other	(f)								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	0
Accident and Health																	
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						0	0
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						0	0
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						0	0
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						0	0
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						0	0
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						0	0
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						0	0
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						0	0
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						0	0
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						0	0
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						0	0
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						0	0
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	(9)	(1,933,270)	269	57,758,868

(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 \$

**DIRECT BUSINESS IN THE STATE OF Alaska**

NAIC Company Code 71218

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		7,146						.0					.0
4. Indexed								.0					.0
5. Universal		4,052						.0					.0
6. Universal with secondary guarantees								.0					.0
7. Variable								.0					.0
8. Variable universal								.0					.0
9. Credit								.0					.0
10. Other		(f)						.0					.0
11. Total Individual Life		11,198	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		(f)						.0					.0
19. Total Group Life		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		(f)						.0					.0
26. Total Individual Annuities		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		(f)						.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		(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		11,198 (c)	0	0	0	0	0	0	0	0	0	0	0

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ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (Continued) ^(b)

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit						
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year ^(b)		
		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	.0	.0	.0	.0	.0	.0	
2. Whole								.0	.0	.0	.0	.0	.0	.0	.0	.0	
3. Term								.0	.0	.0	.0	.0	.0	(1)	.6	1,654,874	
4. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
5. Universal								.0	.0	.0	.0	.0	.0	.0	.3	943,005	
6. Universal with secondary guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
7. Variable								.0	.0	.0	.0	.0	.0	.0	.0	.0	
8. Variable universal								.0	.0	.0	.0	.0	.0	.0	.0	.0	
9. Credit								.0	.0	.0	.0	.0	.0	.0	.0	.0	
10. Other	(f)							.0	.0	.0	.0	.0	.0	.0	.0	.0	
11. Total Individual Life	0	0	0	0	0	0	0	0	0	0	0	0	(1)	(300,244)	9	2,597,879	
Group Life																	
12. Whole								.0	.0	.0					.0	.0	
13. Term								.0	.0	.0					.0	.0	
14. Universal								.0	.0	.0					.0	.0	
15. Variable								.0	.0	.0					.0	.0	
16. Variable universal								.0	.0	.0					.0	.0	
17. Credit								.0	.0	.0					.0	.0 (a)	
18. Other	(f)							.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																	
20. Fixed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
21. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
22. Variable with guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
23. Variable without guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
24. Life contingent payout								.0	.0	.0	.0	.0	.0	.0	.0	.0	
25. Other	(f)							.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																	
27. Fixed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
28. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
29. Variable with guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
30. Variable without guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
31. Life contingent payout								.0	.0	.0	.0	.0	.0	.0	.0	.0	
32. Other	(f)							.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																	
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
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	(1)	(300,244)	9	2,597,879	

(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 Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) ^(b)

NAIC Group Code	00588
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DIRECT BUSINESS IN THE STATE OF American Samoa

DURING THE YEAR 2024

NAIC Company Code 71218

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 (f)							.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 (f)							.0					.0
19. Total Group Life	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 (f)							.0					.0
26. Total Individual Annuities	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 (f)							.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 (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	0 (c)	0	0	0	0	0	0	0	0	0	0	0

24.AS

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (Continued) ^(b)

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit						
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year ^(b)		
		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	.0	.0	.0	.0	.0	.0	
2. Whole								.0	.0	.0	.0	.0	.0	.0	.0	.0	
3. Term								.0	.0	.0	.0	.0	.0	.0	.0	.0	
4. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
5. Universal								.0	.0	.0	.0	.0	.0	.0	.0	.0	
6. Universal with secondary guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
7. Variable								.0	.0	.0	.0	.0	.0	.0	.0	.0	
8. Variable universal								.0	.0	.0	.0	.0	.0	.0	.0	.0	
9. Credit								.0	.0	.0	.0	.0	.0	.0	.0	.0	
10. Other	(f)							.0	.0	.0	.0	.0	.0	.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					.0	.0	
13. Term								.0	.0	.0					.0	.0	
14. Universal								.0	.0	.0					.0	.0	
15. Variable								.0	.0	.0					.0	.0	
16. Variable universal								.0	.0	.0					.0	.0	
17. Credit								.0	.0	.0					.0	.0 (a)	
18. Other	(f)							.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																	
20. Fixed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
21. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
22. Variable with guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
23. Variable without guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
24. Life contingent payout								.0	.0	.0	.0	.0	.0	.0	.0	.0	
25. Other	(f)							.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																	
27. Fixed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
28. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
29. Variable with guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
30. Variable without guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
31. Life contingent payout								.0	.0	.0	.0	.0	.0	.0	.0	.0	
32. Other	(f)							.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																	
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
46. Total Accident and Health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	
47. Total	0	0	0	0	0	0	0	0	0	0	0	0	0	0	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: \$ _____.
(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 Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (b)

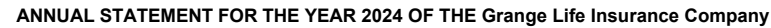
NAIC Group Code 00588		DIRECT BUSINESS IN THE STATE OF Arizona						DURING THE YEAR 2024		NAIC Company Code 71218		
Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left 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	24,089		768				768	55,092		704	186	55,981
3. Term	68,896						0	50,000			198	50,198
4. Indexed							0					0
5. Universal	23,323						0	100,000		7,000	237	107,237
6. Universal with secondary guarantees	55,612						0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other (f)							0					0
11. Total Individual Life	171,920	0	768	0	0	0	768	205,092	0	7,704	621	213,416
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 (f)							0					0
19. Total Group Life	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 (f)							0					0
26. Total Individual Annuities	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 (f)							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	171,920 (c)	0	768	0	0	0	768	205,092	0	7,704	621	213,416

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (Continued) ^(b)

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit						
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year ^(b)		
		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	.0	.0	.0	.0	.0	.0	
2. Whole								.0	.0	.0	.0	.0	(3)	141,205	40	1,110,277	
3. Term								.0	.0	.0	.0	.0	(3)	1,678,000	126	36,413,387	
4. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
5. Universal								.0	.0	.0	.0	.0	.1	(301,542)	30	3,101,091	
6. Universal with secondary guarantees								.0	.0	.0	.0	.0	(1)	(50,000)	.4	4,150,000	
7. Variable								.0	.0	.0	.0	.0	.0	.0	.0	.0	
8. Variable universal								.0	.0	.0	.0	.0	.0	.0	.0	.0	
9. Credit								.0	.0	.0	.0	.0	.0	.0	.0	.0	
10. Other	(f)							.0	.0	.0	.0	.0	.0	.0	.0	.0	
11. Total Individual Life	0	0	0	0	0	0	0	0	0	0	0	0	(6)	1,467,663	200	44,774,755	
Group Life																	
12. Whole								.0	.0	.0					.0	.0	
13. Term								.0	.0	.0					.0	.0	
14. Universal								.0	.0	.0					.0	.0	
15. Variable								.0	.0	.0					.0	.0	
16. Variable universal								.0	.0	.0					.0	.0	
17. Credit								.0	.0	.0					.0	.0 (a)	
18. Other	(f)							.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																	
20. Fixed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
21. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
22. Variable with guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
23. Variable without guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
24. Life contingent payout								.0	.0	.0	.0	.0	.0	.0	.0	.0	
25. Other	(f)							.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																	
27. Fixed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
28. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
29. Variable with guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
30. Variable without guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
31. Life contingent payout								.0	.0	.0	.0	.0	.0	.0	.0	.0	
32. Other	(f)							.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																	
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
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	(6)	1,467,663	200	44,774,755	

(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 \$



DURING THE YEAR 2024

DIRECT BUSINESS IN THE STATE OF Arkansas

Line of Business		Dividends to Policyholders/Refunds to Members						Claims and Benefits Paid					
		1	2	3	4	5	6	7	8	9	10	11	12
		Premiums and Annuities Considerations	Other Considerations	Paid in Cash or Left on Deposit	Applied to Pay Renewal Premiums	Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	Other	Total (Col. 3+4+5+6)	Death and Annuity Benefits	Matured Endowments	Surrender Values and Withdrawals for Life Contracts	All Other Benefits	Total (Sum Columns 8 through 11)
Individual Life													
1.	Industrial							.0					.0
2.	Whole	6,761						.0					.0
3.	Term	26,352						.0					.0
4.	Indexed							.0					.0
5.	Universal	9,895						.0					.0
6.	Universal with secondary guarantees							.0					.0
7.	Variable							.0					.0
8.	Variable universal							.0					.0
9.	Credit							.0					.0
10.	Other (f)							.0					.0
11.	Total Individual Life	43,008	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 (f)							.0					.0
19.	Total Group Life	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 (f)							.0					.0
26.	Total Individual Annuities	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 (f)							.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 (e)							.0	XXX	XXX	XXX		.0
41.	Title XIX Medicaid												

24.AR

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (Continued) ^(b)

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit						
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year ^(b)		
		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	.0	.0	.0	.0	.0	.0	
2. Whole								.0	.0	.0	.0	.0	.0	3,011	13	737,512	
3. Term								.0	.0	.0	.0	.0	.1	(640,000)	34	8,330,000	
4. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
5. Universal								.0	.0	.0	.0	.0	.0	(20,557)	11	1,136,754	
6. Universal with secondary guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
7. Variable								.0	.0	.0	.0	.0	.0	.0	.0	.0	
8. Variable universal								.0	.0	.0	.0	.0	.0	.0	.0	.0	
9. Credit								.0	.0	.0	.0	.0	.0	.0	.0	.0	
10. Other	(f)							.0	.0	.0	.0	.0	.0	.0	.0	.0	
11. Total Individual Life	0	0	0	0	0	0	0	0	0	0	0	0	1	(657,546)	58	10,204,266	
Group Life																	
12. Whole								.0	.0	.0					.0	.0	
13. Term								.0	.0	.0					.0	.0	
14. Universal								.0	.0	.0					.0	.0	
15. Variable								.0	.0	.0					.0	.0	
16. Variable universal								.0	.0	.0					.0	.0	
17. Credit								.0	.0	.0					.0	.0 (a)	
18. Other	(f)							.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																	
20. Fixed								.0	.0	.0	.0	.0	.0	3,165	.3	80,364	
21. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
22. Variable with guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
23. Variable without guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
24. Life contingent payout								.0	.0	.0	.0	.0	.0	.0	.0	.0	
25. Other	(f)							.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	3,165	3	80,364	
Group Annuities																	
27. Fixed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
28. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
29. Variable with guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
30. Variable without guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
31. Life contingent payout								.0	.0	.0	.0	.0	.0	.0	.0	.0	
32. Other	(f)							.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																	
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
46. Total Accident and Health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0		0		0	
47. Total	0	0	0	0	0	0	0	0	0	0	0	0	1	(654,381)	61	10,284,630	

(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 Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (b)

NAIC Group Code 00588		DIRECT BUSINESS IN THE STATE OF California						DURING THE YEAR 2024					NAIC Company Code 71218	
Line of Business		1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members				Claims and Benefits Paid					12 Total (Sum Columns 8 through 11)	
				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		
Individual Life														
1.	Industrial							0						0
2.	Whole	16,865		706				706	15,000		5,479	10		20,489
3.	Term	76,098									7,905			7,905
4.	Indexed							0						0
5.	Universal	38,764						0						0
6.	Universal with secondary guarantees							0						0
7.	Variable							0						0
8.	Variable universal							0						0
9.	Credit							0						0
10.	Other (f)							0						0
11.	Total Individual Life	131,727	0	706	0	0	0	706	15,000	0	13,384	10		28,394
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 (f)							0						0
19.	Total Group Life	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 (f)							0						0
26.	Total Individual Annuities	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 (f)							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)	158						0	XXX	XXX	XXX	0		0
44.	Long-term care (d)							0	XXX	XXX	XXX			0
45.	Other health (d)	0						0	XXX	XXX	XXX	0		0
46.	Total Accident and Health	158	0	0	0	0	0	0	XXX	XXX	XXX	0		0
47.	Total	131,885 (c)	0	706	0	0	0	706	15,000	0	13,384	10		28,394



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) ^(b)

NAIC Group Code	00588
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DIRECT BUSINESS IN THE STATE OF Canada

DURING THE YEAR 2024

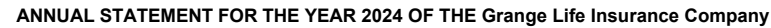
NAIC Company Code 71218



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (b)

NAIC Group Code 00588		DIRECT BUSINESS IN THE STATE OF Colorado						DURING THE YEAR 2024		NAIC Company Code 71218		
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	6,476						0	45,253			148	45,401
3. Term	43,211						0					0
4. Indexed							0					0
5. Universal	15,780						0					0
6. Universal with secondary guarantees	2,292						0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other (f)							0					0
11. Total Individual Life	67,759	0	0	0	0	0	0	45,253	0	0	148	45,401
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 (f)							0					0
19. Total Group Life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed							0	10,129				10,129
21. Indexed							0					0
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout							0					0
25. Other (f)							0					0
26. Total Individual Annuities	0	0	0	0	0	0	0	10,129	0	0	0	10,129
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 (f)							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	67,759 (c)	0	0	0	0	0	0	55,382	0	0	148	55,530



DURING THE YEAR 2024

DIRECT BUSINESS IN THE STATE OF Connecticut

24.CT



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (b)

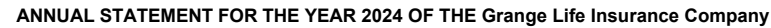
NAIC Group Code		DIRECT BUSINESS IN THE STATE OF Delaware						DURING THE YEAR 2024		NAIC Company Code 71218			
Line of Business	1	2	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid					
			3	4	5	6	7	8	9	10	11	12	
	Premiums and Annuities Considerations	Other Considerations	Paid in Cash or Left on Deposit	Applied to Pay Renewal Premiums	Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	Other	Total (Col. 3+4+5+6)	Death and Annuity Benefits	Matured Endowments	Surrender Values and Withdrawals for Life Contracts	All Other Benefits	Total (Sum Columns 8 through 11)	
Individual Life													
1. Industrial							.0					.0	
2. Whole	1,448						.0	75,000			266	75,266	
3. Term	4,443						.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 (f)							.0					.0	
11. Total Individual Life	5,891	0	0	0	0	0	0	75,000	0	0	266	75,266	
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 (f)							.0					.0	
19. Total Group Life	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 (f)							.0					.0	
26. Total Individual Annuities	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 (f)							.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	5,891 (c)	0	0	0	0	0	0	75,000	0	0	266	75,266	

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (Continued) ^(b)

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit						
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year ^(b)		
		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	.0	.0	.0	.0	.0	.0	
2. Whole								.0	.0	.0	.0	.0	.0	(25,000)	.5	95,000	
3. Term								.0	.0	.0	.0	.0	.0	.0	.7	1,700,000	
4. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
5. Universal								.0	.0	.0	.0	.0	.0	.0	.1	50,000	
6. Universal with secondary guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
7. Variable								.0	.0	.0	.0	.0	.0	.0	.0	.0	
8. Variable universal								.0	.0	.0	.0	.0	.0	.0	.0	.0	
9. Credit								.0	.0	.0	.0	.0	.0	.0	.0	.0	
10. Other	(f)							.0	.0	.0	.0	.0	.0	.0	.0	.0	
11. Total Individual Life	0	0	0	0	0	0	0	0	0	0	0	0	0	(25,000)	13	1,845,000	
Group Life																	
12. Whole								.0	.0	.0					.0	.0	
13. Term								.0	.0	.0					.0	.0	
14. Universal								.0	.0	.0					.0	.0	
15. Variable								.0	.0	.0					.0	.0	
16. Variable universal								.0	.0	.0					.0	.0	
17. Credit								.0	.0	.0					.0	.0 (a)	
18. Other	(f)							.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																	
20. Fixed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
21. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
22. Variable with guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
23. Variable without guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
24. Life contingent payout								.0	.0	.0	.0	.0	.0	.0	.0	.0	
25. Other	(f)							.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																	
27. Fixed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
28. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
29. Variable with guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
30. Variable without guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
31. Life contingent payout								.0	.0	.0	.0	.0	.0	.0	.0	.0	
32. Other	(f)							.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																	
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
46. Total Accident and Health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	
47. Total	0	0	0	0	0	0	0	0	0	0	0	0	0	(25,000)	13	1,845,000	

(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 \$ _____.



DIRECT BUSINESS IN THE STATE OF District of Columbia

NAIC Company Code 71218

24.DC

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (Continued) ^(b)

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit						
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year ^(b)		
		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	.0	.0	.0	.0	.0	.0	
2. Whole								.0	.0	.0	.0	.0	.0	.0	.1	10,000	
3. Term								.0	.0	.0	.0	.0	.0	(1)	5	850,000	
4. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
5. Universal								.0	.0	.0	.0	.0	.0	.0	2	175,000	
6. Universal with secondary guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
7. Variable								.0	.0	.0	.0	.0	.0	.0	.0	.0	
8. Variable universal								.0	.0	.0	.0	.0	.0	.0	.0	.0	
9. Credit								.0	.0	.0	.0	.0	.0	.0	.0	.0	
10. Other	(f)							.0	.0	.0	.0	.0	.0	.0	.0	.0	
11. Total Individual Life	0	0	0	0	0	0	0	0	0	0	0	0	(1)	(500,000)	8	1,035,000	
Group Life																	
12. Whole								.0	.0	.0					.0	.0	
13. Term								.0	.0	.0					.0	.0	
14. Universal								.0	.0	.0					.0	.0	
15. Variable								.0	.0	.0					.0	.0	
16. Variable universal								.0	.0	.0					.0	.0	
17. Credit								.0	.0	.0					.0	.0 (a)	
18. Other	(f)							.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																	
20. Fixed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
21. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
22. Variable with guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
23. Variable without guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
24. Life contingent payout								.0	.0	.0	.0	.0	.0	.0	.0	.0	
25. Other	(f)							.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																	
27. Fixed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
28. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
29. Variable with guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
30. Variable without guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
31. Life contingent payout								.0	.0	.0	.0	.0	.0	.0	.0	.0	
32. Other	(f)							.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																	
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
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	(1)	(500,000)	8	1,035,000	

(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 Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (b)

NAIC Group Code		DIRECT BUSINESS IN THE STATE OF Florida						DURING THE YEAR 2024		NAIC Company Code 71218			
		1	2	Dividends to Policyholders/Refunds to Members				Claims and Benefits Paid					
				3	4	5	6	7	8	9	10	11	12
Line of Business		Premiums and Annuities Considerations	Other Considerations	Paid in Cash or Left on Deposit	Applied to Pay Renewal Premiums	Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	Other	Total (Col. 3+4+5+6)	Death and Annuity Benefits	Matured Endowments	Surrender Values and Withdrawals for Life Contracts	All Other Benefits	Total (Sum Columns 8 through 11)
Individual Life													
1.	Industrial							.0					.0
2.	Whole	195,508		1,282				1,282	191,060		27,722	985	219,767
3.	Term	449,826						.0	385,000		295	1,682	386,977
4.	Indexed							.0					.0
5.	Universal	261,304						.0	250,606		136,956	1,725	389,287
6.	Universal with secondary guarantees	82,969						.0			5,000		5,000
7.	Variable							.0					.0
8.	Variable universal							.0					.0
9.	Credit							.0					.0
10.	Other	(f)						.0					.0
11.	Total Individual Life	989,607	0	1,282	0	0	0	1,282	826,667	0	169,973	4,392	1,001,031
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	(f)						.0					.0
19.	Total Group Life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities													
20.	Fixed	400						.0	22,158				22,158
21.	Indexed							.0					.0
22.	Variable with guarantees							.0					.0
23.	Variable without guarantees							.0					.0
24.	Life contingent payout							.0					.0
25.	Other	(f)						.0					.0
26.	Total Individual Annuities	400	0	0	0	0	0	0	22,158	0	0	0	22,158
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	(f)						.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)	2,805					.0	XXX	XXX	XXX	0	.0
44.	Long-term care	(d)						.0	XXX	XXX	XXX		.0
45.	Other health	(d)	0					.0	XXX	XXX	XXX	0	.0
46.	Total Accident and Health	2,805	0	0	0	0	0	.0	XXX	XXX	XXX	0	.0
47.	Total	992,812 (c)	0	1,282	0	0	0	1,282	848,825	0	169,973	4,392	1,023,189

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (Continued) ^(b)

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit						
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year ^(b)		
		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	.0	.0	.0	.0	.0	.0	
2. Whole								.0	.0	.0	.0	.0	.13	396,136	315	8,681,254	
3. Term								.0	.0	.0	.0	.0	(25)	(2,426,701)	827	220,359,645	
4. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
5. Universal								.0	.0	.0	.0	.0	(9)	(139,199)	252	26,179,876	
6. Universal with secondary guarantees								.0	.0	.0	.0	.0	.4	995,000	22	5,292,500	
7. Variable								.0	.0	.0	.0	.0	.0	.0	.0	.0	
8. Variable universal								.0	.0	.0	.0	.0	.0	.0	.0	.0	
9. Credit								.0	.0	.0	.0	.0	.0	.0	.0	.0	
10. Other	(f)							.0	.0	.0	.0	.0	.0	.0	.0	.0	
11. Total Individual Life	0	0	0	0	0	0	0	0	0	0	0	0	.0	.0	1,416	260,513,275	
Group Life																	
12. Whole								.0	.0	.0					.0	.0	
13. Term								.0	.0	.0					.0	.0	
14. Universal								.0	.0	.0					.0	.0	
15. Variable								.0	.0	.0					.0	.0	
16. Variable universal								.0	.0	.0					.0	.0	
17. Credit								.0	.0	.0					.0	.0 (a)	
18. Other	(f)							.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																	
20. Fixed	22,158	5	22,158					5	22,158	.0	.0	.0	.1	312,926	15	730,680	
21. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
22. Variable with guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
23. Variable without guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
24. Life contingent payout								.0	.0	.0	.0	.0	.0	.0	.0	.0	
25. Other	(f)							.0	.0	.0	.0	.0	.0	.0	.1	.0	
26. Total Individual Annuities	22,158	5	22,158	0	0	0	0	5	22,158	0	0	0	1	312,926	16	730,680	
Group Annuities																	
27. Fixed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
28. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
29. Variable with guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
30. Variable without guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
31. Life contingent payout								.0	.0	.0	.0	.0	.0	.0	.0	.0	
32. Other	(f)							.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																	
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			.0	(747)	.3	1,988	
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			.0	.0	.0	.0	
46. Total Accident and Health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0		(747)	3	1,988	
47. Total	22,158	5	22,158	0	0	0	0	5	22,158	0	0	0	(16)	(862,585)	1,435	261,245,943	

(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 Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (b)

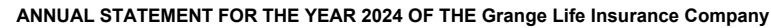
NAIC Group Code		DIRECT BUSINESS IN THE STATE OF Georgia						DURING THE YEAR 2024		NAIC Company Code 71218			
		1	2	Dividends to Policyholders/Refunds to Members				Claims and Benefits Paid					
				3	4	5	6	7	8	9	10	11	12
Line of Business		Premiums and Annuities Considerations	Other Considerations	Paid in Cash or Left on Deposit	Applied to Pay Renewal Premiums	Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	Other	Total (Col. 3+4+5+6)	Death and Annuity Benefits	Matured Endowments	Surrender Values and Withdrawals for Life Contracts	All Other Benefits	Total (Sum Columns 8 through 11)
Individual Life													
1. Industrial								.0					.0
2. Whole		1,460,918							1,087,242		87,279	10,427	1,184,948
3. Term		4,478,956						.0	5,870,000		6,966	32,323	5,909,290
4. Indexed								.0					.0
5. Universal		792,715						.0	1,123,905		184,144	53,818	1,361,867
6. Universal with secondary guarantees		427,534						.0			4,700		4,700
7. Variable								.0					.0
8. Variable universal								.0					.0
9. Credit								.0					.0
10. Other (f)								.0					.0
11. Total Individual Life		7,160,123	0	0	0	0	0	0	8,081,147	0	283,089	96,568	8,460,804
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 (f)								.0					.0
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities													
20. Fixed		1,270						.0	6,258				6,258
21. Indexed								.0					.0
22. Variable with guarantees								.0					.0
23. Variable without guarantees								.0					.0
24. Life contingent payout								.0					.0
25. Other (f)								.0					.0
26. Total Individual Annuities		1,270	0	0	0	0	0	0	6,258	0	0	0	6,258
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 (f)								.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)		6,348						.0	XXX	XXX	XXX	43,332	43,332
44. Long-term care (d)								.0	XXX	XXX	XXX		.0
45. Other health (d)		3,904						.0	XXX	XXX	XXX	0	.0
46. Total Accident and Health		10,252	0	0	0	0	0	0	XXX	XXX	XXX	43,332	43,332
47. Total		7,171,645 (c)	0	0	0	0	0	0	8,087,405	0	283,089	139,900	8,510,394

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (Continued) ^(b)

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit						
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year ^(b)		
		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	.0	.0	.0	.0	.0	.0	
2. Whole	1,151,816	55	1,178,666					55	1,178,666	123,577	.0	.0	(102)	(4,014,478)	2,427	69,213,913	
3. Term	5,428,527	34	5,685,168					34	5,685,168	178,359	.0	.0	(440)	(109,599,796)	5,494	1,600,579,670	
4. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
5. Universal	1,300,566	16	1,238,113					16	1,238,113	337,453	.0	55,000	(49)	(3,875,290)	897	84,562,216	
6. Universal with secondary guarantees								.0	.0	.0	.0	.0	(1)	(79,700)	139	33,658,630	
7. Variable								.0	.0	.0	.0	.0	.0	.0	.0	.0	
8. Variable universal								.0	.0	.0	.0	.0	.0	.0	.0	.0	
9. Credit								.0	.0	.0	.0	.0	.0	.0	.0	.0	
10. Other	(f)							.0	.0	.0	.0	.0	.0	.0	.0	.0	
11. Total Individual Life	7,880,908	105	8,101,947	0	0	0	0	105	8,101,947	639,389	0	55,000	(592)	(117,569,264)	8,957	1,788,014,429	
Group Life																	
12. Whole								.0	.0	.0					.0	.0	
13. Term								.0	.0	.0					.0	.0	
14. Universal								.0	.0	.0					.0	.0	
15. Variable								.0	.0	.0					.0	.0	
16. Variable universal								.0	.0	.0					.0	.0	
17. Credit								.0	.0	.0					.0	.0 (a)	
18. Other	(f)							.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																	
20. Fixed	6,258	3	6,258					3	6,258	.0	.0	.0	.1	18,055	14	397,217	
21. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
22. Variable with guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
23. Variable without guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
24. Life contingent payout								.0	.0	.0	.0	.0	.0	.0	.0	.0	
25. Other	(f)							.0	.0	.0	.0	.0	.0	.0	.1	5,223	
26. Total Individual Annuities	6,258	3	6,258	0	0	0	0	3	6,258	0	0	0	1	18,183	15	402,440	
Group Annuities																	
27. Fixed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
28. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
29. Variable with guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
30. Variable without guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
31. Life contingent payout								.0	.0	.0	.0	.0	.0	.0	.0	.0	
32. Other	(f)							.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																	
34. Comprehensive individual	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
35. Comprehensive group	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
36. Medicare Supplement	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
37. Vision only	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
38. Dental only	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
39. Federal Employees Health Benefits Plan	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
40. Title XVIII Medicare	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
41. Title XIX Medicaid	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
42. Credit A&H	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
43. Disability income	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			.0	.0	.11	6,218	
44. Long-term care	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
45. Other health	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			(3)	(752)	.15	3,456	
46. Total Accident and Health	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	(3)	(752)	26	9,674	
47. Total	7,887,166	108	8,108,205	0	0	0	0	108	8,108,205	639,389	0	55,000	(594)	(117,551,833)	8,998	1,788,426,543	

(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 \$ _____ .



DURING THE YEAR 2024

DIRECT BUSINESS IN THE STATE OF Guam

NAIC Group Code	00588
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NAIC Company Code 71218

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (Continued) ^(b)

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit						
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year ^(b)		
		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	.0	.0	.0	.0	.0	.0	
2. Whole								.0	.0	.0	.0	.0	.0	.0	.0	.0	
3. Term								.0	.0	.0	.0	.0	.0	.0	.0	.0	
4. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
5. Universal								.0	.0	.0	.0	.0	.0	.0	.0	.0	
6. Universal with secondary guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
7. Variable								.0	.0	.0	.0	.0	.0	.0	.0	.0	
8. Variable universal								.0	.0	.0	.0	.0	.0	.0	.0	.0	
9. Credit								.0	.0	.0	.0	.0	.0	.0	.0	.0	
10. Other	(f)							.0	.0	.0	.0	.0	.0	.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					.0	.0	
13. Term								.0	.0	.0					.0	.0	
14. Universal								.0	.0	.0					.0	.0	
15. Variable								.0	.0	.0					.0	.0	
16. Variable universal								.0	.0	.0					.0	.0	
17. Credit								.0	.0	.0					.0	.0 (a)	
18. Other	(f)							.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																	
20. Fixed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
21. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
22. Variable with guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
23. Variable without guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
24. Life contingent payout								.0	.0	.0	.0	.0	.0	.0	.0	.0	
25. Other	(f)							.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																	
27. Fixed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
28. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
29. Variable with guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
30. Variable without guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
31. Life contingent payout								.0	.0	.0	.0	.0	.0	.0	.0	.0	
32. Other	(f)							.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																	
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						.0	
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
46. Total Accident and Health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	
47. Total	0	0	0	0	0	0	0	0	0	0	0	0	0	0	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: \$ _____.
(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 Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (b)

NAIC Group Code		DIRECT BUSINESS IN THE STATE OF Hawaii						DURING THE YEAR 2024		NAIC Company Code 71218			
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	237								10,000		2,425	381	12,806
3. Term	7,838							.0				.0	
4. Indexed								.0				.0	
5. Universal	1,152							.0			14,448	.0	14,448
6. Universal with secondary guarantees								.0				.0	
7. Variable								.0				.0	
8. Variable universal								.0				.0	
9. Credit								.0				.0	
10. Other (f)								.0				.0	
11. Total Individual Life	9,227	0	0	0	0	0	0	0	10,000	0	16,873	381	27,254
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 (f)								.0				.0	
19. Total Group Life	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 (f)								.0				.0	
26. Total Individual Annuities	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 (f)								.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	.0	xxx	xxx	xxx	0	
47. Total	9,227 (c)	0	0	0	0	0	0	0	10,000	0	16,873	381	27,254

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (Continued) ^(b)

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit						
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year ^(b)		
		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	.0	.0	.0	.0	.0	.0	
2. Whole								.0	.0	.0	.0	.0	.0	.0	.0	.0	
3. Term								.0	.0	.0	.0	.0	.0	.1	.8	3,480,000	
4. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
5. Universal								.0	.0	.0	.0	.0	(2)	(175,000)	.1	100,000	
6. Universal with secondary guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
7. Variable								.0	.0	.0	.0	.0	.0	.0	.0	.0	
8. Variable universal								.0	.0	.0	.0	.0	.0	.0	.0	.0	
9. Credit								.0	.0	.0	.0	.0	.0	.0	.0	.0	
10. Other	(f)							.0	.0	.0	.0	.0	.0	.0	.0	.0	
11. Total Individual Life	0	0	0	0	0	0	0	0	0	0	0	0	(1)	75,000	9	3,580,000	
Group Life																	
12. Whole								.0	.0	.0					.0	.0	
13. Term								.0	.0	.0					.0	.0	
14. Universal								.0	.0	.0					.0	.0	
15. Variable								.0	.0	.0					.0	.0	
16. Variable universal								.0	.0	.0					.0	.0	
17. Credit								.0	.0	.0					.0	.0 (a)	
18. Other	(f)							.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																	
20. Fixed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
21. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
22. Variable with guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
23. Variable without guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
24. Life contingent payout								.0	.0	.0	.0	.0	.0	.0	.0	.0	
25. Other	(f)							.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																	
27. Fixed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
28. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
29. Variable with guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
30. Variable without guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
31. Life contingent payout								.0	.0	.0	.0	.0	.0	.0	.0	.0	
32. Other	(f)							.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																	
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
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	(1)	75,000	9	3,580,000	

(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 Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) ^(b)

NAIC Group Code		DIRECT BUSINESS IN THE STATE OF Idaho						DURING THE YEAR 2024		NAIC Company Code 71218			
		1	2	Dividends to Policyholders/Refunds to Members				Claims and Benefits Paid					
				3	4	5	6	7	8	9	10	11	12
Line of Business		Premiums and Annuities Considerations	Other Considerations	Paid in Cash or Left on Deposit	Applied to Pay Renewal Premiums	Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	Other	Total (Col. 3+4+5+6)	Death and Annuity Benefits	Matured Endowments	Surrender Values and Withdrawals for Life Contracts	All Other Benefits	Total (Sum Columns 8 through 11)
Individual Life													
1. Industrial								.0					.0
2. Whole		(2,417)						.0	300,000			1,039	301,039
3. Term		10,190						.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 (f)								.0					.0
11. Total Individual Life		7,773	0	0	0	0	0	0	300,000	0	0	1,039	301,039
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 (f)								.0					.0
19. Total Group Life		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 (f)								.0					.0
26. Total Individual Annuities		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 (f)								.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		7,773 (c)	0	0	0	0	0	0	300,000	0	0	1,039	301,039

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (Continued) ^(b)

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit						
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year ^(b)		
		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	.0	.0	.0	.0	.0	.0	
2. Whole								.0	.0	.0	.0	.0	(1)	(300,000)	.2	110,000	
3. Term								.0	.0	.0	.0	.0	(1)	(500,000)	.16	5,117,000	
4. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
5. Universal								.0	.0	.0	.0	.0	.0	.0	.0	.0	
6. Universal with secondary guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
7. Variable								.0	.0	.0	.0	.0	.0	.0	.0	.0	
8. Variable universal								.0	.0	.0	.0	.0	.0	.0	.0	.0	
9. Credit								.0	.0	.0	.0	.0	.0	.0	.0	.0	
10. Other	(f)							.0	.0	.0	.0	.0	.0	.0	.0	.0	
11. Total Individual Life	0	0	0	0	0	0	0	0	0	0	0	0	(2)	(800,000)	18	5,227,000	
Group Life																	
12. Whole								.0	.0	.0					.0	.0	
13. Term								.0	.0	.0					.0	.0	
14. Universal								.0	.0	.0					.0	.0	
15. Variable								.0	.0	.0					.0	.0	
16. Variable universal								.0	.0	.0					.0	.0	
17. Credit								.0	.0	.0					.0	.0 (a)	
18. Other	(f)							.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																	
20. Fixed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
21. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
22. Variable with guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
23. Variable without guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
24. Life contingent payout								.0	.0	.0	.0	.0	.0	.0	.0	.0	
25. Other	(f)							.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																	
27. Fixed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
28. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
29. Variable with guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
30. Variable without guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
31. Life contingent payout								.0	.0	.0	.0	.0	.0	.0	.0	.0	
32. Other	(f)							.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																	
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
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	(2)	(800,000)	18	5,227,000	

(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 Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (b)

NAIC Group Code		DIRECT BUSINESS IN THE STATE OF Illinois						DURING THE YEAR 2024		NAIC Company Code 71218			
		1	2	Dividends to Policyholders/Refunds to Members				Claims and Benefits Paid					
				3	4	5	6	7	8	9	10	11	12
Line of Business		Premiums and Annuities Considerations	Other Considerations	Paid in Cash or Left on Deposit	Applied to Pay Renewal Premiums	Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	Other	Total (Col. 3+4+5+6)	Death and Annuity Benefits	Matured Endowments	Surrender Values and Withdrawals for Life Contracts	All Other Benefits	Total (Sum Columns 8 through 11)
Individual Life													
1. Industrial								.0					.0
2. Whole		643,466		862				862	759,754		30,097	4,421	794,272
3. Term		1,636,960						.0	3,625,000		3,308	7,978	3,636,285
4. Indexed								.0					.0
5. Universal		294,834						.0	25,000		70,511	103	95,615
6. Universal with secondary guarantees		107,957						.0					.0
7. Variable								.0					.0
8. Variable universal								.0					.0
9. Credit								.0					.0
10. Other (f)								.0					.0
11. Total Individual Life		2,683,217	0	862	0	0	0	862	4,409,754	0	103,916	12,502	4,526,172
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 (f)								.0					.0
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities													
20. Fixed		9,700						.0	93,436				93,436
21. Indexed								.0					.0
22. Variable with guarantees								.0					.0
23. Variable without guarantees								.0					.0
24. Life contingent payout								.0					.0
25. Other (f)								.0					.0
26. Total Individual Annuities		9,700	0	0	0	0	0	0	93,436	0	0	0	93,436
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 (f)								.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)		939						.0	XXX	XXX	XXX	0	.0
44. Long-term care (d)								.0	XXX	XXX	XXX		.0
45. Other health (d)		0						.0	XXX	XXX	XXX	0	.0
46. Total Accident and Health		939	0	0	0	0	0	.0	XXX	XXX	XXX	0	.0
47. Total		2,693,856 (c)	0	862	0	0	0	862	4,503,190	0	103,916	12,502	4,619,607

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (Continued) ^(b)

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit						
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year ^(b)		
		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	.0	.0	.0	.0	.0	.0	
2. Whole	.725,127	18	.806,127					18	.806,127	40,000	.0	.0	(40)	(2,284,715)	1,002	.31,788,593	
3. Term	3,454,066	15	3,729,066					15	3,729,066	.0	.0	.0	(189)	(49,311,997)	2,022	.675,478,614	
4. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
5. Universal	25,000	1	25,000					1	25,000	.0	.0	.0	(24)	(2,447,364)	395	.34,531,165	
6. Universal with secondary guarantees								.0	.0	.0	.0	.0	.0	.0	46	.9,315,000	
7. Variable								.0	.0	.0	.0	.0	.0	.0	.0	.0	
8. Variable universal								.0	.0	.0	.0	.0	.0	.0	.0	.0	
9. Credit								.0	.0	.0	.0	.0	.0	.0	.0	.0	
10. Other	(f)							.0	.0	.0	.0	.0	.0	.0	.0	.0	
11. Total Individual Life	4,204,193	34	4,560,193	0	0	0	0	34	4,560,193	40,000	0	0	(253)	(54,044,076)	3,465	.751,113,372	
Group Life																	
12. Whole								.0	.0	.0					.0	.0	
13. Term								.0	.0	.0					.0	.0	
14. Universal								.0	.0	.0					.0	.0	
15. Variable								.0	.0	.0					.0	.0	
16. Variable universal								.0	.0	.0					.0	.0	
17. Credit								.0	.0	.0					.0	.0 (a)	
18. Other	(f)							.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																	
20. Fixed	.67,658	5	.93,436					5	.93,436	.0	.0	.0	(1)	.184	22	.615,905	
21. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
22. Variable with guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
23. Variable without guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
24. Life contingent payout								.0	.0	.0	.0	.0	.0	.0	.0	.0	
25. Other	(f)							.0	.0	.0	.0	.0	.0	.0	.0	.0	
26. Total Individual Annuities	.67,658	5	.93,436	0	0	0	0	5	.93,436	0	0	0	(1)	.184	22	.615,905	
Group Annuities																	
27. Fixed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
28. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
29. Variable with guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
30. Variable without guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
31. Life contingent payout								.0	.0	.0	.0	.0	.0	.0	.0	.0	
32. Other	(f)							.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																	
34. Comprehensive individual	(d) .XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX					.0	.0	
35. Comprehensive group	(d) .XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX					.0	.0	
36. Medicare Supplement	(d) .XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX					.0	.0	
37. Vision only	(d) .XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX					.0	.0	
38. Dental only	(d) .XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX					.0	.0	
39. Federal Employees Health Benefits Plan	(d) .XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX					.0	.0	
40. Title XVIII Medicare	(d) .XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX					.0	.0	
41. Title XIX Medicaid	(d) .XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX					.0	.0	
42. Credit A&H	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX					.0	.0	
43. Disability income	(d) .XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX			(1)	(538)	.1	.895	
44. Long-term care	(d) .XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX					.0	.0	
45. Other health	(d) .XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX			.0	.0	.0	.0	
46. Total Accident and Health	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	0	0	(1)	(538)	1	.895	
47. Total	4,271,851	39	4,653,629	0	0	0	0	39	4,653,629	40,000	0	0	(255)	(54,044,430)	3,488	.751,730,172	

(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 Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (b)

NAIC Group Code 00588		DIRECT BUSINESS IN THE STATE OF Indiana						DURING THE YEAR 2024				NAIC Company Code 71218	
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	1,058,335		2,387				2,387	507,191		139,127	1,790	648,108	
3. Term	3,414,069							2,819,999		47,745	12,803	2,880,547	
4. Indexed							0					0	
5. Universal	630,856						0	727,146		332,542	2,095	1,061,783	
6. Universal with secondary guarantees	219,869						0			2,496		2,496	
7. Variable							0					0	
8. Variable universal							0					0	
9. Credit							0					0	
10. Other (f)							0					0	
11. Total Individual Life	5,323,129	0	2,387	0	0	0	2,387	4,054,336	0	521,911	16,688	4,592,935	
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 (f)							0					0	
19. Total Group Life	0	0	0	0	0	0	0	0	0	0	0	0	
Individual Annuities													
20. Fixed	7,500						0	537,622				537,622	
21. Indexed							0					0	
22. Variable with guarantees							0					0	
23. Variable without guarantees							0					0	
24. Life contingent payout							0					0	
25. Other (f)							0					0	
26. Total Individual Annuities	7,500	0	0	0	0	0	0	537,622	0	0	0	537,622	
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 (f)							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)	946						0	XXX	XXX	XXX	0	0	
44. Long-term care (d)							0	XXX	XXX	XXX		0	
45. Other health (d)	0						0	XXX	XXX	XXX	0	0	
46. Total Accident and Health	946	0	0	0	0	0	0	XXX	XXX	XXX	0	0	
47. Total	5,331,575 (c)	0	2,387	0	0	0	2,387	4,591,958	0	521,911	16,688	5,130,557	

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (Continued) ^(b)

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit					
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year ^(b)	
		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	0	0	0	0	0
2. Whole	526,368	29	526,805					29	526,805	60,563	0	0	(71)	(1,652,668)	1,894	55,879,274
3. Term	3,169,194	29	2,799,048					29	2,799,048	400,146	0	25,000	(478)	(72,756,648)	5,727	1,272,297,345
4. Indexed								0	0	0	0	0	0	0	0	0
5. Universal	852,146	7	827,146					7	827,146	50,000	0	0	(35)	(3,723,601)	711	71,315,074
6. Universal with secondary guarantees								0	0	0	0	0	(1)	(100,000)	90	24,768,560
7. Variable								0	0	0	0	0	0	0	0	0
8. Variable universal								0	0	0	0	0	0	0	0	0
9. Credit								0	0	0	0	0	0	0	0	0
10. Other	(f)							0	0	0	0	0	0	0	0	0
11. Total Individual Life	4,547,708	65	4,152,999	0	0	0	0	65	4,152,999	510,709	0	25,000	(585)	(78,232,917)	8,422	1,424,260,253
Group Life																
12. Whole								0	0	0					0	0
13. Term								0	0	0					0	0
14. Universal								0	0	0					0	0
15. Variable								0	0	0					0	0
16. Variable universal								0	0	0					0	0
17. Credit								0	0	0					0	(a)
18. Other	(f)							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																
20. Fixed	537,622	19	537,622					19	537,622	0	0	0	(7)	(478,492)	43	1,378,461
21. Indexed								0	0	0	0	0	0	0	0	0
22. Variable with guarantees								0	0	0	0	0	0	0	0	0
23. Variable without guarantees								0	0	0	0	0	0	0	0	0
24. Life contingent payout								0	0	0	0	0	0	0	0	0
25. Other	(f)							0	0	0	0	0	0	0	0	0
26. Total Individual Annuities	537,622	19	537,622	0	0	0	0	19	537,622	0	0	0	(7)	(478,492)	43	1,378,461
Group Annuities																
27. Fixed								0	0	0	0	0	0	0	0	0
28. Indexed								0	0	0	0	0	0	0	0	0
29. Variable with guarantees								0	0	0	0	0	0	0	0	0
30. Variable without guarantees								0	0	0	0	0	0	0	0	0
31. Life contingent payout								0	0	0	0	0	0	0	0	0
32. Other	(f)							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																
34. Comprehensive individual	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
35. Comprehensive group	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
36. Medicare Supplement	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
37. Vision only	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
38. Dental only	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
39. Federal Employees Health Benefits Plan	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
40. Title XVIII Medicare	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
41. Title XIX Medicaid	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
42. Credit A&H	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
43. Disability income	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			(1)	(453)	.2	946
44. Long-term care	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
45. Other health	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
46. Total Accident and Health	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	(1)	(453)	2	946
47. Total	5,085,330	84	4,690,621	0	0	0	0	84	4,690,621	510,709	0	25,000	(593)	(78,711,862)	8,467	1,425,639,660

(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 Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (b)

NAIC Group Code 00588		DIRECT BUSINESS IN THE STATE OF Iowa						DURING THE YEAR 2024				NAIC Company Code 71218	
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	18,073						0	10,000			110	10,110	
3. Term	90,596						0					0	
4. Indexed							0					0	
5. Universal	10,497						0					0	
6. Universal with secondary guarantees	1,074						0					0	
7. Variable							0					0	
8. Variable universal							0					0	
9. Credit							0					0	
10. Other (f)							0					0	
11. Total Individual Life	120,240	0	0	0	0	0	0	10,000	0	0	110	10,110	
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 (f)							0					0	
19. Total Group Life	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 (f)							0					0	
26. Total Individual Annuities	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 (f)							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	120,240 (c)	0	0	0	0	0	0	10,000	0	0	110	10,110	

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (Continued) ^(b)

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit					
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year ^(b)	
		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	0	0	0	0	0
2. Whole									0	0	0	0	0	2	61,000	51
3. Term									0	0	0	0	0	(10)	(2,210,000)	150
4. Indexed									0	0	0	0	0	0	0	0
5. Universal									0	0	0	0	0	1	141,891	15
6. Universal with secondary guarantees									0	0	0	0	0	0	0	3
7. Variable									0	0	0	0	0	0	0	0
8. Variable universal									0	0	0	0	0	0	0	0
9. Credit									0	0	0	0	0	0	0	0
10. Other	(f)								0	0	0	0	0	0	0	0
11. Total Individual Life	0	0	0	0	0	0	0	0	0	0	0	0	0	(7)	(2,007,109)	219
Group Life																
12. Whole									0	0	0					0
13. Term									0	0	0					0
14. Universal									0	0	0					0
15. Variable									0	0	0					0
16. Variable universal									0	0	0					0
17. Credit									0	0	0					0
18. Other	(f)								0	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	0	0	0	355	1
21. Indexed									0	0	0	0	0	0	0	0
22. Variable with guarantees									0	0	0	0	0	0	0	0
23. Variable without guarantees									0	0	0	0	0	0	0	0
24. Life contingent payout									0	0	0	0	0	0	0	0
25. Other	(f)								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	355	1
Group Annuities																
27. Fixed									0	0	0	0	0	0	0	0
28. Indexed									0	0	0	0	0	0	0	0
29. Variable with guarantees									0	0	0	0	0	0	0	0
30. Variable without guarantees									0	0	0	0	0	0	0	0
31. Life contingent payout									0	0	0	0	0	0	0	0
32. Other	(f)								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																
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					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	0	0	0	0	0	0	0	0	0	0	0	0	0	(7)	(2,006,754)	220

(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 Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) ^(b)

DIRECT BUSINESS IN THE STATE OF Kansas

DURING THE YEAR 2024

NAIC Company Code 71218

NAIC Group Code 00588

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		1,299						.0					.0
3. Term		14,137						.0					.0
4. Indexed								.0					.0
5. Universal		9,771						.0					.0
6. Universal with secondary guarantees		5,151						.0					.0
7. Variable								.0					.0
8. Variable universal								.0					.0
9. Credit								.0					.0
10. Other (f)								.0					.0
11. Total Individual Life		30,358	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 (f)								.0					.0
19. Total Group Life		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 (f)								.0					.0
26. Total Individual Annuities		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 (f)								.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 (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		30,358 (c)	0	0	0	0	0	0	0	0	0	0	0

24.KS

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (Continued) ^(b)

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit					
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year ^(b)	
		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	0	0	0	0	0
2. Whole									0	0	0	0	0	0	5	175,000
3. Term									0	0	0	0	(10)	(3,779,999)	19	4,694,999
4. Indexed									0	0	0	0	0	0	0	0
5. Universal									0	0	0	0	2	102,069	14	1,557,500
6. Universal with secondary guarantees									0	0	0	0	0	0	4	800,000
7. Variable									0	0	0	0	0	0	0	0
8. Variable universal									0	0	0	0	0	0	0	0
9. Credit									0	0	0	0	0	0	0	0
10. Other	(f)								0	0	0	0	0	0	0	0
11. Total Individual Life	0	0	0	0	0	0	0	0	0	0	0	0	(8)	(3,677,930)	42	7,227,499
Group Life																
12. Whole									0	0	0				0	0
13. Term									0	0	0				0	0
14. Universal									0	0	0				0	0
15. Variable									0	0	0				0	0
16. Variable universal									0	0	0				0	0
17. Credit									0	0	0				0	(a)
18. Other	(f)								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																
20. Fixed									0	0	0	0	0	0	0	0
21. Indexed									0	0	0	0	0	0	0	0
22. Variable with guarantees									0	0	0	0	0	0	0	0
23. Variable without guarantees									0	0	0	0	0	0	0	0
24. Life contingent payout									0	0	0	0	0	0	0	0
25. Other	(f)								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																
27. Fixed									0	0	0	0	0	0	0	0
28. Indexed									0	0	0	0	0	0	0	0
29. Variable with guarantees									0	0	0	0	0	0	0	0
30. Variable without guarantees									0	0	0	0	0	0	0	0
31. Life contingent payout									0	0	0	0	0	0	0	0
32. Other	(f)								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																
34. Comprehensive individual	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
35. Comprehensive group	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
36. Medicare Supplement	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
37. Vision only	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
38. Dental only	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
39. Federal Employees Health Benefits Plan	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
40. Title XVIII Medicare	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
41. Title XIX Medicaid	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
42. Credit A&H		xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
43. Disability income	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
44. Long-term care	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
45. Other health	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					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	0	0	0	0	0	0	0	0	0	0	0	0	(8)	(3,677,930)	42	7,227,499

(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 Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (b)

NAIC Group Code 00588		DIRECT BUSINESS IN THE STATE OF Kentucky						DURING THE YEAR 2024		NAIC Company Code 71218		
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	1,912,288		963				963	1,204,069		131,268	4,044	1,339,381
3. Term	5,576,326							8,215,996		69,988	28,253	8,314,237
4. Indexed							0					0
5. Universal	942,812							1,992,382		507,770	12,612	2,512,764
6. Universal with secondary guarantees	266,071						0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other (f)							0					0
11. Total Individual Life	8,697,497	0	963	0	0	0	963	11,412,447	0	709,025	44,910	12,166,382
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 (f)							0					0
19. Total Group Life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	76,323						0	302,941				302,941
21. Indexed							0					0
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout							0					0
25. Other (f)							0					0
26. Total Individual Annuities	76,323	0	0	0	0	0	0	302,941	0	0	0	302,941
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 (f)							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)	9,516						0	xxx	xxx	xxx	6,388	6,388
44. Long-term care (d)							0	xxx	xxx	xxx		0
45. Other health (d)	4,800						0	xxx	xxx	xxx	200,000	200,000
46. Total Accident and Health	14,316	0	0	0	0	0	0	xxx	xxx	xxx	206,388	206,388
47. Total	8,788,136 (c)	0	963	0	0	0	963	11,715,389	0	709,025	251,298	12,675,712

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (Continued) ^(b)

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit					
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year ^(b)	
		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	0	0	0	0	0
2. Whole	1,289,708	82	1,113,576					82	1,113,576	238,132	0	0	(140)	(3,223,189)	3,038	77,942,856
3. Term	8,285,575	44	8,128,444					44	8,128,444	913,131	0	0	(728)	(134,360,215)	8,442	1,533,739,936
4. Indexed								0	0	0	0	0	0	0	0	0
5. Universal	2,129,929	23	2,111,018					23	2,111,018	75,000	0	25,000	(52)	(5,402,281)	1,340	110,637,797
6. Universal with secondary guarantees								0	0	0	0	0	(3)	(600,000)	80	21,037,148
7. Variable								0	0	0	0	0	0	0	0	0
8. Variable universal								0	0	0	0	0	0	0	0	0
9. Credit								0	0	0	0	0	0	0	0	0
10. Other	(f)							0	0	0	0	0	0	0	0	0
11. Total Individual Life	11,705,213	149	11,353,039	0	0	0	0	149	11,353,039	1,226,263	0	25,000	(923)	(143,585,685)	12,900	1,743,357,737
Group Life																
12. Whole								0	0	0					0	0
13. Term								0	0	0					0	0
14. Universal								0	0	0					0	0
15. Variable								0	0	0					0	0
16. Variable universal								0	0	0					0	0
17. Credit								0	0	0					0	(a)
18. Other	(f)							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																
20. Fixed	318,728	30	302,941					30	302,941	90,385	0	0	(9)	(70,074)	119	5,853,827
21. Indexed								0	0	0	0	0	0	0	0	0
22. Variable with guarantees								0	0	0	0	0	0	0	0	0
23. Variable without guarantees								0	0	0	0	0	0	0	0	0
24. Life contingent payout								0	0	0	0	0	0	0	3	0
25. Other	(f)							0	0	0	0	0	(5)	(1,859,284)	2	0
26. Total Individual Annuities	318,728	30	302,941	0	0	0	0	30	302,941	90,385	0	0	(14)	(1,929,358)	124	5,853,827
Group Annuities																
27. Fixed								0	0	0	0	0	0	0	0	0
28. Indexed								0	0	0	0	0	0	0	0	0
29. Variable with guarantees								0	0	0	0	0	0	0	0	0
30. Variable without guarantees								0	0	0	0	0	0	0	0	0
31. Life contingent payout								0	0	0	0	0	0	0	0	0
32. Other	(f)							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																
34. Comprehensive individual	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
35. Comprehensive group	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
36. Medicare Supplement	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
37. Vision only	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
38. Dental only	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
39. Federal Employees Health Benefits Plan	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
40. Title XVIII Medicare	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
41. Title XIX Medicaid	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
42. Credit A&H	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
43. Disability income	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			(3)	(2,510)	17	9,067
44. Long-term care	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
45. Other health	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			(3)	(753)	19	4,453
46. Total Accident and Health	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	(6)	(3,263)	36	13,520
47. Total	12,023,941	179	11,655,980	0	0	0	0	179	11,655,980	1,316,648	0	25,000	(943)	(145,518,306)	13,060	1,749,225,084

(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 Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (b)

NAIC Group Code 00588		DIRECT BUSINESS IN THE STATE OF Louisiana						DURING THE YEAR 2024		NAIC Company Code 71218		
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	1,358						0	10,090			65	10,155
3. Term	10,911						0					0
4. Indexed							0					0
5. Universal	5,246						0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other (f)							0					0
11. Total Individual Life	17,515	0	0	0	0	0	0	10,090	0	0	65	10,155
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 (f)							0					0
19. Total Group Life	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 (f)							0					0
26. Total Individual Annuities	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 (f)							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	17,515 (c)	0	0	0	0	0	0	10,090	0	0	65	10,155

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (Continued) ^(b)

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit						
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year ^(b)		
		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	0	0	0	0	0	
2. Whole									0	0	0	0	0	1	20,000	3	32,000
3. Term									0	0	0	0	0	(3)	(1,050,000)	24	4,999,999
4. Indexed									0	0	0	0	0	0	0	0	0
5. Universal									0	0	0	0	0	(1)	(90,240)	14	1,229,458
6. Universal with secondary guarantees									0	0	0	0	0	0	0	1	250,000
7. Variable									0	0	0	0	0	0	0	0	0
8. Variable universal									0	0	0	0	0	0	0	0	0
9. Credit									0	0	0	0	0	0	0	0	0
10. Other	(f)								0	0	0	0	0	0	0	0	0
11. Total Individual Life	0	0	0	0	0	0	0	0	0	0	0	0	0	(3)	(1,120,240)	42	6,511,457
Group Life																	
12. Whole									0	0	0					0	0
13. Term									0	0	0					0	0
14. Universal									0	0	0					0	0
15. Variable									0	0	0					0	0
16. Variable universal									0	0	0					0	0
17. Credit									0	0	0					0	(a)
18. Other	(f)								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	0
Individual Annuities																	
20. Fixed									0	0	0	0	0	0	0	0	0
21. Indexed									0	0	0	0	0	0	0	0	0
22. Variable with guarantees									0	0	0	0	0	0	0	0	0
23. Variable without guarantees									0	0	0	0	0	0	0	0	0
24. Life contingent payout									0	0	0	0	0	0	0	0	0
25. Other	(f)								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	0
Group Annuities																	
27. Fixed									0	0	0	0	0	0	0	0	0
28. Indexed									0	0	0	0	0	0	0	0	0
29. Variable with guarantees									0	0	0	0	0	0	0	0	0
30. Variable without guarantees									0	0	0	0	0	0	0	0	0
31. Life contingent payout									0	0	0	0	0	0	0	0	0
32. Other	(f)								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	0
Accident and Health																	
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0	
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0	
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0	
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0	
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0	
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0	
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0	
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0	
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0	
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0	
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0	
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					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	0	0	0	0	0	0	0	0	0	0	0	0	0	(3)	(1,120,240)	42	6,511,457

(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 Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (b)

NAIC Group Code		DIRECT BUSINESS IN THE STATE OF Maine						DURING THE YEAR 2024		NAIC Company Code 71218		
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
Individual Life												
1.	Industrial							.0				.0
2.	Whole	3,209						.0	20,000		34	20,034
3.	Term	4,240						.0				.0
4.	Indexed							.0				.0
5.	Universal	2,998						.0				.0
6.	Universal with secondary guarantees							.0				.0
7.	Variable							.0				.0
8.	Variable universal							.0				.0
9.	Credit							.0				.0
10.	Other	(f)						.0				.0
11.	Total Individual Life	10,447	0	0	0	0	0	0	20,000	0	34	20,034
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	(f)						.0				.0
19.	Total Group Life	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	(f)						.0				.0
26.	Total Individual Annuities	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	(f)						.0				.0
33.	Total Group Annuities	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
47.	Total	10,447 (c)	0	0	0	0	0	0	20,000	0	34	20,034

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (Continued) ^(b)

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit					
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year ^(b)	
		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	0	0	0	0	0
2. Whole	20,000	1	20,000					1	20,000	0	0	0	(1)	(20,000)	5	115,000
3. Term								0	0	0	0	0	3	1,775,000	11	4,775,000
4. Indexed								0	0	0	0	0	0	0	0	0
5. Universal								0	0	0	0	0	1	75,000	3	175,000
6. Universal with secondary guarantees								0	0	0	0	0	0	0	0	0
7. Variable								0	0	0	0	0	0	0	0	0
8. Variable universal								0	0	0	0	0	0	0	0	0
9. Credit								0	0	0	0	0	0	0	0	0
10. Other	(f)							0	0	0	0	0	0	0	0	0
11. Total Individual Life	20,000	1	20,000	0	0	0	0	1	20,000	0	0	0	3	1,830,000	19	5,065,000
Group Life																
12. Whole								0	0	0					0	0
13. Term								0	0	0					0	0
14. Universal								0	0	0					0	0
15. Variable								0	0	0					0	0
16. Variable universal								0	0	0					0	0
17. Credit								0	0	0					0	(a)
18. Other	(f)							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																
20. Fixed								0	0	0	0	0	0	0	0	0
21. Indexed								0	0	0	0	0	0	0	0	0
22. Variable with guarantees								0	0	0	0	0	0	0	0	0
23. Variable without guarantees								0	0	0	0	0	0	0	0	0
24. Life contingent payout								0	0	0	0	0	0	0	0	0
25. Other	(f)							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																
27. Fixed								0	0	0	0	0	0	0	0	0
28. Indexed								0	0	0	0	0	0	0	0	0
29. Variable with guarantees								0	0	0	0	0	0	0	0	0
30. Variable without guarantees								0	0	0	0	0	0	0	0	0
31. Life contingent payout								0	0	0	0	0	0	0	0	0
32. Other	(f)							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																
34. Comprehensive individual	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
35. Comprehensive group	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
36. Medicare Supplement	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
37. Vision only	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
38. Dental only	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
39. Federal Employees Health Benefits Plan	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
40. Title XVIII Medicare	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
41. Title XIX Medicaid	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
42. Credit A&H		xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
43. Disability income	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
44. Long-term care	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
45. Other health	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
46. Total Accident and Health	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx				0	0	0
47. Total	20,000	1	20,000	0	0	0	0	1	20,000	0	0	0	3	1,830,000	19	5,065,000

(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 Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (b)

NAIC Group Code		00588		DIRECT BUSINESS IN THE STATE OF Maryland						DURING THE YEAR 2024					NAIC Company Code 71218	
Line of Business		1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members				Claims and Benefits Paid					11 All Other Benefits	12 Total (Sum Columns 8 through 11)		
				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					
Individual Life																
1. Industrial								.0						.0		
2. Whole		17,307		979				979	12,500		3,217	.33		15,751		
3. Term		23,322						.0						.0		
4. Indexed								.0						.0		
5. Universal		15,297						.0			4,177			4,177		
6. Universal with secondary guarantees		2,638						.0						.0		
7. Variable								.0						.0		
8. Variable universal								.0						.0		
9. Credit								.0						.0		
10. Other (f)								.0						.0		
11. Total Individual Life		58,564	0	979	0	0	0	979	12,500	0	7,394	33		19,927		
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 (f)								.0						.0		
19. Total Group Life		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 (f)								.0						.0		
26. Total Individual Annuities		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 (f)								.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		58,564 (c)	0	979	0	0	0	979	12,500	0	7,394	33		19,927		

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (Continued) ^(b)

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit						
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year ^(b)		
		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	0	0	0	0	0	
2. Whole									0	0	0	0	0	(2)	(53,153)	25	572,625
3. Term									0	0	0	0	0	(1)	1,105,000	50	15,189,000
4. Indexed									0	0	0	0	0	0	0	0	0
5. Universal									0	0	0	0	0	0	49,808	11	1,050,033
6. Universal with secondary guarantees									0	0	0	0	0	0	0	2	1,100,000
7. Variable									0	0	0	0	0	0	0	0	0
8. Variable universal									0	0	0	0	0	0	0	0	0
9. Credit									0	0	0	0	0	0	0	0	0
10. Other	(f)								0	0	0	0	0	0	0	0	0
11. Total Individual Life	0	0	0	0	0	0	0	0	0	0	0	0	0	(3)	1,101,655	88	17,911,658
Group Life																	
12. Whole									0	0	0					0	0
13. Term									0	0	0					0	0
14. Universal									0	0	0					0	0
15. Variable									0	0	0					0	0
16. Variable universal									0	0	0					0	0
17. Credit									0	0	0					0	(a)
18. Other	(f)								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	0
Individual Annuities																	
20. Fixed									0	0	0	0	0	0	0	0	0
21. Indexed									0	0	0	0	0	0	0	0	0
22. Variable with guarantees									0	0	0	0	0	0	0	0	0
23. Variable without guarantees									0	0	0	0	0	0	0	0	0
24. Life contingent payout									0	0	0	0	0	0	0	0	0
25. Other	(f)								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	0
Group Annuities																	
27. Fixed									0	0	0	0	0	0	0	0	0
28. Indexed									0	0	0	0	0	0	0	0	0
29. Variable with guarantees									0	0	0	0	0	0	0	0	0
30. Variable without guarantees									0	0	0	0	0	0	0	0	0
31. Life contingent payout									0	0	0	0	0	0	0	0	0
32. Other	(f)								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	0
Accident and Health																	
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						0	0
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						0	0
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						0	0
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						0	0
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						0	0
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						0	0
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						0	0
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						0	0
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						0	0
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						0	0
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						0	0
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						0	0
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	(3)	1,101,655	88	17,911,658

(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 Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) ^(b)

NAIC Group Code		DIRECT BUSINESS IN THE STATE OF Massachusetts						DURING THE YEAR 2024					NAIC Company Code 71218	
		1	2	Dividends to Policyholders/Refunds to Members				Claims and Benefits Paid						
				3	4	5	6	7	8	9	10	11	12	
Line of Business		Premiums and Annuities Considerations	Other Considerations	Paid in Cash or Left on Deposit	Applied to Pay Renewal Premiums	Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	Other	Total (Col. 3+4+5+6)	Death and Annuity Benefits	Matured Endowments	Surrender Values and Withdrawals for Life Contracts	All Other Benefits	Total (Sum Columns 8 through 11)	
Individual Life														
1. Industrial								.0					.0	
2. Whole		1,521		319				319			8,958		8,958	
3. Term		9,972						.0					.0	
4. Indexed								.0					.0	
5. Universal		774						.0					.0	
6. Universal with secondary guarantees								.0					.0	
7. Variable								.0					.0	
8. Variable universal								.0					.0	
9. Credit								.0					.0	
10. Other (f)								.0					.0	
11. Total Individual Life		12,267	0	319	0	0	0	319	0	0	8,958	0	8,958	
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 (f)								.0					.0	
19. Total Group Life		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 (f)								.0					.0	
26. Total Individual Annuities		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 (f)								.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		12,267 (c)	0	319	0	0	0	319	0	0	8,958	0	8,958	

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (Continued) ^(b)

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit					
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year ^(b)	
		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	0	0	0	0	0
2. Whole									0	0	0	0	0	(1)	(14,402)	4
3. Term									0	0	0	0	(5)	(1,720,000)	18	6,940,000
4. Indexed									0	0	0	0	0	0	0	0
5. Universal									0	0	0	0	0	0	0	5
6. Universal with secondary guarantees									0	0	0	0	0	0	0	0
7. Variable									0	0	0	0	0	0	0	0
8. Variable universal									0	0	0	0	0	0	0	0
9. Credit									0	0	0	0	0	0	0	0
10. Other	(f)								0	0	0	0	0	0	0	0
11. Total Individual Life	0	0	0	0	0	0	0	0	0	0	0	0	(6)	(1,734,402)	27	7,481,204
Group Life																
12. Whole									0	0	0				0	0
13. Term									0	0	0				0	0
14. Universal									0	0	0				0	0
15. Variable									0	0	0				0	0
16. Variable universal									0	0	0				0	0
17. Credit									0	0	0				0	(a)
18. Other	(f)								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																
20. Fixed									0	0	0	0	0	0	0	0
21. Indexed									0	0	0	0	0	0	0	0
22. Variable with guarantees									0	0	0	0	0	0	0	0
23. Variable without guarantees									0	0	0	0	0	0	0	0
24. Life contingent payout									0	0	0	0	0	0	0	0
25. Other	(f)								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																
27. Fixed									0	0	0	0	0	0	0	0
28. Indexed									0	0	0	0	0	0	0	0
29. Variable with guarantees									0	0	0	0	0	0	0	0
30. Variable without guarantees									0	0	0	0	0	0	0	0
31. Life contingent payout									0	0	0	0	0	0	0	0
32. Other	(f)								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																
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					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	0	0	0	0	0	0	0	0	0	0	0	0	(6)	(1,734,402)	27	7,481,204

(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 Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (b)

NAIC Group Code		DIRECT BUSINESS IN THE STATE OF Michigan						DURING THE YEAR 2024		NAIC Company Code 71218			
		1	2	Dividends to Policyholders/Refunds to Members				Claims and Benefits Paid					
				3	4	5	6	7	8	9	10	11	12
Line of Business		Premiums and Annuities Considerations	Other Considerations	Paid in Cash or Left on Deposit	Applied to Pay Renewal Premiums	Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	Other	Total (Col. 3+4+5+6)	Death and Annuity Benefits	Matured Endowments	Surrender Values and Withdrawals for Life Contracts	All Other Benefits	Total (Sum Columns 8 through 11)
Individual Life													
1. Industrial								.0					.0
2. Whole		636,102		1,020				1,020	361,557		70,009	1,973	433,538
3. Term		2,912,142						.0	1,105,000		928	1,979	1,107,907
4. Indexed								.0					.0
5. Universal		298,451						.0	380,050		102,997	711	483,758
6. Universal with secondary guarantees		91,107						.0					.0
7. Variable								.0					.0
8. Variable universal								.0					.0
9. Credit								.0					.0
10. Other (f)								.0					.0
11. Total Individual Life		3,937,802	0	1,020	0	0	0	1,020	1,846,607	0	173,933	4,662	2,025,203
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 (f)								.0					.0
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities													
20. Fixed		900						.0	165,395				165,395
21. Indexed								.0					.0
22. Variable with guarantees								.0					.0
23. Variable without guarantees								.0					.0
24. Life contingent payout								.0					.0
25. Other (f)								.0					.0
26. Total Individual Annuities		900	0	0	0	0	0	0	165,395	0	0	0	165,395
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 (f)								.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		3,938,702 (c)	0	1,020	0	0	0	1,020	2,012,002	0	173,933	4,662	2,190,598

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (Continued) ^(b)

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit						
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year ^(b)		
		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	.0	.0	.0	.0	.0	.0	
2. Whole	289,575	25	312,175					25	312,175	38,400	.0	.0	(61)	(1,515,479)	1,011	25,336,437	
3. Term	1,741,103	13	1,213,382					13	1,213,382	552,721	.0	.0	(300)	(76,720,994)	4,348	1,341,271,612	
4. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
5. Universal	403,550	3	355,050					3	355,050	48,500	.0	.0	(11)	(2,100,978)	280	40,270,323	
6. Universal with secondary guarantees								.0	.0	.0	.0	.0	.0	.0	40	6,660,000	
7. Variable								.0	.0	.0	.0	.0	.0	.0	.0	.0	
8. Variable universal								.0	.0	.0	.0	.0	.0	.0	.0	.0	
9. Credit								.0	.0	.0	.0	.0	.0	.0	.0	.0	
10. Other	(f)							.0	.0	.0	.0	.0	.0	.0	.0	.0	
11. Total Individual Life	2,434,228	41	1,880,607	0	0	0	0	41	1,880,607	639,621	0	0	(372)	(80,337,451)	5,679	1,413,538,372	
Group Life																	
12. Whole								.0	.0	.0					.0	.0	
13. Term								.0	.0	.0					.0	.0	
14. Universal								.0	.0	.0					.0	.0	
15. Variable								.0	.0	.0					.0	.0	
16. Variable universal								.0	.0	.0					.0	.0	
17. Credit								.0	.0	.0					.0	(a)	
18. Other	(f)							.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																	
20. Fixed	165,395	5	165,395					5	165,395	.0	.0	.0	(2)	(123,196)	18	1,249,458	
21. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
22. Variable with guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
23. Variable without guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
24. Life contingent payout								.0	.0	.0	.0	.0	.0	.0	.0	.0	
25. Other	(f)							.0	.0	.0	.0	.0	.0	.0	.0	.0	
26. Total Individual Annuities	165,395	5	165,395	0	0	0	0	5	165,395	0	0	0	(2)	(123,196)	18	1,249,458	
Group Annuities																	
27. Fixed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
28. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
29. Variable with guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
30. Variable without guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
31. Life contingent payout								.0	.0	.0	.0	.0	.0	.0	.0	.0	
32. Other	(f)							.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																	
34. Comprehensive individual	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
35. Comprehensive group	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
36. Medicare Supplement	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
37. Vision only	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
38. Dental only	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
39. Federal Employees Health Benefits Plan	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
40. Title XVIII Medicare	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
41. Title XIX Medicaid	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
42. Credit A&H	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
43. Disability income	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
44. Long-term care	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
45. Other health	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.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	2,599,623	46	2,046,002	0	0	0	0	46	2,046,002	639,621	0	0	(374)	(80,460,647)	5,697	1,414,787,830	

(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 Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (b)

NAIC Group Code		DIRECT BUSINESS IN THE STATE OF Minnesota						DURING THE YEAR 2024		NAIC Company Code 71218			
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		43,665							21,000		1,730	291	23,021
3. Term		389,414							1,000,000		26,850	1,982	1,028,832
4. Indexed													.0
5. Universal		33,526									5,000		5,000
6. Universal with secondary guarantees		8,527											.0
7. Variable													.0
8. Variable universal													.0
9. Credit													.0
10. Other (f)													.0
11. Total Individual Life		475,132	0	0	0	0	0	0	1,021,000	0	33,580	2,273	1,056,853
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 (f)								.0					.0
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities													
20. Fixed		225						.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 (f)								.0					.0
26. Total Individual Annuities		225	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 (f)								.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		475,357 (c)	0	0	0	0	0	0	1,021,000	0	33,580	2,273	1,056,853

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (Continued) ^(b)

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit						
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year ^(b)		
		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	.0	.0	.0	.0	.0	.0	
2. Whole	21,000	2	21,000					2	21,000	.0	.0	.0	(3)	(79,754)	.95	2,595,918	
3. Term	1,000,810	2	1,000,810					2	1,000,810	.0	.0	.0	(27)	(10,900,000)	.511	186,030,953	
4. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
5. Universal								.0	.0	.0	.0	.0	.0	.0	.63	6,420,639	
6. Universal with secondary guarantees								.0	.0	.0	.0	.0	.0	.0	.7	850,000	
7. Variable								.0	.0	.0	.0	.0	.0	.0	.0	.0	
8. Variable universal								.0	.0	.0	.0	.0	.0	.0	.0	.0	
9. Credit								.0	.0	.0	.0	.0	.0	.0	.0	.0	
10. Other	(f)							.0	.0	.0	.0	.0	.0	.0	.0	.0	
11. Total Individual Life	1,021,810	4	1,021,810	0	0	0	0	4	1,021,810	0	0	0	(30)	(10,969,613)	676	195,897,510	
Group Life																	
12. Whole								.0	.0	.0					.0	.0	
13. Term								.0	.0	.0					.0	.0	
14. Universal								.0	.0	.0					.0	.0	
15. Variable								.0	.0	.0					.0	.0	
16. Variable universal								.0	.0	.0					.0	.0	
17. Credit								.0	.0	.0					.0	.0 (a)	
18. Other	(f)							.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																	
20. Fixed								.0	.0	.0	.0	.0	.0	1,583	.6	47,502	
21. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
22. Variable with guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
23. Variable without guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
24. Life contingent payout								.0	.0	.0	.0	.0	.0	.0	.0	.0	
25. Other	(f)							.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	1,583	6	47,502	
Group Annuities																	
27. Fixed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
28. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
29. Variable with guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
30. Variable without guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
31. Life contingent payout								.0	.0	.0	.0	.0	.0	.0	.0	.0	
32. Other	(f)							.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																	
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
46. Total Accident and Health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				0	0	0	
47. Total	1,021,810	4	1,021,810	0	0	0	0	4	1,021,810	0	0	0	(30)	(10,968,030)	682	195,945,012	

(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 Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (b)

NAIC Group Code		DIRECT BUSINESS IN THE STATE OF Mississippi						DURING THE YEAR 2024		NAIC Company Code 71218			
		1	2	Dividends to Policyholders/Refunds to Members				Claims and Benefits Paid					
				3	4	5	6	7	8	9	10	11	12
Line of Business		Premiums and Annuities Considerations	Other Considerations	Paid in Cash or Left on Deposit	Applied to Pay Renewal Premiums	Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	Other	Total (Col. 3+4+5+6)	Death and Annuity Benefits	Matured Endowments	Surrender Values and Withdrawals for Life Contracts	All Other Benefits	Total (Sum Columns 8 through 11)
Individual Life													
1. Industrial								.0					.0
2. Whole		10,500		739				739	10,000			12	10,012
3. Term		52,604						.0	50,000			.85	50,085
4. Indexed								.0					.0
5. Universal		11,303						.0					.0
6. Universal with secondary guarantees								.0					.0
7. Variable								.0					.0
8. Variable universal								.0					.0
9. Credit								.0					.0
10. Other		(f)						.0					.0
11. Total Individual Life		74,407	0	739	0	0	0	739	60,000	0	0	97	60,097
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		(f)						.0					.0
19. Total Group Life		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		(f)						.0					.0
26. Total Individual Annuities		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		(f)						.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		74,407 (c)	0	739	0	0	0	739	60,000	0	0	97	60,097

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (Continued) ^(b)

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit						
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year ^(b)		
		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	.0	.0	.0	.0	.0	.0	
2. Whole								.0	.0	.0	.0	.0	(1)	25,000	19	491,621	
3. Term								.0	.0	.0	.0	.0	(7)	(2,775,000)	92	22,695,998	
4. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
5. Universal								.0	.0	.0	.0	.0	(1)	(27,716)	18	1,223,007	
6. Universal with secondary guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
7. Variable								.0	.0	.0	.0	.0	.0	.0	.0	.0	
8. Variable universal								.0	.0	.0	.0	.0	.0	.0	.0	.0	
9. Credit								.0	.0	.0	.0	.0	.0	.0	.0	.0	
10. Other	(f)							.0	.0	.0	.0	.0	.0	.0	.0	.0	
11. Total Individual Life	0	0	0	0	0	0	0	0	0	0	0	0	(9)	(2,777,716)	129	24,410,626	
Group Life																	
12. Whole								.0	.0	.0					.0	.0	
13. Term								.0	.0	.0					.0	.0	
14. Universal								.0	.0	.0					.0	.0	
15. Variable								.0	.0	.0					.0	.0	
16. Variable universal								.0	.0	.0					.0	.0	
17. Credit								.0	.0	.0					.0	.0 (a)	
18. Other	(f)							.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																	
20. Fixed								.0	.0	.0		.0	.0	14	.3	.775	
21. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
22. Variable with guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
23. Variable without guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
24. Life contingent payout								.0	.0	.0	.0	.0	.0	.0	.0	.0	
25. Other	(f)							.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	14	3	.775	
Group Annuities																	
27. Fixed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
28. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
29. Variable with guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
30. Variable without guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
31. Life contingent payout								.0	.0	.0	.0	.0	.0	.0	.0	.0	
32. Other	(f)							.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																	
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
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	(9)	(2,777,702)	132	24,411,401	

(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 Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (b)

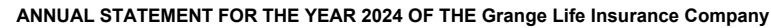
NAIC Group Code		DIRECT BUSINESS IN THE STATE OF Missouri						DURING THE YEAR 2024		NAIC Company Code 71218			
		1	2	Dividends to Policyholders/Refunds to Members				Claims and Benefits Paid					
				3	4	5	6	7	8	9	10	11	12
Line of Business		Premiums and Annuities Considerations	Other Considerations	Paid in Cash or Left on Deposit	Applied to Pay Renewal Premiums	Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	Other	Total (Col. 3+4+5+6)	Death and Annuity Benefits	Matured Endowments	Surrender Values and Withdrawals for Life Contracts	All Other Benefits	Total (Sum Columns 8 through 11)
Individual Life													
1. Industrial								.0					.0
2. Whole		23,083							10,000		11,523	25	21,548
3. Term		17,896						.0					.0
4. Indexed								.0					.0
5. Universal		100,841						.0			59,193		59,193
6. Universal with secondary guarantees		1,191						.0					.0
7. Variable								.0					.0
8. Variable universal								.0					.0
9. Credit								.0					.0
10. Other (f)								.0					.0
11. Total Individual Life		143,011	0	0	0	0	0	0	10,000	0	70,716	25	80,741
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 (f)								.0					.0
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities													
20. Fixed								.0	9,034				9,034
21. Indexed								.0					.0
22. Variable with guarantees								.0					.0
23. Variable without guarantees								.0					.0
24. Life contingent payout								.0					.0
25. Other (f)								.0					.0
26. Total Individual Annuities		0	0	0	0	0	0	0	9,034	0	0	0	9,034
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 (f)								.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		143,011 (c)	0	0	0	0	0	0	19,034	0	70,716	25	89,775

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (Continued) ^(b)

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit						
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year ^(b)		
		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	.0	.0	.0	.0	.0	.0	
2. Whole								.0	.0	.0	.0	.0	(3)	(70,000)	26	840,039	
3. Term								.0	.0	.0	.0	.0	(2)	(1,567,000)	58	14,231,841	
4. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
5. Universal								.0	.0	.0	.0	.0	(7)	(830,251)	17	3,645,136	
6. Universal with secondary guarantees								.0	.0	.0	.0	.0	.0	.0	.1	50,000	
7. Variable								.0	.0	.0	.0	.0	.0	.0	.0	.0	
8. Variable universal								.0	.0	.0	.0	.0	.0	.0	.0	.0	
9. Credit								.0	.0	.0	.0	.0	.0	.0	.0	.0	
10. Other	(f)							.0	.0	.0	.0	.0	.0	.0	.0	.0	
11. Total Individual Life	0	0	0	0	0	0	0	0	0	0	0	0	(12)	(2,467,251)	102	18,767,016	
Group Life																	
12. Whole								.0	.0	.0					.0	.0	
13. Term								.0	.0	.0					.0	.0	
14. Universal								.0	.0	.0					.0	.0	
15. Variable								.0	.0	.0					.0	.0	
16. Variable universal								.0	.0	.0					.0	.0	
17. Credit								.0	.0	.0					.0	.0	
18. Other	(f)							.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																	
20. Fixed	9,034	1	9,034					1	9,034	.0	.0	.0	(1)	(8,938)	.0	.0	
21. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
22. Variable with guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
23. Variable without guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
24. Life contingent payout								.0	.0	.0	.0	.0	.0	.0	.0	.0	
25. Other	(f)							.0	.0	.0	.0	.0	.0	.0	.0	.0	
26. Total Individual Annuities	9,034	1	9,034	0	0	0	0	1	9,034	0	0	0	(1)	(8,938)	0	0	
Group Annuities																	
27. Fixed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
28. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
29. Variable with guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
30. Variable without guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
31. Life contingent payout								.0	.0	.0	.0	.0	.0	.0	.0	.0	
32. Other	(f)							.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																	
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
46. Total Accident and Health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				0	0	0	
47. Total	9,034	1	9,034	0	0	0	0	1	9,034	0	0	0	(13)	(2,476,189)	102	18,767,016	

(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 \$ _____.



DURING THE YEAR 2024

NAIC Group Code 00588

DIRECT BUSINESS IN THE STATE OF Montana

NAIC Company Code 71218

24.MT

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (Continued) ^(b)

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit					
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year ^(b)	
		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	0	0	0	0	0
2. Whole									0	0	0	0	0	0	1	100,000
3. Term									0	0	0	0	3	800,000	14	3,760,000
4. Indexed									0	0	0	0	0	0	0	0
5. Universal									0	0	0	0	0	(135)	4	704,833
6. Universal with secondary guarantees									0	0	0	0	0	0	0	0
7. Variable									0	0	0	0	0	0	0	0
8. Variable universal									0	0	0	0	0	0	0	0
9. Credit									0	0	0	0	0	0	0	0
10. Other	(f)								0	0	0	0	0	0	0	0
11. Total Individual Life	0	0	0	0	0	0	0	0	0	0	0	0	3	799,865	19	4,564,833
Group Life																
12. Whole									0	0	0				0	0
13. Term									0	0	0				0	0
14. Universal									0	0	0				0	0
15. Variable									0	0	0				0	0
16. Variable universal									0	0	0				0	0
17. Credit									0	0	0				0	(a)
18. Other	(f)								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																
20. Fixed									0	0	0	0	0	0	0	0
21. Indexed									0	0	0	0	0	0	0	0
22. Variable with guarantees									0	0	0	0	0	0	0	0
23. Variable without guarantees									0	0	0	0	0	0	0	0
24. Life contingent payout									0	0	0	0	0	0	0	0
25. Other	(f)								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																
27. Fixed									0	0	0	0	0	0	0	0
28. Indexed									0	0	0	0	0	0	0	0
29. Variable with guarantees									0	0	0	0	0	0	0	0
30. Variable without guarantees									0	0	0	0	0	0	0	0
31. Life contingent payout									0	0	0	0	0	0	0	0
32. Other	(f)								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																
34. Comprehensive individual	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
35. Comprehensive group	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
36. Medicare Supplement	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
37. Vision only	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
38. Dental only	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
39. Federal Employees Health Benefits Plan	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
40. Title XVIII Medicare	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
41. Title XIX Medicaid	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
42. Credit A&H		xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
43. Disability income	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
44. Long-term care	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
45. Other health	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					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	0	0	0	0	0	0	0	0	0	0	0	0	3	799,865	19	4,564,833

(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 Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (b)

NAIC Group Code		DIRECT BUSINESS IN THE STATE OF Nebraska						DURING THE YEAR 2024		NAIC Company Code 71218			
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		1,926						.0					.0
3. Term		3,958						.0					.0
4. Indexed								.0					.0
5. Universal		4,265						.0	50,000		.99		50,099
6. Universal with secondary guarantees								.0					.0
7. Variable								.0					.0
8. Variable universal								.0					.0
9. Credit								.0					.0
10. Other (f)								.0					.0
11. Total Individual Life		10,149	0	0	0	0	0	.0	50,000	0	0	99	50,099
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 (f)								.0					.0
19. Total Group Life		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 (f)								.0					.0
26. Total Individual Annuities		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 (f)								.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		10,149 (c)	0	0	0	0	0	.0	50,000	0	0	99	50,099

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (Continued) ^(b)

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit						
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year ^(b)		
		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	0	0	0	0	0	
2. Whole									0	0	0	0	0	0	3	155,000	
3. Term									0	0	0	0	3	1,517,000	12	5,100,000	
4. Indexed									0	0	0	0	0	0	0	0	
5. Universal									0	0	0	0	0	(1)	(50,000)	3	200,000
6. Universal with secondary guarantees									0	0	0	0	0	0	0	0	0
7. Variable									0	0	0	0	0	0	0	0	0
8. Variable universal									0	0	0	0	0	0	0	0	0
9. Credit									0	0	0	0	0	0	0	0	0
10. Other (f)									0	0	0	0	0	0	0	0	0
11. Total Individual Life	0	0	0	0	0	0	0	0	0	0	0	0	0	2	1,467,000	18	5,455,000
Group Life																	
12. Whole									0	0	0					0	0
13. Term									0	0	0					0	0
14. Universal									0	0	0					0	0
15. Variable									0	0	0					0	0
16. Variable universal									0	0	0					0	0
17. Credit									0	0	0					0	(a)
18. Other (f)									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	0
Individual Annuities																	
20. Fixed									0	0	0	0	0	0	0	0	0
21. Indexed									0	0	0	0	0	0	0	0	0
22. Variable with guarantees									0	0	0	0	0	0	0	0	0
23. Variable without guarantees									0	0	0	0	0	0	0	0	0
24. Life contingent payout									0	0	0	0	0	0	0	0	0
25. Other (f)									0	0	0	0	0	0	0	2	0
26. Total Individual Annuities	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0
Group Annuities																	
27. Fixed									0	0	0	0	0	0	0	0	0
28. Indexed									0	0	0	0	0	0	0	0	0
29. Variable with guarantees									0	0	0	0	0	0	0	0	0
30. Variable without guarantees									0	0	0	0	0	0	0	0	0
31. Life contingent payout									0	0	0	0	0	0	0	0	0
32. Other (f)									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	0
Accident and Health																	
34. Comprehensive individual (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0	
35. Comprehensive group (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0	
36. Medicare Supplement (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0	
37. Vision only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0	
38. Dental only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0	
39. Federal Employees Health Benefits Plan (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0	
40. Title XVIII Medicare (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0	
41. Title XIX Medicaid (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0	
42. Credit A&H	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0	
43. Disability income (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0	
44. Long-term care (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0	
45. Other health (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0	
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	2	1,467,000	20	5,455,000	

(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 Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (b)

NAIC Group Code		DIRECT BUSINESS IN THE STATE OF Nevada						DURING THE YEAR 2024					NAIC Company Code 71218	
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		.11,471						.0					.0	
3. Term		.12,102						.0					.0	
4. Indexed								.0					.0	
5. Universal		.9,368						.0	.150,000		.1,025		.151,025	
6. Universal with secondary guarantees								.0					.0	
7. Variable								.0					.0	
8. Variable universal								.0					.0	
9. Credit								.0					.0	
10. Other (f)								.0					.0	
11. Total Individual Life		32,941	0	0	0	0	0	0	150,000	0	0	1,025	151,025	
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 (f)								.0					.0	
19. Total Group Life		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 (f)								.0					.0	
26. Total Individual Annuities		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 (f)								.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		32,941 (c)	0	0	0	0	0	0	150,000	0	0	1,025	151,025	

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (Continued) ^(b)

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit						
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year ^(b)		
		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	0	0	0	0	0	
2. Whole									0	0	0	0	0	2	10,000	15	981,658
3. Term									0	0	0	0	0	(2)	50,000	28	6,475,000
4. Indexed									0	0	0	0	0	0	0	0	0
5. Universal									0	0	0	0	0	(1)	(149,354)	8	1,079,144
6. Universal with secondary guarantees									0	0	0	0	0	0	0	0	0
7. Variable									0	0	0	0	0	0	0	0	0
8. Variable universal									0	0	0	0	0	0	0	0	0
9. Credit									0	0	0	0	0	0	0	0	0
10. Other	(f)								0	0	0	0	0	0	0	0	0
11. Total Individual Life	0	0	0	0	0	0	0	0	0	0	0	0	0	(1)	(89,354)	51	8,535,802
Group Life																	
12. Whole									0	0	0					0	0
13. Term									0	0	0					0	0
14. Universal									0	0	0					0	0
15. Variable									0	0	0					0	0
16. Variable universal									0	0	0					0	0
17. Credit									0	0	0					0	(a)
18. Other	(f)								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	0
Individual Annuities																	
20. Fixed									0	0	0	0	0	0	0	0	0
21. Indexed									0	0	0	0	0	0	0	0	0
22. Variable with guarantees									0	0	0	0	0	0	0	0	0
23. Variable without guarantees									0	0	0	0	0	0	0	0	0
24. Life contingent payout									0	0	0	0	0	0	0	0	0
25. Other	(f)								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	0
Group Annuities																	
27. Fixed									0	0	0	0	0	0	0	0	0
28. Indexed									0	0	0	0	0	0	0	0	0
29. Variable with guarantees									0	0	0	0	0	0	0	0	0
30. Variable without guarantees									0	0	0	0	0	0	0	0	0
31. Life contingent payout									0	0	0	0	0	0	0	0	0
32. Other	(f)								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	0
Accident and Health																	
34. Comprehensive individual	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx						0	0
35. Comprehensive group	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx						0	0
36. Medicare Supplement	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx						0	0
37. Vision only	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx						0	0
38. Dental only	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx						0	0
39. Federal Employees Health Benefits Plan	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx						0	0
40. Title XVIII Medicare	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx						0	0
41. Title XIX Medicaid	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx						0	0
42. Credit A&H		xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx						0	0
43. Disability income	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx						0	0
44. Long-term care	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx						0	0
45. Other health	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx						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	0	0	0	0	0	0	0	0	0	0	0	0		(1)	(89,354)	51	8,535,802

(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 Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (b)

NAIC Group Code		DIRECT BUSINESS IN THE STATE OF New Hampshire						DURING THE YEAR 2024		NAIC Company Code 71218			
		1	2	Dividends to Policyholders/Refunds to Members				Claims and Benefits Paid					
				3	4	5	6	7	8	9	10	11	12
Line of Business		Premiums and Annuities Considerations	Other Considerations	Paid in Cash or Left on Deposit	Applied to Pay Renewal Premiums	Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	Other	Total (Col. 3+4+5+6)	Death and Annuity Benefits	Matured Endowments	Surrender Values and Withdrawals for Life Contracts	All Other Benefits	Total (Sum Columns 8 through 11)
Individual Life													
1. Industrial								.0					.0
2. Whole								.0					.0
3. Term		8,112						.0			8,115		8,115
4. Indexed								.0					.0
5. Universal		1,045						.0					.0
6. Universal with secondary guarantees								.0					.0
7. Variable								.0					.0
8. Variable universal								.0					.0
9. Credit								.0					.0
10. Other (f)								.0					.0
11. Total Individual Life		9,157	0	0	0	0	0	0	0	0	8,115	0	8,115
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 (f)								.0					.0
19. Total Group Life		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 (f)								.0					.0
26. Total Individual Annuities		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 (f)								.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		9,157 (c)	0	0	0	0	0	0	0	0	8,115	0	8,115

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (Continued) ^(b)

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit					
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year ^(b)	
		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	0	0	0	0	0
2. Whole									0	0	0	0	0	0	0	0
3. Term									0	0	0	0	0	(5)	(910,000)	22
4. Indexed									0	0	0	0	0	0	0	0
5. Universal									0	0	0	0	0	0	(30,720)	2
6. Universal with secondary guarantees									0	0	0	0	0	0	0	0
7. Variable									0	0	0	0	0	0	0	0
8. Variable universal									0	0	0	0	0	0	0	0
9. Credit									0	0	0	0	0	0	0	0
10. Other	(f)								0	0	0	0	0	0	0	0
11. Total Individual Life	0	0	0	0	0	0	0	0	0	0	0	0	(5)	(940,720)	24	7,025,000
Group Life																
12. Whole									0	0	0				0	0
13. Term									0	0	0				0	0
14. Universal									0	0	0				0	0
15. Variable									0	0	0				0	0
16. Variable universal									0	0	0				0	0
17. Credit									0	0	0				0	0
18. Other	(f)								0	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	0	0	0	0	0
21. Indexed									0	0	0	0	0	0	0	0
22. Variable with guarantees									0	0	0	0	0	0	0	0
23. Variable without guarantees									0	0	0	0	0	0	0	0
24. Life contingent payout									0	0	0	0	0	0	0	0
25. Other	(f)								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																
27. Fixed									0	0	0	0	0	0	0	0
28. Indexed									0	0	0	0	0	0	0	0
29. Variable with guarantees									0	0	0	0	0	0	0	0
30. Variable without guarantees									0	0	0	0	0	0	0	0
31. Life contingent payout									0	0	0	0	0	0	0	0
32. Other	(f)								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																
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					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	0	0	0	0	0	0	0	0	0	0	0	0	(5)	(940,720)	24	7,025,000

(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 Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (b)

NAIC Group Code		DIRECT BUSINESS IN THE STATE OF New Jersey						DURING THE YEAR 2024		NAIC Company Code 71218			
		1	2	Dividends to Policyholders/Refunds to Members				Claims and Benefits Paid					
				3	4	5	6	7	8	9	10	11	12
Line of Business		Premiums and Annuities Considerations	Other Considerations	Paid in Cash or Left on Deposit	Applied to Pay Renewal Premiums	Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	Other	Total (Col. 3+4+5+6)	Death and Annuity Benefits	Matured Endowments	Surrender Values and Withdrawals for Life Contracts	All Other Benefits	Total (Sum Columns 8 through 11)
Individual Life													
1. Industrial								.0					.0
2. Whole		7,901						.0			1,132		1,132
3. Term		31,934						.0					.0
4. Indexed								.0					.0
5. Universal		13,804						.0					.0
6. Universal with secondary guarantees								.0					.0
7. Variable								.0					.0
8. Variable universal								.0					.0
9. Credit								.0					.0
10. Other (f)								.0					.0
11. Total Individual Life		53,639	0	0	0	0	0	0	0	0	1,132	0	1,132
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 (f)								.0					.0
19. Total Group Life		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 (f)								.0					.0
26. Total Individual Annuities		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 (f)								.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		53,639 (c)	0	0	0	0	0	0	0	0	1,132	0	1,132

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (Continued) ^(b)

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit						
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year ^(b)		
		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	0	0	0	0	0	
2. Whole									0	0	0	0	0	1	20,000	17	796,700
3. Term									0	0	0	0	0	3	1,511,000	43	23,610,000
4. Indexed									0	0	0	0	0	0	0	0	0
5. Universal									0	0	0	0	0	(3)	(150,000)	4	1,700,000
6. Universal with secondary guarantees									0	0	0	0	0	0	0	0	0
7. Variable									0	0	0	0	0	0	0	0	0
8. Variable universal									0	0	0	0	0	0	0	0	0
9. Credit									0	0	0	0	0	0	0	0	0
10. Other	(f)								0	0	0	0	0	0	0	0	0
11. Total Individual Life	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1,381,000	64	26,106,700
Group Life																	
12. Whole									0	0	0					0	0
13. Term									0	0	0					0	0
14. Universal									0	0	0					0	0
15. Variable									0	0	0					0	0
16. Variable universal									0	0	0					0	0
17. Credit									0	0	0					0	0
18. Other	(f)								0	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	0	0	0	0	2	171
21. Indexed									0	0	0	0	0	0	0	0	0
22. Variable with guarantees									0	0	0	0	0	0	0	0	0
23. Variable without guarantees									0	0	0	0	0	0	0	0	0
24. Life contingent payout									0	0	0	0	0	0	0	0	0
25. Other	(f)								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	2	1	171
Group Annuities																	
27. Fixed									0	0	0	0	0	0	0	0	0
28. Indexed									0	0	0	0	0	0	0	0	0
29. Variable with guarantees									0	0	0	0	0	0	0	0	0
30. Variable without guarantees									0	0	0	0	0	0	0	0	0
31. Life contingent payout									0	0	0	0	0	0	0	0	0
32. Other	(f)								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	0
Accident and Health																	
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0	0
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0	0
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0	0
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0	0
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0	0
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0	0
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0	0
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0	0
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0	0
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0	0
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0	0
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0	0
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	1	1,381,002	65	26,106,871

(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 Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) ^(b)

NAIC Group Code	00588
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DIRECT BUSINESS IN THE STATE OF New Mexico

DURING THE YEAR 2024

NAIC Company Code 71218

Line of Business		1	2	Dividends to Policyholders/Refunds to Members				Claims and Benefits Paid					
		Premiums and Annuities Considerations	Other Considerations	3	4	5	6	7	8	9	10	11	12
				Paid in Cash or Left on Deposit	Applied to Pay Renewal Premiums	Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	Other	Total (Col. 3+4+5+6)	Death and Annuity Benefits	Matured Endowments	Surrender Values and Withdrawals for Life Contracts	All Other Benefits	Total (Sum Columns 8 through 11)
Individual Life													
1.	Industrial							.0					.0
2.	Whole	3,079						.0					.0
3.	Term	5,932						.0					.0
4.	Indexed							.0					.0
5.	Universal	960						.0					.0
6.	Universal with secondary guarantees							.0					.0
7.	Variable							.0					.0
8.	Variable universal							.0					.0
9.	Credit							.0					.0
10.	Other (f)							.0					.0
11.	Total Individual Life	9,971	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 (f)							.0					.0
19.	Total Group Life	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 (f)							.0					.0
26.	Total Individual Annuities	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 (f)							.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 (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	XXX	XXX	XXX	0	0
47.	Total	9,971 (c)	0	0	0	0	0	0	0	0	0	0	0

24.NM

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (Continued) ^(b)

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit						
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year ^(b)		
		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	0	0	0	0	0	
2. Whole									0	0	0	0	0	1	20,000	8	330,000
3. Term									0	0	0	0	0	3	585,000	12	2,611,000
4. Indexed									0	0	0	0	0	0	0	0	0
5. Universal									0	0	0	0	0	0	0	1	127,000
6. Universal with secondary guarantees									0	0	0	0	0	0	0	0	0
7. Variable									0	0	0	0	0	0	0	0	0
8. Variable universal									0	0	0	0	0	0	0	0	0
9. Credit									0	0	0	0	0	0	0	0	0
10. Other	(f)								0	0	0	0	0	0	0	0	0
11. Total Individual Life	0	0	0	0	0	0	0	0	0	0	0	0	0	4	605,000	21	3,068,000
Group Life																	
12. Whole									0	0	0					0	0
13. Term									0	0	0					0	0
14. Universal									0	0	0					0	0
15. Variable									0	0	0					0	0
16. Variable universal									0	0	0					0	0
17. Credit									0	0	0					0	(a)
18. Other	(f)								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	0
Individual Annuities																	
20. Fixed									0	0	0	0	0	0	0	0	0
21. Indexed									0	0	0	0	0	0	0	0	0
22. Variable with guarantees									0	0	0	0	0	0	0	0	0
23. Variable without guarantees									0	0	0	0	0	0	0	0	0
24. Life contingent payout									0	0	0	0	0	0	0	0	0
25. Other	(f)								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	0
Group Annuities																	
27. Fixed									0	0	0	0	0	0	0	0	0
28. Indexed									0	0	0	0	0	0	0	0	0
29. Variable with guarantees									0	0	0	0	0	0	0	0	0
30. Variable without guarantees									0	0	0	0	0	0	0	0	0
31. Life contingent payout									0	0	0	0	0	0	0	0	0
32. Other	(f)								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	0
Accident and Health																	
34. Comprehensive individual	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx						0	0
35. Comprehensive group	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx						0	0
36. Medicare Supplement	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx						0	0
37. Vision only	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx						0	0
38. Dental only	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx						0	0
39. Federal Employees Health Benefits Plan	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx						0	0
40. Title XVIII Medicare	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx						0	0
41. Title XIX Medicaid	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx						0	0
42. Credit A&H		xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx						0	0
43. Disability income	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx						0	0
44. Long-term care	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx						0	0
45. Other health	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx						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	0	0	0	0	0	0	0	0	0	0	0	0	0	4	605,000	21	3,068,000

(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 Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) ^(b)

NAIC Group Code	00588
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DIRECT BUSINESS IN THE STATE OF New York

DURING THE YEAR 2024

NAIC Company Code 71218

Line of Business		1	2	Dividends to Policyholders/Refunds to Members				Claims and Benefits Paid					
		Premiums and Annuities Considerations	Other Considerations	3	4	5	6	7	8	9	10	11	12
				Paid in Cash or Left on Deposit	Applied to Pay Renewal Premiums	Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	Other	Total (Col. 3+4+5+6)	Death and Annuity Benefits	Matured Endowments	Surrender Values and Withdrawals for Life Contracts	All Other Benefits	Total (Sum Columns 8 through 11)
Individual Life													
1.	Industrial							.0					.0
2.	Whole	8,077						.0					.0
3.	Term	15,870						.0					.0
4.	Indexed							.0					.0
5.	Universal	3,640						.0					.0
6.	Universal with secondary guarantees	1,272						.0					.0
7.	Variable							.0					.0
8.	Variable universal							.0					.0
9.	Credit							.0					.0
10.	Other (f)							.0					.0
11.	Total Individual Life	28,859	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 (f)							.0					.0
19.	Total Group Life	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 (f)							.0					.0
26.	Total Individual Annuities	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 (f)							.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 (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	28,859 (c)	0	0	0	0	0	0	0	0	0	0	0

24.NY

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (Continued) ^(b)

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit						
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year ^(b)		
		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	0	0	0	0	0	
2. Whole									0	0	0	0	0	4	160,000	20	479,589
3. Term									0	0	0	0	0	6	1,974,999	48	12,110,980
4. Indexed									0	0	0	0	0	0	0	0	0
5. Universal									0	0	0	0	0	0	0	0	0
6. Universal with secondary guarantees									0	0	0	0	0	(3)	(150,091)	12	740,463
7. Variable									0	0	0	0	0	0	0	0	0
8. Variable universal									0	0	0	0	0	0	0	0	0
9. Credit									0	0	0	0	0	0	0	0	0
10. Other	(f)								0	0	0	0	0	0	0	0	0
11. Total Individual Life	0	0	0	0	0	0	0	0	0	0	0	0	0	7	1,984,908	81	13,381,032
Group Life																	
12. Whole									0	0	0					0	0
13. Term									0	0	0					0	0
14. Universal									0	0	0					0	0
15. Variable									0	0	0					0	0
16. Variable universal									0	0	0					0	0
17. Credit									0	0	0					0	0
18. Other	(f)								0	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	0	0	0	317	1	7,354
21. Indexed									0	0	0	0	0	0	0	0	0
22. Variable with guarantees									0	0	0	0	0	0	0	0	0
23. Variable without guarantees									0	0	0	0	0	0	0	0	0
24. Life contingent payout									0	0	0	0	0	0	0	0	0
25. Other	(f)								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	317	1	7,354
Group Annuities																	
27. Fixed									0	0	0	0	0	0	0	0	0
28. Indexed									0	0	0	0	0	0	0	0	0
29. Variable with guarantees									0	0	0	0	0	0	0	0	0
30. Variable without guarantees									0	0	0	0	0	0	0	0	0
31. Life contingent payout									0	0	0	0	0	0	0	0	0
32. Other	(f)								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	0
Accident and Health																	
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0	0
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0	0
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0	0
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0	0
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0	0
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0	0
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0	0
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0	0
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0	0
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0	0
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0	0
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0	0
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	7	1,985,225	82	13,388,386

(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 Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (b)

NAIC Group Code		DIRECT BUSINESS IN THE STATE OF North Carolina						DURING THE YEAR 2024					NAIC Company Code 71218	
		1	2	Dividends to Policyholders/Refunds to Members				Claims and Benefits Paid						
				3	4	5	6	7	8	9	10	11	12	
Line of Business		Premiums and Annuities Considerations	Other Considerations	Paid in Cash or Left on Deposit	Applied to Pay Renewal Premiums	Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	Other	Total (Col. 3+4+5+6)	Death and Annuity Benefits	Matured Endowments	Surrender Values and Withdrawals for Life Contracts	All Other Benefits	Total (Sum Columns 8 through 11)	
Individual Life														
1. Industrial								.0					.0	
2. Whole		.57,809						.0	.15,000			.56	.15,056	
3. Term		.147,045						.0	.150,000			.860	.150,860	
4. Indexed								.0					.0	
5. Universal		.51,261						.0					.0	
6. Universal with secondary guarantees		.4,055						.0					.0	
7. Variable								.0					.0	
8. Variable universal								.0					.0	
9. Credit								.0					.0	
10. Other (f)								.0					.0	
11. Total Individual Life		.260,170	.0	.0	.0	.0	.0	.0	.165,000	.0	.0	.916	.165,916	
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 (f)								.0					.0	
19. Total Group Life		.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	.434				.434	
25. Other (f)								.0					.0	
26. Total Individual Annuities		.0	.0	.0	.0	.0	.0	.0	.434	.0	.0	.0	.434	
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 (f)								.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						.0	.xxx	.xxx	.xxx	.0	.0	
44. Long-term care (d)								.0	.xxx	.xxx	.xxx		.0	
45. Other health (d)		.107						.0	.xxx	.xxx	.xxx	.0	.0	
46. Total Accident and Health		.107	.0	.0	.0	.0	.0	.0	.xxx	.xxx	.xxx	.0	.0	
47. Total		.260,277 (c)	.0	.0	.0	.0	.0	.0	.165,434	.0	.0	.916	.166,351	

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (Continued) ^(b)

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit					
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year ^(b)	
		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	0	0	0	0	0
2. Whole									0	0	0	0	0	7	160,544	84
3. Term									0	0	0	0	(4)	260,000	305	95,545,224
4. Indexed									0	0	0	0	0	0	0	0
5. Universal									0	0	0	0	(2)	(127,409)	72	6,139,003
6. Universal with secondary guarantees									0	0	0	0	1	100,000	5	850,000
7. Variable									0	0	0	0	0	0	0	0
8. Variable universal									0	0	0	0	0	0	0	0
9. Credit									0	0	0	0	0	0	0	0
10. Other	(f)								0	0	0	0	0	0	0	0
11. Total Individual Life	0	0	0	0	0	0	0	0	0	0	0	0	2	393,135	466	105,030,286
Group Life																
12. Whole									0	0	0				0	0
13. Term									0	0	0				0	0
14. Universal									0	0	0				0	0
15. Variable									0	0	0				0	0
16. Variable universal									0	0	0				0	0
17. Credit									0	0	0				0	(a)
18. Other	(f)								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																
20. Fixed									0	0	0	0	0	0	(13,269)	2
21. Indexed									0	0	0	0	0	0	0	0
22. Variable with guarantees									0	0	0	0	0	0	0	0
23. Variable without guarantees									0	0	0	0	0	0	0	0
24. Life contingent payout	434	1	434						1	434	0	0	0	0	0	0
25. Other	(f)								0	0	0	0	0	0	0	0
26. Total Individual Annuities	434	1	434	0	0	0	0	0	1	434	0	0	0	0	(13,269)	2
Group Annuities																
27. Fixed									0	0	0	0	0	0	0	0
28. Indexed									0	0	0	0	0	0	0	0
29. Variable with guarantees									0	0	0	0	0	0	0	0
30. Variable without guarantees									0	0	0	0	0	0	0	0
31. Life contingent payout									0	0	0	0	0	0	0	0
32. Other	(f)								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																
34. Comprehensive individual	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
35. Comprehensive group	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
36. Medicare Supplement	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
37. Vision only	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
38. Dental only	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
39. Federal Employees Health Benefits Plan	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
40. Title XVIII Medicare	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
41. Title XIX Medicaid	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
42. Credit A&H		xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
43. Disability income	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx			0	0	0	0
44. Long-term care	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
45. Other health	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx			0	0	1	107
46. Total Accident and Health	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	0	0		0	1	107
47. Total	434	1	434	0	0	0	0	0	1	434	0	0	0	2	379,866	469

(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 Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) ^(b)

NAIC Group Code	00588
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DIRECT BUSINESS IN THE STATE OF North Dakota

DURING THE YEAR 2024

NAIC Company Code 71218

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		2,424						.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 (f)								.0					.0
11. Total Individual Life		2,424	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 (f)								.0					.0
19. Total Group Life		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 (f)								.0					.0
26. Total Individual Annuities		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 (f)								.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 (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		2,424 (c)	0	0	0	0	0	0	0	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (Continued) ^(b)

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit					
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year ^(b)	
		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	0	0	0	0	0
2. Whole									0	0	0	0	0	0	0	0
3. Term									0	0	0	0	0	0	0	0
4. Indexed									0	0	0	0	0	0	0	0
5. Universal									0	0	0	0	0	0	0	0
6. Universal with secondary guarantees									0	0	0	0	0	0	0	0
7. Variable									0	0	0	0	0	0	0	0
8. Variable universal									0	0	0	0	0	0	0	0
9. Credit									0	0	0	0	0	0	0	0
10. Other	(f)								0	0	0	0	0	0	0	0
11. Total Individual Life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	3	1,750,000
Group Life																
12. Whole									0	0	0				0	0
13. Term									0	0	0				0	0
14. Universal									0	0	0				0	0
15. Variable									0	0	0				0	0
16. Variable universal									0	0	0				0	0
17. Credit									0	0	0				0	0
18. Other	(f)								0	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	0	0	0	0	0
21. Indexed									0	0	0	0	0	0	0	0
22. Variable with guarantees									0	0	0	0	0	0	0	0
23. Variable without guarantees									0	0	0	0	0	0	0	0
24. Life contingent payout									0	0	0	0	0	0	0	0
25. Other	(f)								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																
27. Fixed									0	0	0	0	0	0	0	0
28. Indexed									0	0	0	0	0	0	0	0
29. Variable with guarantees									0	0	0	0	0	0	0	0
30. Variable without guarantees									0	0	0	0	0	0	0	0
31. Life contingent payout									0	0	0	0	0	0	0	0
32. Other	(f)								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																
34. Comprehensive individual	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
35. Comprehensive group	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
36. Medicare Supplement	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
37. Vision only	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
38. Dental only	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
39. Federal Employees Health Benefits Plan	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
40. Title XVIII Medicare	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
41. Title XIX Medicaid	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
42. Credit A&H		xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
43. Disability income	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
44. Long-term care	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
45. Other health	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	3	1,750,000

(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 Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (b)

NAIC Group Code		DIRECT BUSINESS IN THE STATE OF Ohio						DURING THE YEAR 2024		NAIC Company Code 71218			
		1	2	Dividends to Policyholders/Refunds to Members				Claims and Benefits Paid					
				3	4	5	6	7	8	9	10	11	12
Line of Business		Premiums and Annuities Considerations	Other Considerations	Paid in Cash or Left on Deposit	Applied to Pay Renewal Premiums	Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	Other	Total (Col. 3+4+5+6)	Death and Annuity Benefits	Matured Endowments	Surrender Values and Withdrawals for Life Contracts	All Other Benefits	Total (Sum Columns 8 through 11)
Individual Life													
1. Industrial								.0					.0
2. Whole		5,562,191		43,270				43,270	3,513,619		744,105	20,009	4,277,733
3. Term		17,024,855						.0	11,358,999		193,996	53,586	11,606,581
4. Indexed								.0					.0
5. Universal		5,653,632						.0	4,309,532		3,623,874	58,649	7,992,055
6. Universal with secondary guarantees		1,504,336						.0	465,000		19,647	1,898	486,544
7. Variable								.0					.0
8. Variable universal								.0					.0
9. Credit								.0					.0
10. Other		(f)						.0					.0
11. Total Individual Life		29,745,014	0	43,270	0	0	0	43,270	19,647,150	0	4,581,621	134,142	24,362,913
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		(f)						.0					.0
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities													
20. Fixed		170,948						.0	3,133,924				3,133,924
21. Indexed								.0					.0
22. Variable with guarantees								.0					.0
23. Variable without guarantees								.0					.0
24. Life contingent payout								.0	1,858				1,858
25. Other		(f)						.0					.0
26. Total Individual Annuities		170,948	0	0	0	0	0	0	3,135,782	0	0	0	3,135,782
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		(f)						.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	25,764	25,764
44. Long-term care		(d)						.0	XXX	XXX	XXX		.0
45. Other health		(d)						.0	XXX	XXX	XXX	.0	.0
46. Total Accident and Health		40,395	0	0	0	0	0	.0	XXX	XXX	XXX	25,764	25,764
47. Total		29,956,357 (c)	0	43,270	0	0	0	43,270	22,782,932	0	4,581,621	159,906	27,524,459

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (Continued) ^(b)

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit					
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year ^(b)	
		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	0	0	0	0	0
2. Whole	4,292,948	225	3,941,155					225	3,941,155	670,281	0	0	(427)	(10,882,637)	9,604	256,836,388
3. Term	11,013,514	116	11,323,457					116	11,323,457	954,058	0	100,000	(1,817)	(390,235,033)	23,480	5,959,329,452
4. Indexed								0	0	0	0	0	0	0	0	0
5. Universal	6,401,445	81	5,605,087					81	5,605,087	1,067,357	0	67,675	(372)	(37,588,330)	7,290	703,288,825
6. Universal with secondary guarantees								0	0	0	0	0	(10)	(1,220,735)	679	134,214,166
7. Variable								0	0	0	0	0	0	0	0	0
8. Variable universal								0	0	0	0	0	0	0	0	0
9. Credit								0	0	0	0	0	0	0	0	0
10. Other	(f)							0	0	0	0	0	0	0	0	0
11. Total Individual Life	21,707,906	422	20,869,699	0	0	0	0	422	20,869,699	2,691,696	0	167,675	(2,626)	(439,926,735)	41,053	7,053,668,831
Group Life																
12. Whole								0	0	0					0	0
13. Term								0	0	0					0	0
14. Universal								0	0	0					0	0
15. Variable								0	0	0					0	0
16. Variable universal								0	0	0					0	0
17. Credit								0	0	0					0	0
18. Other	(f)							0	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	3,202,622	148	3,135,782					148	3,135,782	108,419	0	0	(56)	(2,737,131)	418	19,210,877
21. Indexed								0	0	0	0	0	0	0	0	0
22. Variable with guarantees								0	0	0	0	0	0	0	0	0
23. Variable without guarantees								0	0	0	0	0	0	0	0	0
24. Life contingent payout								0	0	0	0	0	0	0	11	0
25. Other	(f)							0	0	0	1	5,038	0	4,189	13	217,337
26. Total Individual Annuities	3,202,622	148	3,135,782	0	0	0	0	148	3,135,782	108,419	1	5,038	(56)	(2,732,942)	442	19,428,214
Group Annuities																
27. Fixed								0	0	0	0	0	0	0	0	0
28. Indexed								0	0	0	0	0	0	0	0	0
29. Variable with guarantees								0	0	0	0	0	0	0	0	0
30. Variable without guarantees								0	0	0	0	0	0	0	0	0
31. Life contingent payout								0	0	0	0	0	0	0	0	0
32. Other	(f)							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																
34. Comprehensive individual	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
35. Comprehensive group	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
36. Medicare Supplement	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
37. Vision only	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
38. Dental only	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
39. Federal Employees Health Benefits Plan	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
40. Title XVIII Medicare	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
41. Title XIX Medicaid	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
42. Credit A&H	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
43. Disability income	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			(9)	(3,399)	74	33,055
44. Long-term care	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
45. Other health	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			(1)	(245)	20	5,430
46. Total Accident and Health	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	(10)	(3,644)	94	38,485
47. Total	24,910,529	570	24,005,481	0	0	0	0	570	24,005,481	2,800,115	1	172,713	(2,692)	(442,663,321)	41,589	7,073,135,530

(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 Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) ^(b)

NAIC Group Code	00588
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DIRECT BUSINESS IN THE STATE OF Oklahoma

DURING THE YEAR 2024

NAIC Company Code 71218

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		2,395						.0					.0
3. Term		11,832						.0					.0
4. Indexed								.0					.0
5. Universal		1,380						.0					.0
6. Universal with secondary guarantees		1,790						.0					.0
7. Variable								.0					.0
8. Variable universal								.0					.0
9. Credit								.0					.0
10. Other (f)								.0					.0
11. Total Individual Life		17,397	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 (f)								.0					.0
19. Total Group Life		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 (f)								.0					.0
26. Total Individual Annuities		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 (f)								.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 (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	XXX	XXX	XXX	0	0
47. Total		17,397 (c)	0	0	0	0	0	0	0	0	0	0	0

24.OK

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (Continued) ^(b)

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit					
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year ^(b)	
		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	0	0	0	0	0
2. Whole									0	0	0	0	0	1	10,893	5 49,965
3. Term									0	0	0	0	0	(3)	(825,000)	26 8,330,145
4. Indexed									0	0	0	0	0	0	0	0
5. Universal									0	0	0	0	0	(1)	(50,000)	2 100,000
6. Universal with secondary guarantees									0	0	0	0	0	0	0	1 250,000
7. Variable									0	0	0	0	0	0	0	0
8. Variable universal									0	0	0	0	0	0	0	0
9. Credit									0	0	0	0	0	0	0	0
10. Other	(f)								0	0	0	0	0	0	0	0
11. Total Individual Life	0	0	0	0	0	0	0	0	0	0	0	0	(3)	(864,107)	34	8,730,110
Group Life																
12. Whole									0	0	0					0
13. Term									0	0	0					0
14. Universal									0	0	0					0
15. Variable									0	0	0					0
16. Variable universal									0	0	0					0
17. Credit									0	0	0					0 (a)
18. Other	(f)								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																
20. Fixed									0	0	0	0	0	0	186	1 8,604
21. Indexed									0	0	0	0	0	0	0	0
22. Variable with guarantees									0	0	0	0	0	0	0	0
23. Variable without guarantees									0	0	0	0	0	0	0	0
24. Life contingent payout									0	0	0	0	0	0	0	0
25. Other	(f)								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	186	1	8,604
Group Annuities																
27. Fixed									0	0	0	0	0	0	0	0
28. Indexed									0	0	0	0	0	0	0	0
29. Variable with guarantees									0	0	0	0	0	0	0	0
30. Variable without guarantees									0	0	0	0	0	0	0	0
31. Life contingent payout									0	0	0	0	0	0	0	0
32. Other	(f)								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																
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					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	0	0	0	0	0	0	0	0	0	0	0	0	(3)	(863,921)	35	8,738,714

(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 Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) ^(b)**DIRECT BUSINESS IN THE STATE OF Oregon**

DURING THE YEAR 2024

NAIC Company Code 71218

NAIC Group Code	00588
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24. OR

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (Continued) ^(b)

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit						
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year ^(b)		
		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	0	0	0	0	0	
2. Whole									0	0	0	0	0	0	3	400,000	
3. Term									0	0	0	0	0	25,000	19	6,310,000	
4. Indexed									0	0	0	0	0	0	0	0	
5. Universal									0	0	0	0	0	(1)	(49,937)	4	246,982
6. Universal with secondary guarantees									0	0	0	0	0	0	0	0	0
7. Variable									0	0	0	0	0	0	0	0	0
8. Variable universal									0	0	0	0	0	0	0	0	0
9. Credit									0	0	0	0	0	0	0	0	0
10. Other	(f)								0	0	0	0	0	0	0	0	0
11. Total Individual Life	0	0	0	0	0	0	0	0	0	0	0	0	(1)	(24,937)	26	6,956,982	
Group Life																	
12. Whole									0	0	0				0	0	
13. Term									0	0	0				0	0	
14. Universal									0	0	0				0	0	
15. Variable									0	0	0				0	0	
16. Variable universal									0	0	0				0	0	
17. Credit									0	0	0				0	(a)	
18. Other	(f)								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																	
20. Fixed									0	0	0	0	0	0	0	0	
21. Indexed									0	0	0	0	0	0	0	0	
22. Variable with guarantees									0	0	0	0	0	0	0	0	
23. Variable without guarantees									0	0	0	0	0	0	0	0	
24. Life contingent payout									0	0	0	0	0	0	0	0	
25. Other	(f)								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																	
27. Fixed									0	0	0	0	0	0	0	0	
28. Indexed									0	0	0	0	0	0	0	0	
29. Variable with guarantees									0	0	0	0	0	0	0	0	
30. Variable without guarantees									0	0	0	0	0	0	0	0	
31. Life contingent payout									0	0	0	0	0	0	0	0	
32. Other	(f)								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																	
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0	
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0	
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0	
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0	
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0	
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0	
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0	
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0	
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0	
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0	
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0	
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					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	0	0	0	0	0	0	0	0	0	0	0	0	(1)	(24,937)	26	6,956,982	

(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 Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (b)

NAIC Group Code		DIRECT BUSINESS IN THE STATE OF Pennsylvania						DURING THE YEAR 2024		NAIC Company Code 71218			
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		906,458		510				510	368,796		42,451	1,596	412,844
3. Term		992,547						.0	1,500,000			9,594	1,509,594
4. Indexed								.0					.0
5. Universal		70,384						.0	290,390		51,157	633	342,180
6. Universal with secondary guarantees		134,084						.0	130,000			3,125	133,125
7. Variable								.0					.0
8. Variable universal								.0					.0
9. Credit								.0					.0
10. Other (f)								.0					.0
11. Total Individual Life		2,103,473	0	510	0	0	0	510	2,289,186	0	93,608	14,948	2,397,743
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 (f)								.0					.0
19. Total Group Life		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 (f)								.0					.0
26. Total Individual Annuities		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 (f)								.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		2,103,473 (c)	0	510	0	0	0	510	2,289,186	0	93,608	14,948	2,397,743

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (Continued) ^(b)

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit					
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year ^(b)	
		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	0	0	0	0	0
2. Whole	386,598	42	368,598					42	368,598	40,000	0	0	(82)	(994,350)	1,428	23,966,963
3. Term	1,511,267	11	1,508,698					11	1,508,698	2,618	0	0	(77)	(29,545,594)	1,407	487,271,067
4. Indexed								0	0	0	0	0	0	0	0	0
5. Universal	363,589	5	308,190					5	308,190	55,398	0	0	(3)	(255,669)	132	11,137,259
6. Universal with secondary guarantees								0	0	0	0	0	(1)	(130,000)	61	11,757,465
7. Variable								0	0	0	0	0	0	0	0	0
8. Variable universal								0	0	0	0	0	0	0	0	0
9. Credit								0	0	0	0	0	0	0	0	0
10. Other	(f)							0	0	0	0	0	0	0	0	0
11. Total Individual Life	2,261,453	58	2,185,487	0	0	0	0	58	2,185,487	98,016	0	0	(163)	(30,925,613)	3,028	534,132,754
Group Life																
12. Whole								0	0	0					0	0
13. Term								0	0	0					0	0
14. Universal								0	0	0					0	0
15. Variable								0	0	0					0	0
16. Variable universal								0	0	0					0	0
17. Credit								0	0	0					0	(a)
18. Other	(f)							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																
20. Fixed								0	0	0	0	0	0	0	0	0
21. Indexed								0	0	0	0	0	0	0	0	0
22. Variable with guarantees								0	0	0	0	0	0	0	0	0
23. Variable without guarantees								0	0	0	0	0	0	0	0	0
24. Life contingent payout								0	0	0	0	0	0	0	0	0
25. Other	(f)							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																
27. Fixed								0	0	0	0	0	0	0	0	0
28. Indexed								0	0	0	0	0	0	0	0	0
29. Variable with guarantees								0	0	0	0	0	0	0	0	0
30. Variable without guarantees								0	0	0	0	0	0	0	0	0
31. Life contingent payout								0	0	0	0	0	0	0	0	0
32. Other	(f)							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																
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
46. Total Accident and Health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	2,261,453	58	2,185,487	0	0	0	0	58	2,185,487	98,016	0	0	(163)	(30,925,613)	3,028	534,132,754

(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 Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) ^(b)

DIRECT BUSINESS IN THE STATE OF Puerto Rico

DURING THE YEAR 2024

NAIC Company Code 71218

NAIC Group Code	00588
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[illegible]

24.PR

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (Continued) ^(b)

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit					
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year ^(b)	
		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	0	0	0	0	0
2. Whole									0	0	0	0	0	0	1	25,000
3. Term									0	0	0	0	0	0	1	5,000,000
4. Indexed									0	0	0	0	0	0	0	0
5. Universal									0	0	0	0	0	1	100,000	100,000
6. Universal with secondary guarantees									0	0	0	0	0	0	0	0
7. Variable									0	0	0	0	0	0	0	0
8. Variable universal									0	0	0	0	0	0	0	0
9. Credit									0	0	0	0	0	0	0	0
10. Other	(f)								0	0	0	0	0	0	0	0
11. Total Individual Life	0	0	0	0	0	0	0	0	0	0	0	0	1	100,000	3	5,125,000
Group Life																
12. Whole									0	0	0				0	0
13. Term									0	0	0				0	0
14. Universal									0	0	0				0	0
15. Variable									0	0	0				0	0
16. Variable universal									0	0	0				0	0
17. Credit									0	0	0				0	0
18. Other	(f)								0	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	0	0	0	0	0
21. Indexed									0	0	0	0	0	0	0	0
22. Variable with guarantees									0	0	0	0	0	0	0	0
23. Variable without guarantees									0	0	0	0	0	0	0	0
24. Life contingent payout									0	0	0	0	0	0	0	0
25. Other	(f)								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																
27. Fixed									0	0	0	0	0	0	0	0
28. Indexed									0	0	0	0	0	0	0	0
29. Variable with guarantees									0	0	0	0	0	0	0	0
30. Variable without guarantees									0	0	0	0	0	0	0	0
31. Life contingent payout									0	0	0	0	0	0	0	0
32. Other	(f)								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																
34. Comprehensive individual	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
35. Comprehensive group	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
36. Medicare Supplement	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
37. Vision only	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
38. Dental only	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
39. Federal Employees Health Benefits Plan	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
40. Title XVIII Medicare	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
41. Title XIX Medicaid	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
42. Credit A&H		xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
43. Disability income	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
44. Long-term care	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
45. Other health	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					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	0	0	0	0	0	0	0	0	0	0	0	0	1	100,000	3	5,125,000

(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 Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (b)

NAIC Group Code		DIRECT BUSINESS IN THE STATE OF Rhode Island						DURING THE YEAR 2024		NAIC Company Code 71218			
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		1,085						.0					.0
3. Term		1,600						.0					.0
4. Indexed								.0					.0
5. Universal		148						.0			5,364		5,364
6. Universal with secondary guarantees								.0					.0
7. Variable								.0					.0
8. Variable universal								.0					.0
9. Credit								.0					.0
10. Other (f)								.0					.0
11. Total Individual Life		2,833	0	0	0	0	0	0	0	0	5,364	0	5,364
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 (f)								.0					.0
19. Total Group Life		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 (f)								.0					.0
26. Total Individual Annuities		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 (f)								.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		2,833 (c)	0	0	0	0	0	0	0	0	5,364	0	5,364

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (Continued) ^(b)

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit						
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year ^(b)		
		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	.0	.0	.0	.0	.0	.0	
2. Whole								.0	.0	.0	.0	.0	.0	.0	.2	7,000	
3. Term								.0	.0	.0	.0	.0	.0	(1)	(500,000)	750,000	
4. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
5. Universal								.0	.0	.0	.0	.0	.0	.0	.1	200,000	
6. Universal with secondary guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
7. Variable								.0	.0	.0	.0	.0	.0	.0	.0	.0	
8. Variable universal								.0	.0	.0	.0	.0	.0	.0	.0	.0	
9. Credit								.0	.0	.0	.0	.0	.0	.0	.0	.0	
10. Other	(f)							.0	.0	.0	.0	.0	.0	.0	.0	.0	
11. Total Individual Life	0	0	0	0	0	0	0	0	0	0	0	0	(1)	(500,000)	5	957,000	
Group Life																	
12. Whole								.0	.0	.0					.0	.0	
13. Term								.0	.0	.0					.0	.0	
14. Universal								.0	.0	.0					.0	.0	
15. Variable								.0	.0	.0					.0	.0	
16. Variable universal								.0	.0	.0					.0	.0	
17. Credit								.0	.0	.0					.0	.0 (a)	
18. Other	(f)							.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																	
20. Fixed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
21. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
22. Variable with guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
23. Variable without guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
24. Life contingent payout								.0	.0	.0	.0	.0	.0	.0	.0	.0	
25. Other	(f)							.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																	
27. Fixed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
28. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
29. Variable with guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
30. Variable without guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
31. Life contingent payout								.0	.0	.0	.0	.0	.0	.0	.0	.0	
32. Other	(f)							.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																	
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.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	0	0	0	0	0	0	0	0	0	0	0	0	(1)	(500,000)	5	957,000	

(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 Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (b)

NAIC Group Code		DIRECT BUSINESS IN THE STATE OF South Carolina						DURING THE YEAR 2024		NAIC Company Code 71218			
		1	2	Dividends to Policyholders/Refunds to Members				Claims and Benefits Paid					
				3	4	5	6	7	8	9	10	11	12
Line of Business		Premiums and Annuities Considerations	Other Considerations	Paid in Cash or Left on Deposit	Applied to Pay Renewal Premiums	Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	Other	Total (Col. 3+4+5+6)	Death and Annuity Benefits	Matured Endowments	Surrender Values and Withdrawals for Life Contracts	All Other Benefits	Total (Sum Columns 8 through 11)
Individual Life													
1.	Industrial							.0					.0
2.	Whole	955,727		81				81	256,093		44,882	802	301,777
3.	Term	798,885						.0	209,000			307	209,307
4.	Indexed							.0					.0
5.	Universal	132,780						.0			12,231		12,231
6.	Universal with secondary guarantees	77,359						.0					.0
7.	Variable							.0					.0
8.	Variable universal							.0					.0
9.	Credit							.0					.0
10.	Other	(f)						.0					.0
11.	Total Individual Life	1,964,751	0	81	0	0	0	81	465,093	0	57,113	1,109	523,315
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	(f)						.0					.0
19.	Total Group Life	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	(f)						.0					.0
26.	Total Individual Annuities	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	(f)						.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	1,964,751 (c)	0	81	0	0	0	81	465,093	0	57,113	1,109	523,315

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (Continued) ^(b)

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit						
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year ^(b)		
		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	.0	.0	.0	.0	.0	.0	
2. Whole	348,001	21	293,001					21	293,001	65,000	.0	.0	(46)	(1,374,314)	1,515	39,863,004	
3. Term	4,451	3	5,730					3	5,730	3,722	.0	.0	(73)	(20,859,500)	1,097	370,353,453	
4. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
5. Universal								.0	.0	.0	.0	.0	(3)	(243,257)	165	15,216,023	
6. Universal with secondary guarantees								.0	.0	.0	.0	.0	.0	.0	41	7,506,940	
7. Variable								.0	.0	.0	.0	.0	.0	.0	.0	.0	
8. Variable universal								.0	.0	.0	.0	.0	.0	.0	.0	.0	
9. Credit								.0	.0	.0	.0	.0	.0	.0	.0	.0	
10. Other	(f)							.0	.0	.0	.0	.0	.0	.0	.0	.0	
11. Total Individual Life	352,452	24	298,730	0	0	0	0	24	298,730	68,722	0	0	(122)	(22,477,071)	2,818	432,939,420	
Group Life																	
12. Whole								.0	.0	.0					.0	.0	
13. Term								.0	.0	.0					.0	.0	
14. Universal								.0	.0	.0					.0	.0	
15. Variable								.0	.0	.0					.0	.0	
16. Variable universal								.0	.0	.0					.0	.0	
17. Credit								.0	.0	.0					.0	.0 (a)	
18. Other	(f)							.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																	
20. Fixed								.0	.0	.0	.0	.0	.0	.4,130	.4	175,121	
21. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
22. Variable with guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
23. Variable without guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
24. Life contingent payout								.0	.0	.0	.0	.0	.0	.0	.0	.0	
25. Other	(f)							.0	.0	.0	.0	.0	(2)	(172,423)	.0	.0	
26. Total Individual Annuities	0	0	0	0	0	0	0	0	0	0	0	0	(2)	(168,294)	4	175,121	
Group Annuities																	
27. Fixed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
28. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
29. Variable with guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
30. Variable without guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
31. Life contingent payout								.0	.0	.0	.0	.0	.0	.0	.0	.0	
32. Other	(f)							.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																	
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
46. Total Accident and Health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	
47. Total	352,452	24	298,730	0	0	0	0	24	298,730	68,722	0	0	(124)	(22,645,365)	2,822	433,114,541	

(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: \$ _____.
(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 Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) ^(b)

DIRECT BUSINESS IN THE STATE OF South Dakota

DURING THE YEAR 2024

NAIC Company Code 71218

NAIC Group Code	00588
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Line of Business	1	2	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
	Premiums and Annuities Considerations	Other Considerations	3	4	5	6	7	8	9	10	11	12
			Paid in Cash or Left on Deposit	Applied to Pay Renewal Premiums	Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	Other	Total (Col. 3+4+5+6)	Death and Annuity Benefits	Matured Endowments	Surrender Values and Withdrawals for Life Contracts	All Other Benefits	Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							.0					.0
2. Whole	522						.0					.0
3. Term	2,342						.0					.0
4. Indexed							.0					.0
5. Universal	100						.0					.0
6. Universal with secondary guarantees							.0					.0
7. Variable							.0					.0
8. Variable universal							.0					.0
9. Credit							.0					.0
10. Other (f)							.0					.0
11. Total Individual Life	2,964	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 (f)							.0					.0
19. Total Group Life	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 (f)							.0					.0
26. Total Individual Annuities	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 (f)							.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	2,964 (c)	0	0	0	0	0	0	0	0	0	0	0

24.SD

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (Continued) ^(b)

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit						
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year ^(b)		
		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	.0	.0	.0	.0	.0	.0	
2. Whole								.0	.0	.0	.0	.0	.0	(50,000)	.7	150,000	
3. Term								.0	.0	.0	.0	.0	.0	(4)	(300,000)	.10	2,439,877
4. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. Universal								.0	.0	.0	.0	.0	.0	.0	1,376	.1	54,103
6. Universal with secondary guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
7. Variable								.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
8. Variable universal								.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
9. Credit								.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
10. Other	(f)							.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
11. Total Individual Life	0	0	0	0	0	0	0	0	0	0	0	0	(4)	(348,624)	18	2,643,980	
Group Life																	
12. Whole								.0	.0	.0					.0	.0	
13. Term								.0	.0	.0					.0	.0	
14. Universal								.0	.0	.0					.0	.0	
15. Variable								.0	.0	.0					.0	.0	
16. Variable universal								.0	.0	.0					.0	.0	
17. Credit								.0	.0	.0					.0	.0 (a)	
18. Other	(f)							.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																	
20. Fixed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
21. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
22. Variable with guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
23. Variable without guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
24. Life contingent payout								.0	.0	.0	.0	.0	.0	.0	.0	.0	
25. Other	(f)							.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																	
27. Fixed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
28. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
29. Variable with guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
30. Variable without guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
31. Life contingent payout								.0	.0	.0	.0	.0	.0	.0	.0	.0	
32. Other	(f)							.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																	
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
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	(4)	(348,624)	18	2,643,980	

(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 Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (b)

NAIC Group Code 00588		DIRECT BUSINESS IN THE STATE OF Tennessee						DURING THE YEAR 2024		NAIC Company Code 71218		
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	1,229,287						0	718,077		184,789	2,830	905,696
3. Term	4,344,804						0	4,701,100		27,717	17,422	4,746,239
4. Indexed							0					0
5. Universal	1,045,529						0	1,774,053		845,293	13,946	2,633,292
6. Universal with secondary guarantees	77,913						0	135,000			727	135,727
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other (f)							0					0
11. Total Individual Life	6,697,533	0	0	0	0	0	0	7,328,231	0	1,057,799	34,925	8,420,954
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 (f)							0					0
19. Total Group Life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	38,238						0	229,605				229,605
21. Indexed							0					0
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout							0					0
25. Other (f)							0					0
26. Total Individual Annuities	38,238	0	0	0	0	0	0	229,605	0	0	0	229,605
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 (f)							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)	4,339						0	XXX	XXX	XXX	0	0
44. Long-term care (d)							0	XXX	XXX	XXX		0
45. Other health (d)	3,208						0	XXX	XXX	XXX	0	0
46. Total Accident and Health	7,547	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	6,743,318 (c)	0	0	0	0	0	0	7,557,836	0	1,057,799	34,925	8,650,559



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (b)

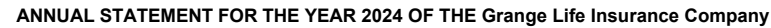
NAIC Group Code 00588		DIRECT BUSINESS IN THE STATE OF Texas						DURING THE YEAR 2024					NAIC Company Code 71218	
Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid					11 All Other Benefits	12 Total (Sum Columns 8 through 11)
			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				
Individual Life														
1. Industrial							0							0
2. Whole	39,087		644				644	6,000		7,492		90		13,582
3. Term	129,193							600,000		7,198		1,501		608,699
4. Indexed							0							0
5. Universal	57,653						0							0
6. Universal with secondary guarantees							0							0
7. Variable							0							0
8. Variable universal							0							0
9. Credit							0							0
10. Other (f)							0							0
11. Total Individual Life	225,933	0	644	0	0	0	644	606,000	0	14,690		1,591		622,281
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 (f)							0							0
19. Total Group Life	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 (f)							0							0
26. Total Individual Annuities	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 (f)							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	225,933 (c)	0	644	0	0	0	644	606,000	0	14,690		1,591		622,281

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (Continued) ^(b)

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit						
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year ^(b)		
		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	.0	.0	.0	.0	.0	.0	
2. Whole								.0	.0	.0	.0	.0	.1	(8,302)	84	2,770,632	
3. Term								.0	.0	.0	.0	.0	.5	4,645,061	246	73,974,248	
4. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
5. Universal								.0	.0	.0	.0	.0	.5	358,375	66	6,736,927	
6. Universal with secondary guarantees								.0	.0	.0	.0	.0	.0	.0	.1	6,000,000	
7. Variable								.0	.0	.0	.0	.0	.0	.0	.0	.0	
8. Variable universal								.0	.0	.0	.0	.0	.0	.0	.0	.0	
9. Credit								.0	.0	.0	.0	.0	.0	.0	.0	.0	
10. Other	(f)							.0	.0	.0	.0	.0	.0	.0	.0	.0	
11. Total Individual Life	0	0	0	0	0	0	0	0	0	0	0	0	11	4,995,134	397	89,481,807	
Group Life																	
12. Whole								.0	.0	.0					.0	.0	
13. Term								.0	.0	.0					.0	.0	
14. Universal								.0	.0	.0					.0	.0	
15. Variable								.0	.0	.0					.0	.0	
16. Variable universal								.0	.0	.0					.0	.0	
17. Credit								.0	.0	.0					.0	.0 (a)	
18. Other	(f)							.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																	
20. Fixed								.0	.0	.0	.0	.0	.1	4,131	.5	131,146	
21. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
22. Variable with guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
23. Variable without guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
24. Life contingent payout								.0	.0	.0	.0	.0	.0	.0	.0	.0	
25. Other	(f)							.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	1	4,131	5	131,146	
Group Annuities																	
27. Fixed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
28. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
29. Variable with guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
30. Variable without guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
31. Life contingent payout								.0	.0	.0	.0	.0	.0	.0	.0	.0	
32. Other	(f)							.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																	
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.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	0	0	0	0	0	0	0	0	0	0	0	0	12	4,999,265	402	89,612,953	

(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 \$ _____ .



DURING THE YEAR 2024

NAIC Group Code 00588

DIRECT BUSINESS IN THE STATE OF U.S. Virgin Islands

NAIC Company Code 71218

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	1,063							.0														.0
3.	Term								.0														.0
4.	Indexed								.0														.0
5.	Universal	335							.0														.0
6.	Universal with secondary guarantees								.0														.0
7.	Variable								.0														.0
8.	Variable universal								.0														.0
9.	Credit								.0														.0
10.	Other (f)								.0														.0
11.	Total Individual Life	1,398	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 (f)								.0														.0
19.	Total Group Life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	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 (f)								.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	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 (f)								.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	0
Accident and Health																							
34.	Comprehensive individual (d)								.0	XXX	XXX	XXX	XXX	XXX	.0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0
35.	Comprehensive group (d)								.0	XXX	XXX	XXX	XXX	XXX	.0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0
36.	Medicare Supplement (d)								.0	XXX	XXX	XXX	XXX	XXX	.0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0
37.	Vision only (d)								.0	XXX	XXX	XXX	XXX	XXX	.0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0
38.	Dental only (d)								.0	XXX	XXX	XXX	XXX	XXX	.0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0
39.	Federal Employees Health Benefits Plan (d)								.0	XXX	XXX	XXX	XXX	XXX	.0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0
40.	Title XVIII Medicare (e)								.0	XXX	XXX	XXX	XXX	XXX	.0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0
41.	Title XIX Medicaid (d)								.0	XXX	XXX	XXX	XXX	XXX	.0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0
42.	Credit A&H								.0	XXX	XXX	XXX	XXX	XXX	.0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0
43.	Disability income (d)								.0	XXX	XXX	XXX	XXX	XXX	.0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0
44.	Long-term care (d)								.0	XXX	XXX	XXX	XXX	XXX	.0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0
45.	Other health (d)								.0	XXX	XXX	XXX	XXX	XXX	.0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0
46.	Total Accident and Health	0	0	0	0	0	0	0	0	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
47.	Total	1,398 (c)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (Continued) ^(b)

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit						
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year ^(b)		
		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	.0	.0	.0	.0	.0	.0	
2. Whole								.0	.0	.0	.0	.0	.0	.0	.1	50,000	
3. Term								.0	.0	.0	.0	.0	.2	1,650,000	.3	1,700,000	
4. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
5. Universal								.0	.0	.0	.0	.0	.0	.467	.4	210,019	
6. Universal with secondary guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
7. Variable								.0	.0	.0	.0	.0	.0	.0	.0	.0	
8. Variable universal								.0	.0	.0	.0	.0	.0	.0	.0	.0	
9. Credit								.0	.0	.0	.0	.0	.0	.0	.0	.0	
10. Other	(f)							.0	.0	.0	.0	.0	.0	.0	.0	.0	
11. Total Individual Life	0	0	0	0	0	0	0	0	0	0	0	0	2	1,650,467	8	1,960,019	
Group Life																	
12. Whole								.0	.0	.0					.0	.0	
13. Term								.0	.0	.0					.0	.0	
14. Universal								.0	.0	.0					.0	.0	
15. Variable								.0	.0	.0					.0	.0	
16. Variable universal								.0	.0	.0					.0	.0	
17. Credit								.0	.0	.0					.0	.0 (a)	
18. Other	(f)							.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																	
20. Fixed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
21. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
22. Variable with guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
23. Variable without guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
24. Life contingent payout								.0	.0	.0	.0	.0	.0	.0	.0	.0	
25. Other	(f)							.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																	
27. Fixed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
28. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
29. Variable with guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
30. Variable without guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
31. Life contingent payout								.0	.0	.0	.0	.0	.0	.0	.0	.0	
32. Other	(f)							.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																	
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
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	2	1,650,467	8	1,960,019	

(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 Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (b)

NAIC Group Code 00588		DIRECT BUSINESS IN THE STATE OF Utah						DURING THE YEAR 2024		NAIC Company Code 71218		
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	5,801						0					0
3. Term	15,528						0					0
4. Indexed							0					0
5. Universal	3,253						0			17,382		17,382
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other (f)							0					0
11. Total Individual Life	24,582	0	0	0	0	0	0	0	0	17,382	0	17,382
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 (f)							0					0
19. Total Group Life	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 (f)							0					0
26. Total Individual Annuities	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 (f)							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	24,582 (c)	0	0	0	0	0	0	0	0	17,382	0	17,382

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (Continued) ^(b)

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit					
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year ^(b)	
		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	0	0	0	0	0
2. Whole									0	0	0	0	0	(1)	(30,000)	3
3. Term									0	0	0	0	0	(7)	(1,475,000)	21
4. Indexed									0	0	0	0	0	0	0	0
5. Universal									0	0	0	0	0	1	350,029	3
6. Universal with secondary guarantees									0	0	0	0	0	0	0	0
7. Variable									0	0	0	0	0	0	0	0
8. Variable universal									0	0	0	0	0	0	0	0
9. Credit									0	0	0	0	0	0	0	0
10. Other	(f)								0	0	0	0	0	0	0	0
11. Total Individual Life		0	0	0	0	0	0	0	0	0	0	0	0	(7)	(1,154,971)	27
Group Life																
12. Whole									0	0	0					0
13. Term									0	0	0					0
14. Universal									0	0	0					0
15. Variable									0	0	0					0
16. Variable universal									0	0	0					0
17. Credit									0	0	0					0
18. Other	(f)								0	0	0					0
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities																
20. Fixed									0	0	0	0	0	0	0	0
21. Indexed									0	0	0	0	0	0	0	0
22. Variable with guarantees									0	0	0	0	0	0	0	0
23. Variable without guarantees									0	0	0	0	0	0	0	0
24. Life contingent payout									0	0	0	0	0	0	0	0
25. Other	(f)								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
Group Annuities																
27. Fixed									0	0	0	0	0	0	0	0
28. Indexed									0	0	0	0	0	0	0	0
29. Variable with guarantees									0	0	0	0	0	0	0	0
30. Variable without guarantees									0	0	0	0	0	0	0	0
31. Life contingent payout									0	0	0	0	0	0	0	0
32. Other	(f)								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
Accident and Health																
34. Comprehensive individual	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
35. Comprehensive group	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
36. Medicare Supplement	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
37. Vision only	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
38. Dental only	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
39. Federal Employees Health Benefits Plan	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
40. Title XVIII Medicare	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
41. Title XIX Medicaid	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
42. Credit A&H		xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
43. Disability income	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
44. Long-term care	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
45. Other health	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
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	(7)	(1,154,971)	27	7,062,612

(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 Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) ^(b)

NAIC Group Code	00588
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DIRECT BUSINESS IN THE STATE OF Vermont

DURING THE YEAR 2024

NAIC Company Code 71218

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	2,630							.0				.0
3. Term	628							.0				.0
4. Indexed								.0				.0
5. Universal	5,505							.0				.0
6. Universal with secondary guarantees								.0				.0
7. Variable								.0				.0
8. Variable universal								.0				.0
9. Credit								.0				.0
10. Other (f)								.0				.0
11. Total Individual Life	8,763	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 (f)								.0				.0
19. Total Group Life	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 (f)								.0				.0
26. Total Individual Annuities	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 (f)								.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

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (Continued) ^(b)

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit					
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year ^(b)	
		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	0	0	0	0	0
2. Whole									0	0	0	0	0	0	2	60,000
3. Term									0	0	0	0	0	0	1	500,000
4. Indexed									0	0	0	0	0	0	0	0
5. Universal									0	0	0	0	0	0	8	540,475
6. Universal with secondary guarantees									0	0	0	0	0	0	0	0
7. Variable									0	0	0	0	0	0	0	0
8. Variable universal									0	0	0	0	0	0	0	0
9. Credit									0	0	0	0	0	0	0	0
10. Other	(f)								0	0	0	0	0	0	0	0
11. Total Individual Life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	11	1,100,475
Group Life																
12. Whole									0	0	0				0	0
13. Term									0	0	0				0	0
14. Universal									0	0	0				0	0
15. Variable									0	0	0				0	0
16. Variable universal									0	0	0				0	0
17. Credit									0	0	0				0	(a)
18. Other	(f)								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																
20. Fixed									0	0	0	0	0	0	0	0
21. Indexed									0	0	0	0	0	0	0	0
22. Variable with guarantees									0	0	0	0	0	0	0	0
23. Variable without guarantees									0	0	0	0	0	0	0	0
24. Life contingent payout									0	0	0	0	0	0	0	0
25. Other	(f)								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																
27. Fixed									0	0	0	0	0	0	0	0
28. Indexed									0	0	0	0	0	0	0	0
29. Variable with guarantees									0	0	0	0	0	0	0	0
30. Variable without guarantees									0	0	0	0	0	0	0	0
31. Life contingent payout									0	0	0	0	0	0	0	0
32. Other	(f)								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																
34. Comprehensive individual	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
35. Comprehensive group	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
36. Medicare Supplement	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
37. Vision only	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
38. Dental only	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
39. Federal Employees Health Benefits Plan	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
40. Title XVIII Medicare	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
41. Title XIX Medicaid	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
42. Credit A&H		xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
43. Disability income	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
44. Long-term care	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
45. Other health	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	11	1,100,475

(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 Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (b)

NAIC Group Code		DIRECT BUSINESS IN THE STATE OF Virginia						DURING THE YEAR 2024		NAIC Company Code 71218			
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		346,944							185,361		25,996	1,193	212,550
3. Term		403,127						0					0
4. Indexed								0					0
5. Universal		46,912						0	25,000		16,853	62	41,915
6. Universal with secondary guarantees		28,615						0			13,509		13,509
7. Variable								0					0
8. Variable universal								0					0
9. Credit								0					0
10. Other		(f)						0					0
11. Total Individual Life		825,598	0	0	0	0	0	0	210,361	0	56,358	1,255	267,974
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		(f)						0					0
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities													
20. Fixed		7,200						0	1,859				1,859
21. Indexed								0					0
22. Variable with guarantees								0					0
23. Variable without guarantees								0					0
24. Life contingent payout								0					0
25. Other		(f)						0					0
26. Total Individual Annuities		7,200	0	0	0	0	0	0	1,859	0	0	0	1,859
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		(f)						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		(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)	395					0	XXX	XXX	XXX	0	0
44. Long-term care		(d)						0	XXX	XXX	XXX		0
45. Other health		(d)	0					0	XXX	XXX	XXX	0	0
46. Total Accident and Health			395	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total		833,193 (c)	0	0	0	0	0	0	212,220	0	56,358	1,255	269,833

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (Continued) ^(b)

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit						
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year ^(b)		
		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	.0	.0	.0	.0	.0	.0	
2. Whole	175,140	11	185,140					11	185,140	.0	.0	.0	(24)	(673,240)	453	13,388,675	
3. Term	50,221	2	50,221					2	50,221	.0	.0	.0	(22)	(6,197,501)	579	179,003,089	
4. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
5. Universal								.0	.0	.0	.0	.0	.0	(4)	(359,592)	58	5,577,030
6. Universal with secondary guarantees								.0	.0	.0	.0	.0	.0	(4)	(1,400,000)	12	1,400,000
7. Variable								.0	.0	.0	.0	.0	.0	.0	.0	.0	
8. Variable universal								.0	.0	.0	.0	.0	.0	.0	.0	.0	
9. Credit								.0	.0	.0	.0	.0	.0	.0	.0	.0	
10. Other	(f)							.0	.0	.0	.0	.0	.0	.0	.0	.0	
11. Total Individual Life	225,361	13	235,361	0	0	0	0	13	235,361	0	0	0	(54)	(8,630,333)	1,102	199,368,794	
Group Life																	
12. Whole								.0	.0	.0					.0	.0	
13. Term								.0	.0	.0					.0	.0	
14. Universal								.0	.0	.0					.0	.0	
15. Variable								.0	.0	.0					.0	.0	
16. Variable universal								.0	.0	.0					.0	.0	
17. Credit								.0	.0	.0					.0	.0 (a)	
18. Other	(f)							.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																	
20. Fixed	1,859	1	1,859					1	1,859	.0	.0	.0	.0	6,359	.3	98,808	
21. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
22. Variable with guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
23. Variable without guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
24. Life contingent payout								.0	.0	.0	.0	.0	.0	.0	.0	.0	
25. Other	(f)							.0	.0	.0	.2	6,136	.0	.0	.2	6,136	
26. Total Individual Annuities	1,859	1	1,859	0	0	0	0	1	1,859	0	2	6,136	0	6,359	5	104,943	
Group Annuities																	
27. Fixed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
28. Indexed								.0	.0	.0	.0	.0	.0	.0	.0	.0	
29. Variable with guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
30. Variable without guarantees								.0	.0	.0	.0	.0	.0	.0	.0	.0	
31. Life contingent payout								.0	.0	.0	.0	.0	.0	.0	.0	.0	
32. Other	(f)							.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																	
34. Comprehensive individual	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
35. Comprehensive group	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
36. Medicare Supplement	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
37. Vision only	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
38. Dental only	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
39. Federal Employees Health Benefits Plan	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
40. Title XVIII Medicare	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
41. Title XIX Medicaid	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
42. Credit A&H	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
43. Disability income	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			.0	1	.1	380	
44. Long-term care	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0	
45. Other health	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			.0	.0	.0	.0	
46. Total Accident and Health	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		0	0	1	1	380	
47. Total	227,220	14	237,220	0	0	0	0	14	237,220	0	2	6,136	(54)	(8,623,973)	1,108	199,474,117	

(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 Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (b)

NAIC Group Code		DIRECT BUSINESS IN THE STATE OF Washington						DURING THE YEAR 2024				NAIC Company Code 71218	
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					
2. Whole3,598								.0					0
3. Term27,661								.0			11,584		11,584
4. Indexed								.0					0
5. Universal2,967								.0					0
6. Universal with secondary guarantees								.0					0
7. Variable								.0					0
8. Variable universal								.0					0
9. Credit								.0					0
10. Other(f)								.0					0
11. Total Individual Life		34,226	0	0	0	0	0	0	0	0	11,584	0	11,584
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(f)								.0					0
19. Total Group Life		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(f)								.0					0
26. Total Individual Annuities		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(f)								.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(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		34,226 (c)	0	0	0	0	0	0	0	0	11,584	0	11,584

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (Continued) ^(b)

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit					
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year ^(b)	
		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	0	0	0	0	0
2. Whole									0	0	0	0	0	0	3	285,000
3. Term									0	0	0	0	4	750,000	42	16,960,000
4. Indexed									0	0	0	0	0	0	0	0
5. Universal									0	0	0	0	0	0	6	450,000
6. Universal with secondary guarantees									0	0	0	0	0	0	0	0
7. Variable									0	0	0	0	0	0	0	0
8. Variable universal									0	0	0	0	0	0	0	0
9. Credit									0	0	0	0	0	0	0	0
10. Other	(f)								0	0	0	0	0	0	0	0
11. Total Individual Life	0	0	0	0	0	0	0	0	0	0	0	0	4	990,000	51	17,695,000
Group Life																
12. Whole									0	0	0				0	0
13. Term									0	0	0				0	0
14. Universal									0	0	0				0	0
15. Variable									0	0	0				0	0
16. Variable universal									0	0	0				0	0
17. Credit									0	0	0				0	(a)
18. Other	(f)								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																
20. Fixed									0	0	0	0	0	0	0	0
21. Indexed									0	0	0	0	0	0	0	0
22. Variable with guarantees									0	0	0	0	0	0	0	0
23. Variable without guarantees									0	0	0	0	0	0	0	0
24. Life contingent payout									0	0	0	0	0	0	0	0
25. Other	(f)								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																
27. Fixed									0	0	0	0	0	0	0	0
28. Indexed									0	0	0	0	0	0	0	0
29. Variable with guarantees									0	0	0	0	0	0	0	0
30. Variable without guarantees									0	0	0	0	0	0	0	0
31. Life contingent payout									0	0	0	0	0	0	0	0
32. Other	(f)								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																
34. Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
35. Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
36. Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
37. Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
38. Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
39. Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
40. Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
41. Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
43. Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
44. Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
45. Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					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	0	0	0	0	0	0	0	0	0	0	0	0	4	990,000	51	17,695,000

(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 Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (b)

NAIC Group Code		00588		DIRECT BUSINESS IN THE STATE OF West Virginia				DURING THE YEAR 2024				NAIC Company Code 71218			
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		25,375		426				426	5,000		4,668	15		9,682	
3. Term		46,049						.0						.0	
4. Indexed								.0						.0	
5. Universal		20,016						.0						.0	
6. Universal with secondary guarantees		3,605						.0						.0	
7. Variable								.0						.0	
8. Variable universal								.0						.0	
9. Credit								.0						.0	
10. Other		(f)						.0						.0	
11. Total Individual Life		95,045	0	426	0	0	0	426	5,000	0	4,668	15		9,682	
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		(f)						.0						.0	
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0		0	
Individual Annuities															
20. Fixed		5,839						.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		(f)						.0						.0	
26. Total Individual Annuities		5,839	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		(f)						.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		(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)	157					.0	.xxx	.xxx	.xxx	0		.0	
44. Long-term care		(d)						.0	.xxx	.xxx	.xxx			.0	
45. Other health		(d)	0					.0	.xxx	.xxx	.xxx	0		.0	
46. Total Accident and Health		157	0	0	0	0	0	0	.xxx	.xxx	.xxx	0		0	
47. Total		101,041 (c)	0	426	0	0	0	426	5,000	0	4,668	15		9,682	

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (Continued) ^(b)

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit						
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year ^(b)		
		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	0	0	0	0	0	
2. Whole									0	0	0	0	0	(2)	(4,468)	45	1,410,413
3. Term									0	0	0	0	0	(8)	(1,106,000)	76	16,888,998
4. Indexed									0	0	0	0	0	0	0	0	0
5. Universal									0	0	0	0	0	(1)	(68,483)	17	1,677,668
6. Universal with secondary guarantees									0	0	0	0	0	1	75,000	4	575,000
7. Variable									0	0	0	0	0	0	0	0	0
8. Variable universal									0	0	0	0	0	0	0	0	0
9. Credit									0	0	0	0	0	0	0	0	0
10. Other	(f)								0	0	0	0	0	0	0	0	0
11. Total Individual Life	0	0	0	0	0	0	0	0	0	0	0	0	0	(10)	(1,103,951)	142	20,552,079
Group Life																	
12. Whole									0	0	0					0	0
13. Term									0	0	0					0	0
14. Universal									0	0	0					0	0
15. Variable									0	0	0					0	0
16. Variable universal									0	0	0					0	0
17. Credit									0	0	0					0	(a)
18. Other	(f)								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	0
Individual Annuities																	
20. Fixed									0	0	0	0	0	0	11,204	6	148,542
21. Indexed									0	0	0	0	0	0	0	0	0
22. Variable with guarantees									0	0	0	0	0	0	0	0	0
23. Variable without guarantees									0	0	0	0	0	0	0	0	0
24. Life contingent payout									0	0	0	0	0	0	0	0	0
25. Other	(f)								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	11,204	6	148,542
Group Annuities																	
27. Fixed									0	0	0	0	0	0	0	0	0
28. Indexed									0	0	0	0	0	0	0	0	0
29. Variable with guarantees									0	0	0	0	0	0	0	0	0
30. Variable without guarantees									0	0	0	0	0	0	0	0	0
31. Life contingent payout									0	0	0	0	0	0	0	0	0
32. Other	(f)								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	0
Accident and Health																	
34. Comprehensive individual	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx						0	0
35. Comprehensive group	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx						0	0
36. Medicare Supplement	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx						0	0
37. Vision only	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx						0	0
38. Dental only	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx						0	0
39. Federal Employees Health Benefits Plan	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx						0	0
40. Title XVIII Medicare	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx						0	0
41. Title XIX Medicaid	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx						0	0
42. Credit A&H		xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx						0	0
43. Disability income	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx			0	0		1	154
44. Long-term care	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx						0	0
45. Other health	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx				0	0	0	0
46. Total Accident and Health	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	0	0		0	0	1	154
47. Total	0	0	0	0	0	0	0	0	0	0	0	0	0	(10)	(1,092,747)	149	20,700,775

(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 Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (b)

NAIC Group Code		DIRECT BUSINESS IN THE STATE OF Wisconsin						DURING THE YEAR 2024		NAIC Company Code 71218			
		1	2	Dividends to Policyholders/Refunds to Members				Claims and Benefits Paid					
				3	4	5	6	7	8	9	10	11	12
Line of Business		Premiums and Annuities Considerations	Other Considerations	Paid in Cash or Left on Deposit	Applied to Pay Renewal Premiums	Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	Other	Total (Col. 3+4+5+6)	Death and Annuity Benefits	Matured Endowments	Surrender Values and Withdrawals for Life Contracts	All Other Benefits	Total (Sum Columns 8 through 11)
Individual Life													
1. Industrial								.0					.0
2. Whole		128,565							10,810		9,795	49	20,654
3. Term		743,429						.0	500,000			805	500,805
4. Indexed								.0					.0
5. Universal		142,022						.0			50,026		50,026
6. Universal with secondary guarantees		19,063						.0					.0
7. Variable								.0					.0
8. Variable universal								.0					.0
9. Credit								.0					.0
10. Other (f)								.0					.0
11. Total Individual Life		1,033,079	0	0	0	0	0	0	510,810	0	59,822	854	571,485
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 (f)								.0					.0
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities													
20. Fixed								.0	124,935				124,935
21. Indexed								.0					.0
22. Variable with guarantees								.0					.0
23. Variable without guarantees								.0					.0
24. Life contingent payout								.0					.0
25. Other (f)								.0					.0
26. Total Individual Annuities		0	0	0	0	0	0	0	124,935	0	0	0	124,935
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 (f)								.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		1,033,079 (c)	0	0	0	0	0	0	635,745	0	59,822	854	696,420

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (Continued) ^(b)

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit						
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year ^(b)		
		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	0	0	0	0	0	
2. Whole	10,000	2	10,000						2	10,000	0	0	0	(10)	(184,152)	235	8,173,657
3. Term	750,000	2	1,000,000						2	1,000,000	250,000	0	0	(98)	(28,285,296)	1,230	366,630,299
4. Indexed									0	0	0	0	0	0	0	0	0
5. Universal									0	0	0	0	0	(14)	(1,750,684)	196	23,934,571
6. Universal with secondary guarantees									0	0	0	0	0	0	0	16	1,850,000
7. Variable									0	0	0	0	0	0	0	0	0
8. Variable universal									0	0	0	0	0	0	0	0	0
9. Credit									0	0	0	0	0	0	0	0	0
10. Other	(f)								0	0	0	0	0	0	0	0	0
11. Total Individual Life	760,000	4	1,010,000	0	0	0	0	0	4	1,010,000	250,000	0	0	(122)	(30,220,132)	1,677	400,588,527
Group Life																	
12. Whole									0	0	0					0	0
13. Term									0	0	0					0	0
14. Universal									0	0	0					0	0
15. Variable									0	0	0					0	0
16. Variable universal									0	0	0					0	0
17. Credit									0	0	0					0	(a)
18. Other	(f)								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	0
Individual Annuities																	
20. Fixed	124,935	8	124,935						8	124,935	0	0	0	(7)	(121,541)	4	85,135
21. Indexed									0	0	0	0	0	0	0	0	0
22. Variable with guarantees									0	0	0	0	0	0	0	0	0
23. Variable without guarantees									0	0	0	0	0	0	0	0	0
24. Life contingent payout									0	0	0	0	0	0	0	0	0
25. Other	(f)								0	0	0	0	0	0	0	0	0
26. Total Individual Annuities	124,935	8	124,935	0	0	0	0	0	8	124,935	0	0	0	(7)	(121,541)	4	85,135
Group Annuities																	
27. Fixed									0	0	0	0	0	0	0	0	0
28. Indexed									0	0	0	0	0	0	0	0	0
29. Variable with guarantees									0	0	0	0	0	0	0	0	0
30. Variable without guarantees									0	0	0	0	0	0	0	0	0
31. Life contingent payout									0	0	0	0	0	0	0	0	0
32. Other	(f)								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	0
Accident and Health																	
34. Comprehensive individual	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
35. Comprehensive group	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
36. Medicare Supplement	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
37. Vision only	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
38. Dental only	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
39. Federal Employees Health Benefits Plan	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
40. Title XVIII Medicare	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
41. Title XIX Medicaid	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
42. Credit A&H	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
43. Disability income	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
44. Long-term care	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
45. Other health	(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					0	0
46. Total Accident and Health	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	884,935	12	1,134,935	0	0	0	0	0	12	1,134,935	250,000	0	0	(129)	(30,341,673)	1,681	400,673,662

(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 Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) ^(b)

NAIC Group Code	00588
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DIRECT BUSINESS IN THE STATE OF Wyoming

DURING THE YEAR 2024

NAIC Company Code 71218

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		383						.0					.0
3. Term		1,120						.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 (f)								.0					.0
11. Total Individual Life		1,503	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 (f)								.0					.0
19. Total Group Life		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 (f)								.0					.0
26. Total Individual Annuities		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 (f)								.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 (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		1,503 (c)	0	0	0	0	0	0	0	0	0	0	0

24.WY

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (Continued) ^(b)

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit					
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year ^(b)	
		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	0	0	0	0	0
2. Whole									0	0	0	0	0	0	1	25,000
3. Term									0	0	0	0	(1)	(250,000)	3	800,000
4. Indexed									0	0	0	0	0	0	0	0
5. Universal									0	0	0	0	0	0	2	100,000
6. Universal with secondary guarantees									0	0	0	0	0	0	0	0
7. Variable									0	0	0	0	0	0	0	0
8. Variable universal									0	0	0	0	0	0	0	0
9. Credit									0	0	0	0	0	0	0	0
10. Other	(f)								0	0	0	0	0	0	0	0
11. Total Individual Life	0	0	0	0	0	0	0	0	0	0	0	0	(1)	(250,000)	6	925,000
Group Life																
12. Whole									0	0	0				0	0
13. Term									0	0	0				0	0
14. Universal									0	0	0				0	0
15. Variable									0	0	0				0	0
16. Variable universal									0	0	0				0	0
17. Credit									0	0	0				0	(a)
18. Other	(f)								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																
20. Fixed									0	0	0	0	0	0	0	0
21. Indexed									0	0	0	0	0	0	0	0
22. Variable with guarantees									0	0	0	0	0	0	0	0
23. Variable without guarantees									0	0	0	0	0	0	0	0
24. Life contingent payout									0	0	0	0	0	0	0	0
25. Other	(f)								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																
27. Fixed									0	0	0	0	0	0	0	0
28. Indexed									0	0	0	0	0	0	0	0
29. Variable with guarantees									0	0	0	0	0	0	0	0
30. Variable without guarantees									0	0	0	0	0	0	0	0
31. Life contingent payout									0	0	0	0	0	0	0	0
32. Other	(f)								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																
34. Comprehensive individual	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
35. Comprehensive group	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
36. Medicare Supplement	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
37. Vision only	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
38. Dental only	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
39. Federal Employees Health Benefits Plan	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
40. Title XVIII Medicare	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
41. Title XIX Medicaid	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
42. Credit A&H		xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
43. Disability income	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
44. Long-term care	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					0	0
45. Other health	(d)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx					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	0	0	0	0	0	0	0	0	0	0	0	0	(1)	(250,000)	6	925,000

(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 Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) ^(b)

NAIC Group Code	00588
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DIRECT BUSINESS IN THE STATE OF Grand Aliens

DURING THE YEAR 2024

NAIC Company Code 71218

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	0	0	0	0	0	0	0	0	0	0
2. Whole		912	0	0	0	0	0	0	0	0	0	0	0
3. Term		5,231	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		4,477	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	(f)	0	0	0	0	0	0	0	0	0	0	0	0
11. Total Individual Life		10,620	0	0	0	0	0	0	0	0	0	0	0
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	(f)	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		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
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	(f)	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
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	(f)	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	XXX	XXX	XXX	0	0	0
35. Comprehensive group	(d)	0	0	0	0	0	0	XXX	XXX	XXX	0	0	0
36. Medicare Supplement	(d)	0	0	0	0	0	0	XXX	XXX	XXX	0	0	0
37. Vision only	(d)	0	0	0	0	0	0	XXX	XXX	XXX	0	0	0
38. Dental only	(d)	0	0	0	0	0	0	XXX	XXX	XXX	0	0	0
39. Federal Employees Health Benefits Plan	(d)	0	0	0	0	0	0	XXX	XXX	XXX	0	0	0
40. Title XVIII Medicare	(d) (e)	0	0	0	0	0	0	XXX	XXX	XXX	0	0	0
41. Title XIX Medicaid	(d)	0	0	0	0	0	0	XXX	XXX	XXX	0	0	0
42. Credit A&H		0	0	0	0	0	0	XXX	XXX	XXX	0	0	0
43. Disability income	(d)	0	0	0	0	0	0	XXX	XXX	XXX	0	0	0
44. Long-term care	(d)	0	0	0	0	0	0	XXX	XXX	XXX	0	0	0
45. Other health	(d)	0	0	0	0	0	0	XXX	XXX	XXX	0	0	0
46. Total Accident and Health		0	0	0	0	0	0	XXX	XXX	XXX	0	0	0
47. Total		10,620 (c)	0	0	0	0	0	0	0	0	0	0	0

24.OT

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (Continued) ^(b)

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit						
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year ^(b)		
		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	0	0	0	0	0	0	0	0	0	0	0	0	0	
2. Whole	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
3. Term	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	400,000	
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	4	200,000	
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	(f) 0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
11. Total Individual Life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	5	600,000	
Group Life																	
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 (a)	
18. Other	(f) 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																	
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	(f) 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																	
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	(f) 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																	
34. Comprehensive individual	(d) XXX	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	XXX	0	0	0	0	0	0	
36. Medicare Supplement	(d) XXX	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	XXX	0	0	0	0	0	0	
38. Dental only	(d) XXX	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	XXX	0	0	0	0	0	0	
40. Title XVIII Medicare	(d) XXX	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	XXX	0	0	0	0	0	0	
42. Credit A&H	XXX	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	XXX	0	0	0	0	0	0	
44. Long-term care	(d) XXX	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	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	5	600,000	

(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 products 0 and number of persons insured under indemnity only products 0 .
(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 0 .



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) ^(b)

NAIC Group Code 00588		DIRECT BUSINESS IN THE STATE OF Consolidated						DURING THE YEAR 2024				NAIC Company Code 71218	
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	0	0	0	0	0	0	0	0	0	0	
2. Whole	15,430,274	0	54,956	0	0	0	54,956	9,801,566	0	1,586,725	53,029	11,441,319	
3. Term	44,207,158	0	0	0	0	0	0	42,140,094	0	412,596	171,358	42,724,048	
4. Indexed	0	0	0	0	0	0	0	0	0	0	0	0	
5. Universal	10,811,380	0	0	0	0	0	0	11,239,515	0	6,060,557	145,790	17,445,862	
6. Universal with secondary guarantees	3,124,888	0	0	0	0	0	0	730,000	0	45,352	5,749	781,101	
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 (f)	0	0	0	0	0	0	0	0	0	0	0	0	
11. Total Individual Life	73,573,700	0	54,956	0	0	0	54,956	63,911,174	0	8,105,230	375,926	72,392,330	
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 (f)	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	318,543	0	0	0	0	0	0	4,637,297	0	0	0	4,637,297	
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	2,292	0	0	0	2,292	
25. Other (f)	0	0	0	0	0	0	0	0	0	0	0	0	
26. Total Individual Annuities	318,543	0	0	0	0	0	0	4,639,589	0	0	0	4,639,589	
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 (f)	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) (e)	0	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)	60,446	0	0	0	0	0	0	XXX	XXX	XXX	75,484	75,484	
44. Long-term care (d)	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	
45. Other health (d)	17,571	0	0	0	0	0	0	XXX	XXX	XXX	200,000	200,000	
46. Total Accident and Health	78,017	0	0	0	0	0	0	XXX	XXX	XXX	275,484	275,484	
47. Total	73,970,260 (c)	0	54,956	0	0	0	54,956	68,550,764	0	8,105,230	651,410	77,307,404	

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

LIFE INSURANCE (STATE PAGE) (Continued) ^(b)

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit					
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year ^(b)	
		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	0	0	0	0	0	0	0	0	0	0	0	0	0
2. Whole	10,124,890	567	9,611,852	0	0	0	0	567	9,611,852	1,440,953	0	0	(1,077)	(28,109,207)	25,563	684,850,853
3. Term	40,389,231	311	41,574,508	0	0	0	0	311	41,574,508	3,454,773	0	125,000	(4,889)	(1,057,817,267)	62,589	16,268,487,109
4. Indexed	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5. Universal	12,855,173	161	12,303,908	0	0	0	0	161	12,303,908	1,758,709	0	147,675	(684)	(67,511,548)	13,494	1,302,711,225
6. Universal with secondary guarantees	0	0	0	0	0	0	0	0	0	0	0	0	(13)	(2,295,435)	1,314	281,565,409
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	(f) 0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
11. Total Individual Life	63,369,294	1,039	63,490,268	0	0	0	0	1,039	63,490,268	6,654,435	0	272,675	(6,663)	(1,155,733,457)	102,960	18,537,614,596
Group Life																
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	(f) 0	0	0	0	0	0	0	0	0	0	0	0	0	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	4,696,097	245	4,639,155	0	0	0	0	245	4,639,155	198,896	0	0	(83)	(3,297,378)	738	31,816,727
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	434	1	434	0	0	0	0	1	434	0	0	0	0	0	15	0
25. Other	(f) 0	0	0	0	0	0	0	0	0	0	3	11,174	(8)	(2,051,812)	24	235,186
26. Total Individual Annuities	4,696,532	246	4,639,589	0	0	0	0	246	4,639,589	198,896	3	11,174	(91)	(5,349,190)	777	32,051,913
Group Annuities																
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	(f) 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																
34. Comprehensive individual	(d) XXX	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	XXX	0	0	0	0	0	0
36. Medicare Supplement	(d) XXX	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	XXX	0	0	0	0	0	0
38. Dental only	(d) XXX	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	XXX	0	0	0	0	0	0
40. Title XVIII Medicare	(d) XXX	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	XXX	0	0	0	0	0	0
42. Credit A&H	XXX	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	XXX	0	0	(16)	(8,986)	118	56,952
44. Long-term care	(d) XXX	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	XXX	0	0	(7)	(1,750)	67	16,654
46. Total Accident and Health	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	(23)	(10,736)	185	73,606
47. Total	68,065,825	1,285	68,129,858	0	0	0	0	1,285	68,129,858	6,853,331	3	283,849	(6,777)	(1,161,093,383)	103,922	18,569,740,115

(a) Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ 0 , current year \$ 0 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$ 0 , current year \$ 0 .
(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: 0 2) covering number of lives: 0 3) face amount: \$ 0 .
(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ 0 Group: \$ 0 Total: \$ 0 .
(d) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0 .
(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 0 .

FORM FOR CALCULATING THE INTEREST MAINTENANCE RESERVE

Interest Maintenance Reserve

	1 Amount
1. Reserve as of December 31, prior year	(228,208)
2. Current year's realized pre-tax capital gains/(losses) of \$15,868 transferred into the reserve net of taxes of \$ 3,332	12,548
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)	(215,660)
5. Current year's amortization released to Summary of Operations (Amortization, Line 1, Column 4)	(160,963)
6. Reserve as of December 31, current year (Line 4 minus Line 5)	(54,696)

Amortization

	1 Reserve as of December 31, Prior Year	2 Current Year's Realized Capital Gains/(Losses) Transferred into the Reserve Net of Taxes	3 Adjustment for Current Year's Liability Gains/(Losses) Released From the Reserve	4 Balance Before Reduction for Current Year's Amortization (Cols. 1+2+3)
Year of Amortization				
1. 2024	(161,526)	563	0	(160,963)
2. 2025	(131,312)	1,139	0	(130,173)
3. 2026	(97,369)	1,240	0	(96,129)
4. 2027	(55,135)	1,410	0	(53,725)
5. 2028	(8,558)	1,596	0	(6,962)
6. 2029	10,149	1,758	0	11,907
7. 2030	9,122	1,697	0	10,819
8. 2031	12,251	1,352	0	13,603
9. 2032	20,884	980	0	21,864
10. 2033	26,280	607	0	26,887
11. 2034	26,530	207	0	26,737
12. 2035	25,782	0	0	25,782
13. 2036	20,790	0	0	20,790
14. 2037	11,221	0	0	11,221
15. 2038	3,882	0	0	3,882
16. 2039	2,780	0	0	2,780
17. 2040	4,269	0	0	4,269
18. 2041	6,869	0	0	6,869
19. 2042	9,257	0	0	9,257
20. 2043	11,219	0	0	11,219
21. 2044	10,185	0	0	10,185
22. 2045	7,383	0	0	7,383
23. 2046	4,511	0	0	4,511
24. 2047	1,553	0	0	1,553
25. 2048	190	0	0	190
26. 2049	407	0	0	407
27. 2050	159	0	0	159
28. 2051	19	0	0	19
29. 2052	0	0	0	0
30. 2053	0	0	0	0
31. 2054 and Later	0	0	0	0
32. Total (Lines 1 to 31)	(228,208)	12,548	0	(215,660)

ASSET VALUATION RESERVE

	Default Component			Equity Component			7 Total Amount (Cols. 3+6)
	1 Other Than Mortgage Loans	2 Mortgage Loans	3 Total (Cols. 1+2)	4 Common Stock	5 Real Estate and Other Invested Assets	6 Total (Cols. 4+5)	
1. Reserve as of December 31, prior year	2,437,311	12,689	2,450,000	.0	.0	.0	2,450,000
2. Realized capital gains/(losses) net of taxes-General Account			.0			.0	.0
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			.0	.0
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	574,853	7,110	581,963	0	0	0	581,963
8. Accumulated balances (Lines 1 through 5 - 6 + 7).....	3,012,165	19,798	3,031,963	.0	.0	.0	3,031,963
9. Maximum reserve	3,064,857	47,828	3,112,684	.0	.0	.0	3,112,684
10. Reserve objective.....	1,728,029	36,840	1,764,869	0	0	0	1,764,869
11. 20% of (Line 10 - Line 8)	(256,827)	3,408	(253,419)	0	0	0	(253,419)
12. Balance before transfers (Lines 8 + 11)	2,755,337	23,207	2,778,544	.0	.0	.0	2,778,544
13. Transfers			.0			.0	.0
14. Voluntary contribution	1,456		1,456			.0	1,456
15. Adjustment down to maximum/up to zero			0			0	0
16. Reserve as of December 31, current year (Lines 12 + 13 + 14 + 15)	2,756,793	23,207	2,780,000	0	0	0	2,780,000

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

Line Num- ber	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. 4x5)	Factor	Amount (Cols. 4x7)	Factor	Amount (Cols. 4x9)
		LONG-TERM BONDS										
1		Exempt Obligations	2,579,659	XXX	XXX	2,579,659	0.0000	0	0.0000	0	0.0000	0
2.1	1	NAIC Designation Category 1.A	52,375,910	XXX	XXX	52,375,910	0.0002	10,475	0.0007	36,663	0.0013	68,089
2.2	1	NAIC Designation Category 1.B	39,461,445	XXX	XXX	39,461,445	0.0004	15,785	0.0011	43,408	0.0023	90,761
2.3	1	NAIC Designation Category 1.C	16,677,735	XXX	XXX	16,677,735	0.0006	10,007	0.0018	30,020	0.0035	58,372
2.4	1	NAIC Designation Category 1.D	21,939,534	XXX	XXX	21,939,534	0.0007	15,358	0.0022	48,267	0.0044	96,534
2.5	1	NAIC Designation Category 1.E	21,140,711	XXX	XXX	21,140,711	0.0009	19,027	0.0027	57,080	0.0055	116,274
2.6	1	NAIC Designation Category 1.F	51,569,705	XXX	XXX	51,569,705	0.0011	56,727	0.0034	175,337	0.0068	350,674
2.7	1	NAIC Designation Category 1.G	49,628,135	XXX	XXX	49,628,135	0.0014	69,479	0.0042	208,438	0.0085	421,839
2.8		Subtotal NAIC 1 (2.1+2.2+2.3+2.4+2.5+2.6+2.7)	252,793,175	XXX	XXX	252,793,175		196,857		599,213		1,202,543
3.1	2	NAIC Designation Category 2.A	68,374,612	XXX	XXX	68,374,612	0.0021	143,587	0.0063	430,760	0.0105	717,933
3.2	2	NAIC Designation Category 2.B	64,393,827	XXX	XXX	64,393,827	0.0025	160,985	0.0076	489,393	0.0127	817,802
3.3	2	NAIC Designation Category 2.C	11,007,450	XXX	XXX	11,007,450	0.0036	39,627	0.0108	118,880	0.0180	198,134
3.4		Subtotal NAIC 2 (3.1+3.2+3.3)	143,775,890	XXX	XXX	143,775,890		344,198		1,039,034		1,733,869
4.1	3	NAIC Designation Category 3.A	3,465,289	XXX	XXX	3,465,289	0.0069	23,910	0.0183	63,415	0.0262	90,791
4.2	3	NAIC Designation Category 3.B	998,780	XXX	XXX	998,780	0.0099	9,888	0.0264	26,368	0.0377	37,654
4.3	3	NAIC Designation Category 3.C		XXX	XXX	0	0.0131	0	0.0350	0	0.0500	0
4.4		Subtotal NAIC 3 (4.1+4.2+4.3)	4,464,068	XXX	XXX	4,464,068		33,798		89,783		128,445
5.1	4	NAIC Designation Category 4.A		XXX	XXX	0	0.0184	0	0.0430	0	0.0615	0
5.2	4	NAIC Designation Category 4.B		XXX	XXX	0	0.0238	0	0.0555	0	0.0793	0
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)	0	XXX	XXX	0		0		0		0
6.1	5	NAIC Designation Category 5.A		XXX	XXX	0	0.0472	0	0.0846	0	0.1410	0
6.2	5	NAIC Designation Category 5.B		XXX	XXX	0	0.0663	0	0.1188	0	0.1980	0
6.3	5	NAIC Designation Category 5.C		XXX	XXX	0	0.0836	0	0.1498	0	0.2496	0
6.4		Subtotal NAIC 5 (6.1+6.2+6.3)	0	XXX	XXX	0		0		0		0
7	6	NAIC 6		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		XXX		XXX	
9		Total Long-Term Bonds (1+2.8+3.4+4.4+5.4+6.4+7+8)	403,612,792	XXX	XXX	403,612,792	XXX	574,853	XXX	1,728,029	XXX	3,064,857
		PREFERRED STOCKS										
10	1	Highest Quality		XXX	XXX	0	0.0005	0	0.0016	0	0.0033	0
11	2	High Quality		XXX	XXX	0	0.0021	0	0.0064	0	0.0106	0
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)	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0

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

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1+2+3)	Basic Contribution		Reserve Objective		Maximum Reserve	
							5	6	7	8	9	10
							Factor	Amount (Cols. 4x5)	Factor	Amount (Cols. 4x7)	Factor	Amount (Cols. 4x9)
18		SHORT-TERM BONDS 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		0		0		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		0		0		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		0		0		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		0		0		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		0		0		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)	403,612,792	XXX	XXX	403,612,792	XXX	574,853	XXX	1,728,029	XXX	3,064,857

ASSET VALUATION RESERVE (Continued)
BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS
DEFAULT 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. 4x5)	Factor	Amount (Cols. 4x7)	Factor	Amount (Cols. 4x9)
		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	6,463,185		XXX	6,463,185	0.0011	7,110	0.0057	36,840	0.0074	47,828
44		Commercial Mortgages - All Other - CM2 - High Quality			XXX	0	0.0040	0	0.0114	0	0.0149	0
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)	6,463,185	0	XXX	6,463,185	XXX	7,110	XXX	36,840	XXX	47,828
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)	6,463,185	0	XXX	6,463,185	XXX	7,110	XXX	36,840	XXX	47,828

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 (Col. 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		XXX	XXX	0	0.0000	0	0.1580 (a)	0	0.1580 (a)	0
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	0	0	0	XXX	0	XXX	0	XXX	0
6		Fixed Income Highest Quality	0	0	0	0	XXX	0	XXX	0	XXX	0
7		Fixed Income High Quality	0	0	0	0	XXX	0	XXX	0	XXX	0
8		Fixed Income Medium Quality	0	0	0	0	XXX	0	XXX	0	XXX	0
9		Fixed Income Low Quality	0	0	0	0	XXX	0	XXX	0	XXX	0
10		Fixed Income Lower Quality	0	0	0	0	XXX	0	XXX	0	XXX	0
11		Fixed Income In or Near Default	0	0	0	0	XXX	0	XXX	0	XXX	0
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 & 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)	0	0	0	0	XXX	0	XXX	0	XXX	0
REAL ESTATE												
18		Home Office Property (General Account only)				0	0.0000	0	0.0912	0	0.0912	0
19		Investment Properties				0	0.0000	0	0.0912	0	0.0912	0
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)	0	0	0	0	XXX	0	XXX	0	XXX	0
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		XXX	XXX	0	0.0005	0	0.0016	0	0.0033	0
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)	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0

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 (Col. 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	0.0000 (c)	0	0.0000 (c)	0	0.0000 (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

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 (Col. 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 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)	0	0	0	0	XXX	0	XXX	0	XXX	0

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

NONE

Schedule F - Claims

NONE

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT
PART 1 - ANALYSIS OF UNDERWRITING OPERATIONS

		Total		Comprehensive (Hospital and Medical) Individual		Comprehensive (Hospital and Medical) Group		Medicare Supplement		Vision Only		Dental Only		Federal Employees Health Benefits Plan	
		1 Amount	2 %	3 Amount	4 %	5 Amount	6 %	7 Amount	8 %	9 Amount	10 %	11 Amount	12 %	13 Amount	14 %
1.	Premiums written	.31,818	.XXX		.XXX		.XXX		.XXX		.XXX		.XXX		.XXX
2.	Premiums earned	.32,578	.XXX		.XXX		.XXX		.XXX		.XXX		.XXX		.XXX
3.	Incurred claims	.187,490	.575.5	.0	.0.0	.0	.0.0	.0	.0.0	.0	.0.0	.0	.0.0	.0	.0.0
4.	Cost containment expenses	.0	.0.0		.0.0		.0.0		.0.0		.0.0		.0.0		.0.0
5.	Incurred claims and cost containment expenses (Lines 3 and 4)	.187,490	.575.5	.0	.0.0	.0	.0.0	.0	.0.0	.0	.0.0	.0	.0.0	.0	.0.0
6.	Increase in contract reserves	.(33,136)	.(101.7)	.0	.0.0	.0	.0.0	.0	.0.0	.0	.0.0	.0	.0.0	.0	.0.0
7.	Commissions (a)	.(5,363)	.(16.5)		.0.0		.0.0		.0.0		.0.0		.0.0		.0.0
8.	Other general insurance expenses	.3,358	.10.3		.0.0		.0.0		.0.0		.0.0		.0.0		.0.0
9.	Taxes, licenses and fees	.1,044	.3.2		.0.0		.0.0		.0.0		.0.0		.0.0		.0.0
10.	Total other expenses incurred	.(961)	.(2.9)	.0	.0.0	.0	.0.0	.0	.0.0	.0	.0.0	.0	.0.0	.0	.0.0
11.	Aggregate write-ins for deductions	.0	.0.0		.0.0	.0	.0.0	.0	.0.0	.0	.0.0	.0	.0.0	.0	.0.0
12.	Gain from underwriting before dividends or refunds	.(120,815)	.(370.8)	.0	.0.0	.0	.0.0	.0	.0.0	.0	.0.0	.0	.0.0	.0	.0.0
13.	Dividends or refunds	.0	.0.0		.0.0		.0.0		.0.0		.0.0		.0.0		.0.0
14.	Gain from underwriting after dividends or refunds	.(120,815)	.(370.8)	.0	.0.0	.0	.0.0	.0	.0.0	.0	.0.0	.0	.0.0	.0	.0.0
DETAILS OF WRITE-INS															
1101.															
1102.															
1103.															
1198.	Summary of remaining write-ins for Line 11 from overflow page	.0	.0.0	.0	.0.0	.0	.0.0	.0	.0.0	.0	.0.0	.0	.0.0	.0	.0.0
1199.	Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)	.0	.0.0	.0	.0.0	.0	.0.0	.0	.0.0	.0	.0.0	.0	.0.0	.0	.0.0

		Medicare Title XVIII		Medicaid Title XIX		Credit A&H		Disability Income		Long-Term Care		Other Health	
		15 Amount	16 %	17 Amount	18 %	19 Amount	20 %	21 Amount	22 %	23 Amount	24 %	25 Amount	26 %
1.	Premiums written		.XXX		.XXX		.XXX	.14,229	.XXX		.XXX	.17,589	.XXX
2.	Premiums earned		.XXX		.XXX		.XXX	.14,989	.XXX		.XXX	.17,589	.XXX
3.	Incurred claims	.0	.0.0	.0	.0.0	.0	.0.0	.(12,591)	.(84.0)	.0	.0.0	.200,081	.1,137.5
4.	Cost containment expenses		.0.0		.0.0		.0.0	.0	.0.0		.0.0	.0	.0.0
5.	Incurred claims and cost containment expenses (Lines 3 and 4)	.0	.0.0	.0	.0.0	.0	.0.0	.(12,591)	.(84.0)	.0	.0.0	.200,081	.1,137.5
6.	Increase in contract reserves	.0	.0.0	.0	.0.0	.0	.0.0	.(32,932)	.(219.7)	.0	.0.0	.(204)	.(1.2)
7.	Commissions (a)		.0.0		.0.0		.0.0	.(5,363)	.(35.8)		.0.0	.0	.0.0
8.	Other general insurance expenses		.0.0		.0.0		.0.0	.3,326	.22.2		.0.0	.32	.0.2
9.	Taxes, licenses and fees		.0.0		.0.0		.0.0	.1,034	.6.9		.0.0	.10	.0.1
10.	Total other expenses incurred	.0	.0.0	.0	.0.0	.0	.0.0	.(1,003)	.(6.7)	.0	.0.0	.42	.0.2
11.	Aggregate write-ins for deductions	.0	.0.0	.0	.0.0	.0	.0.0	.0	.0.0	.0	.0.0	.0	.0.0
12.	Gain from underwriting before dividends or refunds	.0	.0.0	.0	.0.0	.0	.0.0	.61,515	.410.4	.0	.0.0	.(182,330)	.(1,036.6)
13.	Dividends or refunds		.0.0		.0.0		.0.0	.0	.0.0		.0.0	.0	.0.0
14.	Gain from underwriting after dividends or refunds	.0	.0.0	.0	.0.0	.0	.0.0	.61,515	.410.4	.0	.0.0	.(182,330)	.(1,036.6)
DETAILS OF WRITE-INS													
1101.													
1102.													
1103.													
1198.	Summary of remaining write-ins for Line 11 from overflow page	.0	.0.0	.0	.0.0	.0	.0.0	.0	.0.0	.0	.0.0	.0	.0.0
1199.	Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)	.0	.0.0	.0	.0.0	.0	.0.0	.0	.0.0	.0	.0.0	.0	.0.0

(a) Includes \$reported as "Contract, membership and other fees retained by agents."

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT (Continued)

PART 2 - RESERVES AND LIABILITIES													
	1	2	3	4	5	6	7	8	9	10	11	12	13
	Total	Comprehensive (Hospital and Medical) Individual	Comprehensive (Hospital and Medical) Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Medicare Title XVIII	Medicaid Title XIX	Credit A&H	Disability Income	Long-Term Care	Other Health
A. Premium Reserves:													
1. Unearned premiums	6,350										6,350	0	0
2. Advance premiums	0										0	0	0
3. Reserve for rate credits	0										0	0	0
4. Total premium reserves, current year	6,350	0	0	0	0	0	0	0	0	0	6,350	0	0
5. Total premium reserves, prior year	7,111	0	0	0	0	0	0	0	0	0	7,111	0	0
6. Increase in total premium reserves	(761)	0	0	0	0	0	0	0	0	0	(761)	0	0
B. Contract Reserves:													
1. Additional reserves (a)	227,040										226,140	0	900
2. Reserve for future contingent benefits	0										0	0	0
3. Total contract reserves, current year	227,040	0	0	0	0	0	0	0	0	0	226,140	0	900
4. Total contract reserves, prior year	260,176	0	0	0	0	0	0	0	0	0	259,072	0	1,104
5. Increase in contract reserves	(33,136)	0	0	0	0	0	0	0	0	0	(32,932)	0	(204)
C. Claim Reserves and Liabilities:													
1. Total current year	69,804										67,552	0	2,252
2. Total prior year	106,392	0	0	0	0	0	0	0	0	0	104,221	0	2,171
3. Increase	(36,588)	0	0	0	0	0	0	0	0	0	(36,669)	0	81

PART 3 - TEST OF PRIOR YEAR'S CLAIM RESERVES AND LIABILITIES													
	1	2	3	4	5	6	7	8	9	10	11	12	13
	Total	Comprehensive (Hospital and Medical) Individual	Comprehensive (Hospital and Medical) Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Medicare Title XVIII	Medicaid Title XIX	Credit A&H	Disability Income	Long-Term Care	Other Health
1. Claims paid during the year:													
1.1 On claims incurred prior to current year	24,078										24,078	0	0
1.2 On claims incurred during current year	200,000										0	0	200,000
2. Claim reserves and liabilities, December 31, current year:													
2.1 On claims incurred prior to current year	59,805										59,805	0	0
2.2 On claims incurred during current year	10,000										7,748	0	2,252
3. Test:													
3.1 Lines 1.1 and 2.1	83,883	0	0	0	0	0	0	0	0	0	83,883	0	0
3.2 Claim reserves and liabilities, December 31, prior year	106,391	0	0	0	0	0	0	0	0	0	104,220	0	2,171
3.3 Line 3.1 minus Line 3.2	(22,508)	0	0	0	0	0	0	0	0	0	(20,337)	0	(2,171)

PART 4 - REINSURANCE													
	1	2	3	4	5	6	7	8	9	10	11	12	13
	Total	Comprehensive (Hospital and Medical) Individual	Comprehensive (Hospital and Medical) Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Medicare Title XVIII	Medicaid Title XIX	Credit A&H	Disability Income	Long-Term Care	Other Health
A. Reinsurance Assumed:													
1. Premiums written	0										0	0	0
2. Premiums earned	0										0	0	0
3. Incurred claims	0										0	0	0
4. Commissions	0										0	0	0
B. Reinsurance Ceded:													
1. Premiums written	46,227										46,227	0	0
2. Premiums earned	46,227										46,227	0	0
3. Incurred claims	(15,874)										(15,874)	0	0
4. Commissions	5,363										5,363	0	0

(a) Includes \$ 0 premium deficiency reserve.

SCHEDULE H - PART 5 - HEALTH CLAIMS

	1 Comprehensive (Hospital and Medical) Individual	2 Comprehensive (Hospital and Medical) Group	3 Medicare Supplement	4 Vision Only	5 Dental Only	6 Federal Employees Health Benefits Plan	7 Medicare Title XVIII	8 Medicaid Title XIX	9 Credit A&H	10 Disability Income	11 Long-Term Care	12 Other Health	13 Total
A. Direct:													
1. Incurred claims.....										(28,465)	.0	.200,081	.171,616
2. Beginning claim reserves and liabilities.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.281,413	.0	.2,171	.283,584
3. Ending claim reserves and liabilities										.177,465	.0	.2,252	.179,717
4. Claims paid	.0	.0	.0	.0	.0	.0	.0	.0	.0	.75,483	.0	.200,000	.275,483
B. Assumed Reinsurance:													
1. Incurred claims.....										.0	.0	.0	.0
2. Beginning claim reserves and liabilities.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. Ending claim reserves and liabilities.....										.0	.0	.0	.0
4. Claims paid	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
C. Ceded Reinsurance:													
1. Incurred claims.....										(15,874)	.0	.0	(15,874)
2. Beginning claim reserves and liabilities.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.253,796	.0	.0	.253,796
3. Ending claim reserves and liabilities.....										.196,530	.0	.0	.196,530
4. Claims paid	.0	.0	.0	.0	.0	.0	.0	.0	.0	.41,392	.0	.0	.41,392
D. Net:													
1. Incurred claims.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	(12,591)	.0	.200,081	.187,490
2. Beginning claim reserves and liabilities.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.27,617	.0	.2,171	.29,788
3. Ending claim reserves and liabilities.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	(19,065)	.0	.2,252	(16,813)
4. Claims paid.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.34,091	.0	.200,000	.234,091
E. Net Incurred Claims and Cost Containment Expenses:													
1. Incurred claims and cost containment expenses.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	(12,591)	.0	.200,081	.187,490
2. Beginning reserves and liabilities.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.27,617	.0	.2,171	.29,788
3. Ending reserves and liabilities.....										(19,065)	.0	.2,252	(16,813)
4. Paid claims and cost containment expenses	0	0	0	0	0	0	0	0	0	34,091	0	200,000	234,091

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

[illegible]

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

SCHEDULE S - PART 1 - SECTION 2

Reinsurance Assumed Accident and Health Insurance Listed by Reinsured Company as of December 31, Current Year

[illegible]

SCHEDULE S - PART 2

[illegible]

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

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 Domiciliary Jurisdiction	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		
General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates														
60895	35-0145825	01/01/2000	AMERICAN UNITED LIFE INS CO	IN	CO/I	OL	60,273,367	577,649	520,901	803,401	0	0	0	0
60895	35-0145825	01/01/2000	AMERICAN UNITED LIFE INS CO	IN	CO/I	XXXL	236,917,923	1,768,293	1,668,420	74,044	0	0	0	0
60895	35-0145825	09/01/1977	AMERICAN UNITED LIFE INS CO	IN	YRT/I	OL	39,014,749	390,002	377,326	925,975	0	0	0	0
60895	35-0145825	01/01/1993	AMERICAN UNITED LIFE INS CO	IN	YRT/I	OL	918,230	6,792	10,406	0	0	0	0	0
80659	82-4533188	07/01/2015	US BUSINESS OF CANADA LIFE ASSUR CO	MI	YRT/I	OL	10,095,446	0	0	43,632	0	0	0	0
80659	82-4533188	02/15/2012	US BUSINESS OF CANADA LIFE ASSUR CO	MI	YRT/I	OL	17,497,419	0	0	54,233	0	0	0	0
80659	82-4533188	10/01/2011	US BUSINESS OF CANADA LIFE ASSUR CO	MI	YRT/I	OL	58,553,894	0	0	322,992	0	0	0	0
80659	82-4533188	05/21/2003	US BUSINESS OF CANADA LIFE ASSUR CO	MI	YRT/I	OL	1,442,203,500	2,260,919	2,177,764	2,578,224	0	0	0	0
80659	82-4533188	05/21/2003	US BUSINESS OF CANADA LIFE ASSUR CO	MI	YRT/I	OL	10,950,000	19,208	17,264	25,089	0	0	0	0
80659	82-4533188	02/15/2012	US BUSINESS OF CANADA LIFE ASSUR CO	MI	YRT/I	OL	83,546,565	75,455	69,203	81,433	0	0	0	0
68276	48-1024691	01/01/2002	EMPLOYERS REASSUR CORP	KS	CO/I	XXXL	24,406,329	37,859	35,734	168,874	0	0	0	0
86258	13-2572994	05/21/2003	GENERAL RE LIFE CORP	CT	YRT/I	OL	817,739,771	1,241,163	1,188,147	1,630,220	0	0	0	0
88340	59-2859797	07/23/2015	HANNOVER LIFE REASSUR CO OF AMER	FL	YRT/I	OL	9,031,721	0	0	33,177	0	0	0	0
88340	59-2859797	02/15/2012	HANNOVER LIFE REASSUR CO OF AMER	FL	YRT/I	OL	15,196,144	0	0	34,448	0	0	0	0
88340	59-2859797	10/01/2011	HANNOVER LIFE REASSUR CO OF AMER	FL	YRT/I	OL	47,657,904	0	0	274,889	0	0	0	0
88340	59-2859797	05/21/2003	HANNOVER LIFE REASSUR CO OF AMER	FL	YRT/I	OL	714,614,482	1,078,486	1,012,769	1,325,942	0	0	0	0
88340	59-2859797	05/21/2003	HANNOVER LIFE REASSUR CO OF AMER	FL	YRT/I	OL	27,425,000	17,046	15,348	29,265	0	0	0	0
88340	59-2859797	02/15/2012	HANNOVER LIFE REASSUR CO OF AMER	FL	YRT/I	OL	82,796,565	74,629	68,477	84,843	0	0	0	0
65676	35-0472300	07/01/1996	LINCOLN NATL LIFE INS CO	IN	YRT/I	OL	270,000	1,466	20,069	0	0	0	0	0
65676	35-0472300	08/01/2000	LINCOLN NATL LIFE INS CO	IN	YRT/I	OL	4,200,376	0	0	86,737	0	0	0	0
65676	35-0472300	08/01/2000	LINCOLN NATL LIFE INS CO	IN	YRT/I	OL	245,711	0	0	1,236	0	0	0	0
65676	35-0472300	08/01/2000	LINCOLN NATL LIFE INS CO	IN	CO/I	XXXL	1,829,995	8,231	9,733	11,912	0	0	0	0
65676	35-0472300	08/01/2000	LINCOLN NATL LIFE INS CO	IN	CO/I	XXXL	49,995	286	11,870	1,366	0	0	0	0
65676	35-0472300	08/01/2000	LINCOLN NATL LIFE INS CO	IN	CO/I	XXXL	122,966,920	931,955	902,792	748,459	0	0	0	0
65676	35-0472300	04/01/1984	LINCOLN NATL LIFE INS CO	IN	CO/I	OL	150,000	2,574	3,439	1,660	0	0	0	0
65676	35-0472300	10/15/1975	LINCOLN NATL LIFE INS CO	IN	YRT/I	OL	1,925,883	12,798	16,530	21,426	0	0	0	0
88099	75-1608507	05/01/1996	OPTIMUM RE INS CO	TX	CO/I	OL	15,427,979	161,349	169,881	304,572	0	0	0	0
88099	75-1608507	05/01/1985	OPTIMUM RE INS CO	TX	CO/I	OL	23,844,169	327,522	313,519	303,100	0	0	0	0
88099	75-1608507	05/01/1985	OPTIMUM RE INS CO	TX	CO/I	XXXL	799,992	8,328	8,122	0	0	0	0	0
88099	75-1608507	05/01/1996	OPTIMUM RE INS CO	TX	YRT/I	OL	4,880,411	57,526	53,222	0	0	0	0	0
88099	75-1608507	03/01/2000	OPTIMUM RE INS CO	TX	YRT/I	OL	19,662,046	90,639	107,379	125,919	0	0	0	0
88099	75-1608507	05/01/1996	OPTIMUM RE INS CO	TX	CO/I	XXXL	6,572,532	61,922	58,325	0	0	0	0	0
88099	75-1608507	04/01/1984	OPTIMUM RE INS CO	TX	CO/I	OL	1,394,000	28,985	29,925	41,389	0	0	0	0
93572	43-1235868	09/01/2007	RGA REINS CO	MO	CO/I	XXXL	2,383,362,507	117,491,626	115,280,591	5,001,123	0	0	0	0
93572	43-1235868	05/01/2017	RGA REINS CO	MO	CO/I	XXXL	26,246,428	307,965	287,855	161,314	0	0	0	0
93572	43-1235868	01/01/2016	RGA REINS CO	MO	CO/I	XXXL	2,973,372,513	40,283,216	37,620,214	5,908,880	0	0	0	0
93572	43-1235868	02/04/2016	RGA REINS CO	MO	CO/I	XXXL	26,557,014	449,870	414,635	136,831	0	0	0	0
93572	43-1235868	02/04/2016	RGA REINS CO	MO	YRT/I	OL	16,198,953	29,896	28,280	0	0	0	0	0
93572	43-1235868	07/20/2015	RGA REINS CO	MO	YRT/I	OL	58,265,640	63,181	55,072	111,703	0	0	0	0
93572	43-1235868	02/01/2021	RGA REINS CO	MO	YRT/I	OL	62,562,767	671,809	639,285	695,995	0	0	0	0
93572	43-1235868	07/20/2015	RGA REINS CO	MO	YRT/I	OL	9,129,351	55,454	2,051	58,631	0	0	0	0
97071	13-3126819	03/01/1999	SCOR GLOBAL LIFE USA REINS CO	DE	CO/I	OL	307,500	2,515	2,279	11,448	0	0	0	0
97071	13-3126819	03/01/1999	SCOR GLOBAL LIFE USA REINS CO	DE	CO/I	OL	206,250	1,616	1,800	20,046	0	0	0	0
97071	13-3126819	03/01/1999	SCOR GLOBAL LIFE USA REINS CO	DE	CO/I	XXXL	850,000	4,088	6,291	0	0	0	0	0
97071	13-3126819	03/01/1999	SCOR GLOBAL LIFE USA REINS CO	DE	CO/I	XXXL	1,106,250	7,140	7,099	0	0	0	0	0
97071	13-3126819	08/01/2000	SCOR GLOBAL LIFE USA REINS CO	DE	CO/I	XXXL	6,703,692	148,671	154,680	88,044	0	0	0	0
97071	13-3126819	08/01/2000	SCOR GLOBAL LIFE USA REINS CO	DE	YRT/I	OL	2,797,200	40,281	36,339	0	0	0	0	0
97071	13-3126819	03/01/1999	SCOR GLOBAL LIFE USA REINS CO	DE	YRT/I	OL	771,235	0	0	15,797	0	0	0	0
97071	13-3126819	01/01/2005	SCOR GLOBAL LIFE USA REINS CO	DE	OTH/I	OL	0	0	0	83,848	0	0	0	0
86231	39-0989781	05/21/2003	TRANSAMERICA LIFE INS CO	IA	CO/I	XXXL	10,810,000	664,076	732,255	9,281	0	0	0	0
86231	39-0989781	05/21/2003	TRANSAMERICA LIFE INS CO	IA	CO/I	XXXL	2,527,492,932	109,356,379	121,890,833	5,246,892	0	0	0	0
86231	39-0989781	05/21/2003	TRANSAMERICA LIFE INS CO	IA	YRT/I	OL	4,032,284	2,210	1,987	29,695	0	0	0	0
86231	39-0989781	05/21/2003	TRANSAMERICA LIFE INS CO	IA	YRT/I	OL	246,250	53	47	1,815	0	0	0	0
86231	39-0989781	05/21/2003	TRANSAMERICA LIFE INS CO	IA	YRT/I	OL	271,250	2,057	2,126	664	0	0	0	0
86231	39-0989781	05/01/2003	TRANSAMERICA LIFE INS CO	IA	YRT/I	OL	129,934,105	716,711	788,452	211,385	0	0	0	0
86231	39-0989781	09/01/2007	TRANSAMERICA LIFE INS CO	IA	CO/I	XXXL	1,732,885,508	44,241,883	46,388,481	2,635,344	0	0	0	0
86231	39-0989781	09/01/2007	TRANSAMERICA LIFE INS CO	IA	YRT/I	OL	2,720,608	1,976	1,928	12,669	0	0	0	0
97071	13-3126819	03/01/2008	SCOR GLOBAL LIFE USA REINS CO	DE	YRT/I	OL	54,376,632	0	0	171,785	0	0	0	0
86231	39-0989781	09/01/2007	TRANSAMERICA LIFE INS CO	IA	CO/I	OL	0	0	0	278,517	0	0	0	0
86231	39-0989781	09/01/2007	TRANSAMERICA LIFE INS CO	IA	CO/I	XXXL	203,610,999	5,099,011	5,021,795	0	0	0	0	0

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

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

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

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Schedule S - Part 4

NONE

Schedule S - Part 5

NONE

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	35,946	38,940	39,615	41,020	41,614
2. Commissions and reinsurance expense allowances	2,187	2,210	2,410	2,897	3,863
3. Contract claims	36,131	37,127	35,194	43,563	42,976
4. Surrender benefits and withdrawals for life contracts	123	111	138	0	0
5. Dividends to policyholders and refunds to members	0	0	0	0	0
6. Reserve adjustments on reinsurance ceded	0	0	0	0	0
7. Increase in aggregate reserves for life and accident and health contracts	(8,947)	(2,959)	954	8,275	14,195
B. BALANCE SHEET ITEMS					
8. Premiums and annuity considerations for life and accident and health contracts deferred and uncollected	1,177	1,253	1,231	1,389	1,493
9. Aggregate reserves for life and accident and health contracts	348,318	357,265	360,224	359,271	350,996
10. Liability for deposit-type contracts	0	0	0	0	0
11. Contract claims unpaid	3,854	6,254	3,079	5,837	6,516
12. Amounts recoverable on reinsurance	2,685	1,333	4,846	10,795	7,410
13. Experience rating refunds due or unpaid	0	0	0	0	0
14. Policyholders' dividends and refunds to members (not included in Line 10).....	0	0	0	0	0
15. Commissions and reinsurance expense allowances due	0	0	0	0	0
16. Unauthorized reinsurance offset	0	0	0	0	0
17. Offset for reinsurance with Certified Reinsurers.....	0	0	0	0	0
C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)					
18. Funds deposited by and withheld from (F)	0	0	0	0	0
19. Letters of credit (L)	0	0	0	0	0
20. Trust agreements (T)	0	0	0	0	0
21. Other (O)	0	0	0	0	0
D. REINSURANCE WITH CERTIFIED REINSURERS (DEPOSITS BY AND FUNDS WITHHELD FROM)					
22. Multiple Beneficiary Trust	0	0	0	0	0
23. Funds deposited by and withheld from (F)	0	0	0	0	0
24. Letters of credit (L).....	0	0	0	0	0
25. Trust agreements (T)	0	0	0	0	0
26. Other (O)	0	0	0	0	0

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)	441,046,144		441,046,144
2. Reinsurance (Line 16)	2,685,141	(2,685,141)	0
3. Premiums and considerations (Line 15)	36,448,501	1,177,403	37,625,904
4. Net credit for ceded reinsurance	XXX	353,679,706	353,679,706
5. All other admitted assets (balance)	6,404,634		6,404,634
6. Total assets excluding Separate Accounts (Line 26)	486,584,420	352,171,968	838,756,388
7. Separate Account assets (Line 27)	0		0
8. Total assets (Line 28)	486,584,420	352,171,968	838,756,388
LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
9. Contract reserves (Lines 1 and 2)	445,524,710	348,318,207	793,842,917
10. Liability for deposit-type contracts (Line 3)	486,705		486,705
11. Claim reserves (Line 4)	5,891,634	3,853,761	9,745,395
12. Policyholder dividends/member refunds/reserves (Lines 5 through 7)	54,956		54,956
13. Premium & annuity considerations received in advance (Line 8)	334,359		334,359
14. Other contract liabilities (Line 9)	0		0
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	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		0
19. All other liabilities (balance)	9,037,931		9,037,931
20. Total liabilities excluding Separate Accounts (Line 26)	461,330,295	352,171,968	813,502,263
21. Separate Account liabilities (Line 27)	0		0
22. Total liabilities (Line 28)	461,330,295	352,171,968	813,502,263
23. Capital & surplus (Line 38)	25,254,125	XXX	25,254,125
24. Total liabilities, capital & surplus (Line 39)	486,584,420	352,171,968	838,756,388
NET CREDIT FOR CEDED REINSURANCE			
25. Contract reserves	348,318,207		
26. Claim reserves	3,853,761		
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	2,685,141		
32. Other ceded reinsurance recoverables	0		
33. Total ceded reinsurance recoverables	354,857,109		
34. Premiums and considerations	1,177,403		
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	1,177,403		
41. Total net credit for ceded reinsurance	353,679,706		

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

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	152,777	.0	.0	.0	.0	152,777
2. Alaska	AK	11,198	.0	.0	.0	.0	11,198
3. Arizona	AZ	171,920	.0	.0	.0	.0	171,920
4. Arkansas	AR	43,008	.0	.0	.0	.0	43,008
5. California	CA	131,727	.0	158	.0	.0	131,885
6. Colorado	CO	67,759	.0	.0	.0	.0	67,759
7. Connecticut	CT	12,571	.0	.0	.0	.0	12,571
8. Delaware	DE	5,891	.0	.0	.0	.0	5,891
9. District of Columbia	DC	2,343	.0	.0	.0	.0	2,343
10. Florida	FL	989,607	400	2,805	.0	.0	992,812
11. Georgia	GA	7,160,123	1,270	6,348	.0	.0	7,167,741
12. Hawaii	HI	9,227	.0	.0	.0	.0	9,227
13. Idaho	ID	7,773	.0	.0	.0	.0	7,773
14. Illinois	IL	2,683,217	9,700	939	.0	.0	2,693,856
15. Indiana	IN	5,323,129	7,500	946	.0	.0	5,331,575
16. Iowa	IA	120,240	.0	.0	.0	.0	120,240
17. Kansas	KS	30,358	.0	.0	.0	.0	30,358
18. Kentucky	KY	8,697,497	76,323	9,516	.0	.0	8,783,336
19. Louisiana	LA	17,515	.0	.0	.0	.0	17,515
20. Maine	ME	10,447	.0	.0	.0	.0	10,447
21. Maryland	MD	58,564	.0	.0	.0	.0	58,564
22. Massachusetts	MA	12,267	.0	.0	.0	.0	12,267
23. Michigan	MI	3,937,802	900	.0	.0	.0	3,938,702
24. Minnesota	MN	475,132	225	.0	.0	.0	475,357
25. Mississippi	MS	74,407	.0	.0	.0	.0	74,407
26. Missouri	MO	143,011	.0	.0	.0	.0	143,011
27. Montana	MT	7,160	.0	.0	.0	.0	7,160
28. Nebraska	NE	10,149	.0	.0	.0	.0	10,149
29. Nevada	NV	32,941	.0	.0	.0	.0	32,941
30. New Hampshire	NH	9,157	.0	.0	.0	.0	9,157
31. New Jersey	NJ	53,639	.0	.0	.0	.0	53,639
32. New Mexico	NM	9,971	.0	.0	.0	.0	9,971
33. New York	NY	28,859	.0	.0	.0	.0	28,859
34. North Carolina	NC	260,170	.0	.0	.0	.0	260,170
35. North Dakota	ND	2,424	.0	.0	.0	.0	2,424
36. Ohio	OH	29,745,014	170,948	34,843	.0	.0	29,950,805
37. Oklahoma	OK	17,397	.0	.0	.0	.0	17,397
38. Oregon	OR	11,837	.0	.0	.0	.0	11,837
39. Pennsylvania	PA	2,103,473	.0	.0	.0	.0	2,103,473
40. Rhode Island	RI	2,833	.0	.0	.0	.0	2,833
41. South Carolina	SC	1,964,751	.0	.0	.0	.0	1,964,751
42. South Dakota	SD	2,964	.0	.0	.0	.0	2,964
43. Tennessee	TN	6,697,533	38,238	4,339	.0	.0	6,740,110
44. Texas	TX	225,933	.0	.0	.0	.0	225,933
45. Utah	UT	24,582	.0	.0	.0	.0	24,582
46. Vermont	VT	8,763	.0	.0	.0	.0	8,763
47. Virginia	VA	825,598	7,200	395	.0	.0	833,193
48. Washington	WA	34,226	.0	.0	.0	.0	34,226
49. West Virginia	WV	95,045	5,839	157	.0	.0	101,041
50. Wisconsin	WI	1,033,079	.0	.0	.0	.0	1,033,079
51. Wyoming	WY	1,503	.0	.0	.0	.0	1,503
52. American Samoa	AS	.0	.0	.0	.0	.0	.0
53. Guam	GU	.0	.0	.0	.0	.0	.0
54. Puerto Rico	PR	3,171	.0	.0	.0	.0	3,171
55. U.S. Virgin Islands	VI	1,398	.0	.0	.0	.0	1,398
56. Northern Mariana Islands	MP	.0	.0	.0	.0	.0	.0
57. Canada	CAN	.0	.0	.0	.0	.0	.0
58. Aggregate Other Alien	OT	10,620	.0	.0	.0	.0	10,620
59. Totals		73,573,700	318,543	60,446	0	0	73,952,689

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ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

SCHEDULE Y

PART 2 - SUMMARY OF INSURER'S TRANSACTIONS WITH ANY AFFILIATES

[illegible]

SCHEDULE Y

[illegible]

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.

MARCH FILINGResponses

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).....YES.....
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 Accountants 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?.....YES.....
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?.....YES.....
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.....
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?.....YES.....
28. Will the Workers’ Compensation Carve-Out Supplement be filed by March 1? (Not applicable to fraternal benefit societies).....YES.....

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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?

.....NO.....

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?

.....YES.....

36.

Will the Market Conduct Annual Statement (MCAS) Premium Exhibit for Year be filed with appropriate jurisdictions and with the NAIC by March 1?

.....YES.....

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?

.....YES.....

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?

.....NO.....

43.

Will the Supplemental Term and Universal Life Insurance Reinsurance Exhibit be filed with the state of domicile and the NAIC by April 1?

.....YES.....

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.....

Explanation:

Bar code:

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SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES



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OVERFLOW PAGE FOR WRITE-INS



SUPPLEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

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 00588

NAIC Company Code 71218

	Prior Year	Current Year	
	1 Reported Reserve	2 Reported Reserve	3 Due and Deferred Premium Asset
1. Post-Reinsurance-Ceded Reserve			
1.1. Term Life Insurance.....	0		
1.2. Universal Life With Secondary Guarantee.....	0		
1.3. Non-Participating Whole Life.....	0		
1.4. Participating Whole Life.....	0		
1.5. Universal Life Without Secondary Guarantee.....	0		
1.6. Variable Universal Life	0		
1.7. Variable Life	0		
1.8. Indexed Life	0		
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	0		
3.2. Universal Life With Secondary Guarantee	0		
3.3. Non-Participating Whole Life	0		
3.4. Participating Whole Life	0		
3.5. Universal Life Without Secondary Guarantee	0		
3.6. Variable Universal Life	0		
3.7. Variable Life	0		
3.8. Indexed Life	0		
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)

	Current Year											
	SECTION A					SECTION B				SECTION C		
	1 Net Premium Reserve	2 Deterministic Reserve	3 Stochastic Reserve	4 Number of Policies	5 Face Amount	6 Net Premium Reserve	7 Deterministic Reserve	8 Number of Policies	9 Face Amount	10 Net Premium Reserve	11 Number of Policies	12 Face Amount
1. Post-Reinsurance-Ceded Reserve												
1.1. Term Life Insurance.....				XXX	XXX			XXX	XXX	XXX	XXX	XXX
1.2. Universal Life With Secondary Guarantee.....				XXX	XXX			XXX	XXX		XXX	XXX
1.3. Non-Participating Whole Life.....				XXX	XXX			XXX	XXX		XXX	XXX
1.4. Participating Whole Life.....				XXX	XXX			XXX	XXX		XXX	XXX
1.5. Universal Life Without Secondary Guarantee				XXX	XXX			XXX	XXX		XXX	XXX
1.6. Variable Universal Life				XXX	XXX			XXX	XXX		XXX	XXX
1.7. Variable Life				XXX	XXX			XXX	XXX		XXX	XXX
1.8. Indexed Life				XXX	XXX			XXX	XXX		XXX	XXX
1.9. Aggregate Write-Ins for Other Products	0	0	0	XXX	XXX	0	0	XXX	XXX	0	XXX	XXX
2. Total Post-Reinsurance-Ceded Reserve (Sum of Lines 1.1 through 1.9)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3. Pre-Reinsurance-Ceded Reserve										XXX		
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												
3.7. Variable Life												
3.8. Indexed Life												
3.9. Aggregate Write-Ins for Other Products	0	0	0	0	0	0	0	0	0	0	0	0
4. Total Pre-Reinsurance-Ceded Reserve (Sum of Lines 3.1 through 3.9)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
5. Total Reserves Ceded (Line 4 minus Line 2)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
DETAILS OF WRITE-INS												
1.901.				XXX	XXX			XXX	XXX		XXX	XXX
1.902.				XXX	XXX			XXX	XXX		XXX	XXX
1.903.				XXX	XXX			XXX	XXX		XXX	XXX
1.998. Summary of remaining write-ins for Line 1.9 from overflow page	0	0	0	XXX	XXX	0	0	XXX	XXX	0	XXX	XXX
1.999 Totals (Lines 1.901 through 1.903 plus 1.998) (Line 1.9 above)	0	0	0	XXX	XXX	0	0	XXX	XXX	0	XXX	XXX
3.901.												
3.902.												
3.903.												
3.998. Summary of remaining write-ins for Line 3.9 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
3.999 Totals (Lines 3.901 through 3.903 plus 3.998) (Line 3.9 above)	0	0	0	0	0	0	0	0	0	0	0	0

VM-20 RESERVES SUPPLEMENT – PART 2

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

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

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

2022, The company continues to meet the criteria for utilizing an ongoing statement of exemption.....

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 not covered under the Single State Exemption.

2A. If the answer to question 1A is "Yes", does the company have risks for policies issued outside its state of domicile? Yes [] No []

2B. If the answer to question 2A is "Yes" please discuss the risks for policies issued outside the state of domicile, how those risks came to be a responsibility of the company, and why the company would still be considered a Single State Company with such risks.

3. Is all of the company's individual ordinary life insurance business excluded from the requirements of VM-20 pursuant to Section II.B of the Valuation Manual? Yes [] No [X]

OVERFLOW PAGE FOR WRITE-INS



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

SCHEDULE O SUPPLEMENT
FOR THE YEAR ENDED DECEMBER 31, 2024

(To Be Filed By March 1)

Of The Grange Life Insurance Company
Address (City, State and Zip Code) Columbus, OH 43206-1066
NAIC Group Code 00588 NAIC Company Code 71218 Employer's ID Number 31-0739286

SUPPLEMENTAL SCHEDULE O – PART 1

Development of Incurred Losses
(\$000 Omitted)

Section A–Group Accident and Health

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid Policyholders				
	1 2020	2 2021	3 2022	4 2023	5 2024(a)
1. Prior					
2. 2020	.0	.0	.0	.0	
3. 2021	.xxx	.0	.0	.0	
4. 2022	.xxx	.xxx	.0	.0	
5. 2023	.xxx	.xxx	.xxx	.0	
6. 2024	.xxx	.xxx	.xxx	.xxx	

Section B–Other Accident and Health

1. Prior	33	46	53	59	.66
2. 2020	17	39	39	41	.41
3. 2021	.xxx	45	88	59	.74
4. 2022	.xxx	.xxx	.0	.3	.5
5. 2023	.xxx	.xxx	.xxx	.0	.0
6. 2024	.xxx	.xxx	.xxx	.xxx	200

Section C–Credit Accident and Health

1. Prior					
2. 2020	.0	.0	.0	.0	
3. 2021	.xxx	.0	.0	.0	
4. 2022	.xxx	.xxx	.0	.0	
5. 2023	.xxx	.xxx	.xxx	.0	
6. 2024	.xxx	.xxx	.xxx	.xxx	

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

SCHEDULE O SUPPLEMENT
SUPPLEMENTAL SCHEDULE O – PART 2

Development of Incurred Losses
(\$000 Omitted)

Section A - Group Accident and Health

Year in Which Losses Were Incurred	Net Amounts Paid for Cost Containment Expenses				
	1 2020	2 2021	3 2022	4 2023	5 2024
1. Prior.....		.0	.0	.0	
2. 2020.....	.0	.0	.0	.0	
3. 2021.....	XXX	.0	.0	.0	
4. 2022.....	XXX	XXX	.0	.0	
5. 2023.....	XXX	XXX	XXX	.0	
6. 2024.....	XXX	XXX	XXX	XXX	

Section B - Other Accident and Health

1. Prior.....		.0	.0	.0	
2. 2020.....	.0	.0	.0	.0	
3. 2021.....	XXX	.0	.0	.0	
4. 2022.....	XXX	XXX	.0	.0	
5. 2023.....	XXX	XXX	XXX	.0	
6. 2024.....	XXX	XXX	XXX	XXX	

Section C - Credit Accident and Health

1. Prior.....		.0	.0	.0	
2. 2020.....	.0	.0	.0	.0	
3. 2021.....	XXX	.0	.0	.0	
4. 2022.....	XXX	XXX	.0	.0	
5. 2023.....	XXX	XXX	XXX	.0	
6. 2024.....	XXX	XXX	XXX	XXX	

SCHEDULE O SUPPLEMENT
SUPPLEMENTAL SCHEDULE O – PART 3

Development of Incurred Losses
(\$000 Omitted)

Section A - Group Accident and Health

Year in Which Losses Were Incurred	Sum of Net Cumulative Amount Paid Policyholders and Claim Liability and Reserve Outstanding at End of Year				
	1 2020	2 2021	3 2022	4 2023	5 2024
1. 2020	.0	.0	.0	XXX	XXX
2. 2021	XXX	.0	.0	.0	XXX
3. 2022	XXX	XXX	.0	.0	
4. 2023	XXX	XXX	XXX	.0	
5. 2024	XXX	XXX	XXX	XXX	

Section B - Other Accident and Health

1. 2020	33	39	39	XXX	XXX
2. 2021	XXX	225	134	111	XXX
3. 2022	XXX	XXX	10	23	18
4. 2023	XXX	XXX	XXX	10	.0
5. 2024	XXX	XXX	XXX	XXX	210

Section C - Credit Accident and Health

1. 2020	.0	.0	.0	XXX	XXX
2. 2021	XXX	.0	.0	.0	XXX
3. 2022	XXX	XXX	.0	.0	
4. 2023	XXX	XXX	XXX	.0	
5. 2024	XXX	XXX	XXX	XXX	

SCHEDULE O SUPPLEMENT
SUPPLEMENTAL SCHEDULE O – PART 4

Development of Incurred Losses
(\$000 Omitted)

Section A - Group Accident and Health

Year 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 the End of Year				
	1 2020	2 2021	3 2022	4 2023	5 2024
1. 2020.....	.0	.0	.0	.0	
2. 2021.....	XXX	.0	.0	.0	
3. 2022.....	XXX	XXX	.0	.0	
4. 2023.....	XXX	XXX	XXX	.0	
5. 2024.....	XXX	XXX	XXX	XXX	

Section B – Other Accident and Health

1. 2020.....	33	39	39	.0	
2. 2021.....	XXX	225	134	111	
3. 2022.....	XXX	XXX	10	23	18
4. 2023.....	XXX	XXX	XXX	10	.0
5. 2024.....	XXX	XXX	XXX	XXX	210

Section C - Credit Accident and Health

1. 2020.....	.0	.0	.0	.0	
2. 2021.....	XXX	.0	.0	.0	
3. 2022.....	XXX	XXX	.0	.0	
4. 2023.....	XXX	XXX	XXX	.0	
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	Deve lopment.....	5,692
3. Individual annuity	Deve lopment.....	199
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	Deve lopment.....	70
11. Total		5,961



SUPPLEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

HEALTH SUPPLEMENTS

For The Year Ended December 31, 2024

(To Be Filed By March 1)

Of the Grange Life Insurance Company.....Insurance Company

Address (City, State and Zip Code) Columbus, OH 43206-1066.....

NAIC Group Code 00588..... NAIC Company Code 71218..... Employer’s ID Number 31-0739286.....

476

476

476

SUPPLEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

EXHIBIT 3 – HEALTH CARE RECEIVABLES

[illegible]

EXHIBIT 3A – ANALYSIS OF HEALTH CARE RECEIVABLES COLLECTED AND ACCRUED

Type of Health Care Receivables	Health Care Receivables Collected or Offset During the Year		Health Care Receivables Accrued as of December 31 of Current Year		5 Health Care Receivables from Prior Years (Columns 1 + 3)	6 Estimated Health Care Receivables Accrued as of December 31 of Prior Year
	1 On Amounts Accrued Prior to January 1 of Current Year	2 On Amounts Accrued During the Year	3 On Amounts Accrued December 31 of Prior Year	4 On Amounts Accrued During the Year		
1. Pharmaceutical rebate receivables					.0	
2. Claim overpayment receivables					.0	
3. Loans and advances to providers					.0	
4. Capitation arrangement receivables					.0	
5. Risk sharing receivables					.0	
6. Other health care receivables					.0	
7. Totals (Lines 1 through 6)	0	0	0	0	0	0

Note that the accrued amounts in columns 3, 4 and 6 are the total health care receivables, not just the admitted portion.

OVERFLOW PAGE FOR WRITE-INS



SUPPLEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

WORKERS’ COMPENSATION CARVE - OUT SUPPLEMENT

For The Year Ended December 31, 2024

(To Be Filed by March 1)

Address (City, State, Zip Code) Columbus, OH 43206-1066.....

NAIC Group Code 00588..... NAIC Company Code 71218..... Employer's ID Number 31-0739286.....

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1 - PREMIUMS EARNED

Line of Business	1	2	3	4
	Net Premiums Written per Column 5, Part 2	Unearned Premiums Dec. 31 Prior Year	Unearned Premiums Dec. 31 Current Year	Premiums Earned During Year (Cols. 1 + 2 - 3)
1. Workers' Compensation Carve-Out	0	0		0

PART 2 - PREMIUMS WRITTEN

Line of Business	Reinsurance Assumed		Reinsurance Ceded		5 Net Premiums Written Cols. 1 + 2 - 3 - 4
	1 From Affiliates	2 From Non-Affiliates	3 To Affiliates	4 To Non-Affiliates	
1. Workers' Compensation Carve-Out					0

PART 3 - LOSSES PAID AND INCURRED

Line of Business	Losses Paid			4 Net Losses Unpaid Current Year (Part 4, Col. 6)	5 Net Losses Unpaid Prior Year	6 Losses Incurred Current Year (Cols. 3 + 4 - 5)	7 Percentage of Losses Incurred (Col. 6, Part 3) to Premiums Earned (Col. 4, Part 1)
	1 Reinsurance Assumed	2 Reinsurance Recovered	3 Net Payments (Cols. 1 - 2)				
1. Workers' Compensation Carve-Out			0	0	0	0	0.0

PART 4 - UNPAID LOSSES AND LOSS ADJUSTMENT EXPENSES

Line of Business	Reported Losses			Incurred But Not Reported		6 Net Losses Unpaid (Cols. 3 + 4 - 5)	7 Unpaid Loss Adjustment Expenses
	1 Reinsurance Assumed	2 Deduct Reinsurance Recoverable from Authorized and Unauthorized Companies	3 Net Losses Excl. Incurred But Not Reported (Cols. 1 - 2)	4 Reinsurance Assumed	5 Reinsurance Ceded		
1. Workers' Compensation Carve-Out			0			0	

WORKERS’ COMPENSATION CARVE - OUT SUPPLEMENT

SCHEDULE F - PART 1

Assumed Reinsurance as of December 31, Current Year (\$000 Omitted)

1 ID Number	2 NAIC Company Code	3 Name of Reinsured	4 Domiciliary Jurisdiction	5 Assumed Premium	Reinsurance On			9 Contingent Commissions Payable	10 Assumed Premiums Receivable	11 Unearned Premium	12 Funds Held By or Deposited With Reinsured Companies	13 Letters of Credit Posted	14 Amount of Assets Pledged or Compensating Balances to Secure Letters of Credit	15 Amount of Assets Pledged or Collateral Held in Trust
					6 Paid Losses and Loss Adjustment Expenses	7 Known Case Losses and LAE	8 Total (Cols. 6 + 7)							
9999999	Totals			0	0	0	0	0	0	0	0	0	0	0

SCHEDULE F - PART 2

Ceded Reinsurance as of December 31, Current Year (\$000 Omitted)

1 ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Special Code	6 Reinsurance Premiums Ceded	Reinsurance Recoverable On										Reinsurance Payable		18 Net Amount Recoverable From Reinsurers (Cols. 15 - [16 + 17])	19 Funds Held By Company Under Reinsurance Treaties
						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Comm- issions	15 Cols.7 through 14 Totals	16 Ceded Balances Payable	17 Other Amounts Due to Reinsurers			
9999999 Totals					0	0	0	0	0	0	0	0	0	0	0	0	0		

WORKERS' COMPENSATION CARVE - OUT SUPPLEMENT
SCHEDULE P – PART 1
(\$000 Omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12
	1	2	3	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10	11	
				4	5	6	7	8	9			Subrogation Received
	Assumed	Ceded	Net (Cols. 1 - 2)	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded			
1. Prior	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX
2. 2015	0	0	0	0	0	0	0	0	0	0	0	0
3. 2016	0	0	0	0	0	0	0	0	0	0	0	0
4. 2017	0	0	0	0	0	0	0	0	0	0	0	0
5. 2018	0	0	0	0	0	0	0	0	0	0	0	0
6. 2019	0	0	0	0	0	0	0	0	0	0	0	0
7. 2020	0	0	0	0	0	0	0	0	0	0	0	0
8. 2021	0	0	0	0	0	0	0	0	0	0	0	0
9. 2022	0	0	0	0	0	0	0	0	0	0	0	0
10. 2023	0	0	0	0	0	0	0	0	0	0	0	0
11. 2024	0	0	0	0	0	0	0	0	0	0	0	0
12. Totals	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22	Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Assumed
	13	14	15	16	17	18	19	20					
	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded			
1.	0	0	0	0	0	0	0	0	0	0	0	0	0
2.	0	0	0	0	0	0	0	0	0	0	0	0	0
3.	0	0	0	0	0	0	0	0	0	0	0	0	0
4.	0	0	0	0	0	0	0	0	0	0	0	0	0
5.	0	0	0	0	0	0	0	0	0	0	0	0	0
6.	0	0	0	0	0	0	0	0	0	0	0	0	0
7.	0	0	0	0	0	0	0	0	0	0	0	0	0
8.	0	0	0	0	0	0	0	0	0	0	0	0	0
9.	0	0	0	0	0	0	0	0	0	0	0	0	0
10.	0	0	0	0	0	0	0	0	0	0	0	0	0
11.	0	0	0	0	0	0	0	0	0	0	0	0	0
12. Totals	0	0	0	0	0	0	0	0	0	0	0	0	0

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33		35	36
	Assumed	Ceded	Net	Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
3.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
4.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
5.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
6.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
7.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
8.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
9.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
10.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
11.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

WORKERS’ COMPENSATION CARVE - OUT SUPPLEMENT

SCHEDULE P - PART 2

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										DEVELOPMENT	
	1	2	3	4	5	6	7	8	9	10	11	12
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	One Year	Two Year
1. Prior	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2015	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2016	.XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2017	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. 2018	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
6. 2019	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0	.0
7. 2020	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0
8. 2021	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0
9. 2022	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0
10. 2023	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.XXX
11. 2024	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.XXX	.XXX
12. Totals											.0	.0

SCHEDULE P - PART 3

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11	12
	1	2	3	4	5	6	7	8	9	10	Number of Claims Closed With Loss Payment	Number of Claims Closed Without Loss Payment
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024		
1. Prior	.000	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2015	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2016	.XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2017	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. 2018	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
6. 2019	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0	.0
7. 2020	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0
8. 2021	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0
9. 2022	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0
10. 2023	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0
11. 2024	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0

WORKERS' COMPENSATION CARVE - OUT SUPPLEMENT

SCHEDULE P - PART 4

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2015	0	0	0	0	0	0	0	0	0	0
3. 2016	XXX	0	0	0	0	0	0	0	0	0
4. 2017	XXX	XXX	0	0	0	0	0	0	0	0
5. 2018	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2019	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2020	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SCHEDULE P - PART 5

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT ASSUMED AT YEAR END									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2015	0	0	0	0	0	0	0	0	0	0
3. 2016	XXX	0	0	0	0	0	0	0	0	0
4. 2017	XXX	XXX	0	0	0	0	0	0	0	0
5. 2018	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2019	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2020	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF ASSUMED CLAIMS OUTSTANDING AT YEAR END									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2015	0	0	0	0	0	0	0	0	0	0
3. 2016	XXX	0	0	0	0	0	0	0	0	0
4. 2017	XXX	XXX	0	0	0	0	0	0	0	0
5. 2018	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2019	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2020	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED ASSUMED AT YEAR END									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2015	0	0	0	0	0	0	0	0	0	0
3. 2016	XXX	0	0	0	0	0	0	0	0	0
4. 2017	XXX	XXX	0	0	0	0	0	0	0	0
5. 2018	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2019	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2020	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

WORKERS' COMPENSATION CARVE - OUT SUPPLEMENT

SCHEDULE P – PART 6

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE ASSUMED PREMIUMS EARNED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2015	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2016	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2017	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. 2018	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0
6. 2019	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0
7. 2020	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0
13. Earned Premiums (Sc P-Pt 1)	0	0	0	0	0	0	0	0	0	0	XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE CEDED PREMIUMS EARNED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2015	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2016	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2017	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. 2018	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0
6. 2019	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0
7. 2020	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0
13. Earned Premiums (Sc P-Pt 1)	0	0	0	0	0	0	0	0	0	0	XXX



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2024
(To Be Filed By March 1)

FOR THE STATE OF Alabama

NAIC Group Code 00588..... NAIC Company Code 71218.....

MCAS LINE OF BUSINESS	1 MCAS Reportable Premium/Considerations (YES/NO)
1. Disability income.....	.NO.....
2. Health.....	.NO.....
3. Homeowners.....	.NO.....
4. Individual annuity.....	.NO.....
5. Individual life.....	.YES.....
6. Lender-placed home and auto.....	.NO.....
7. Long-term care.....	.NO.....
8. Other health.....	.NO.....
9. Private flood.....	.NO.....
10. Private passenger auto.....	.NO.....
11. Short-term limited duration health plans.....	.NO.....
12. Travel	NO



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2024
(To Be Filed By March 1)

FOR THE STATE OF Alaska

NAIC Group Code 00588..... NAIC Company Code 71218.....

MCAS LINE OF BUSINESS	1 MCAS Reportable Premium/Considerations (YES/NO)
1. Disability income.....	.NO.....
2. Health.....	.NO.....
3. Homeowners.....	.NO.....
4. Individual annuity.....	.NO.....
5. Individual life.....	.YES.....
6. Lender-placed home and auto.....	.NO.....
7. Long-term care.....	.NO.....
8. Other health.....	.NO.....
9. Private flood.....	.NO.....
10. Private passenger auto.....	.NO.....
11. Short-term limited duration health plans.....	.NO.....
12. Travel	NO



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2024
(To Be Filed By March 1)

FOR THE STATE OF Arizona

NAIC Group Code 00588..... NAIC Company Code 71218.....

MCAS LINE OF BUSINESS	1 MCAS Reportable Premium/Considerations (YES/NO)
1. Disability income.....	.NO.....
2. Health.....	.NO.....
3. Homeowners.....	.NO.....
4. Individual annuity.....	.NO.....
5. Individual life.....	.YES.....
6. Lender-placed home and auto.....	.NO.....
7. Long-term care.....	.NO.....
8. Other health.....	.NO.....
9. Private flood.....	.NO.....
10. Private passenger auto.....	.NO.....
11. Short-term limited duration health plans.....	.NO.....
12. Travel	NO



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2024
(To Be Filed By March 1)

FOR THE STATE OF Arkansas

NAIC Group Code 00588..... NAIC Company Code 71218.....

MCAS LINE OF BUSINESS	1 MCAS Reportable Premium/Considerations (YES/NO)
1. Disability income.....	.NO.....
2. Health.....	.NO.....
3. Homeowners.....	.NO.....
4. Individual annuity.....	.NO.....
5. Individual life.....	.YES.....
6. Lender-placed home and auto.....	.NO.....
7. Long-term care.....	.NO.....
8. Other health.....	.NO.....
9. Private flood.....	.NO.....
10. Private passenger auto.....	.NO.....
11. Short-term limited duration health plans.....	.NO.....
12. Travel	NO



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2024
(To Be Filed By March 1)

FOR THE STATE OF California

NAIC Group Code 00588..... NAIC Company Code 71218.....

MCAS LINE OF BUSINESS	1 MCAS Reportable Premium/Considerations (YES/NO)
1. Disability income.....	YES.....
2. Health.....	NO.....
3. Homeowners.....	NO.....
4. Individual annuity.....	NO.....
5. Individual life.....	YES.....
6. Lender-placed home and auto.....	NO.....
7. Long-term care.....	NO.....
8. Other health.....	NO.....
9. Private flood.....	NO.....
10. Private passenger auto.....	NO.....
11. Short-term limited duration health plans.....	NO.....
12. Travel	NO



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2024
(To Be Filed By March 1)

FOR THE STATE OF Colorado

NAIC Group Code 00588..... NAIC Company Code 71218.....

MCAS LINE OF BUSINESS	1 MCAS Reportable Premium/Considerations (YES/NO)
1. Disability income.....	.NO.....
2. Health.....	.NO.....
3. Homeowners.....	.NO.....
4. Individual annuity.....	.NO.....
5. Individual life.....	.YES.....
6. Lender-placed home and auto.....	.NO.....
7. Long-term care.....	.NO.....
8. Other health.....	.NO.....
9. Private flood.....	.NO.....
10. Private passenger auto.....	.NO.....
11. Short-term limited duration health plans.....	.NO.....
12. Travel	NO



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2024
(To Be Filed By March 1)

FOR THE STATE OF Connecticut

NAIC Group Code 00588.....

NAIC Company Code 71218.....

MCAS LINE OF BUSINESS	1 MCAS Reportable Premium/Considerations (YES/NO)
1. Disability income.....	.NO.....
2. Health.....	.NO.....
3. Homeowners.....	.NO.....
4. Individual annuity.....	.NO.....
5. Individual life.....	.YES.....
6. Lender-placed home and auto.....	.NO.....
7. Long-term care.....	.NO.....
8. Other health.....	.NO.....
9. Private flood.....	.NO.....
10. Private passenger auto.....	.NO.....
11. Short-term limited duration health plans.....	.NO.....
12. Travel	NO



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2024
(To Be Filed By March 1)

FOR THE STATE OF Delaware

NAIC Group Code 00588..... NAIC Company Code 71218.....

MCAS LINE OF BUSINESS	1 MCAS Reportable Premium/Considerations (YES/NO)
1. Disability income.....	.NO.....
2. Health.....	.NO.....
3. Homeowners.....	.NO.....
4. Individual annuity.....	.NO.....
5. Individual life.....	.YES.....
6. Lender-placed home and auto.....	.NO.....
7. Long-term care.....	.NO.....
8. Other health.....	.NO.....
9. Private flood.....	.NO.....
10. Private passenger auto.....	.NO.....
11. Short-term limited duration health plans.....	.NO.....
12. Travel	NO



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2024
(To Be Filed By March 1)

FOR THE STATE OF District of Columbia

NAIC Group Code 00588..... NAIC Company Code 71218.....

MCAS LINE OF BUSINESS	1 MCAS Reportable Premium/Considerations (YES/NO)
1. Disability income.....	.NO.....
2. Health.....	.NO.....
3. Homeowners.....	.NO.....
4. Individual annuity.....	.NO.....
5. Individual life.....	.YES.....
6. Lender-placed home and auto.....	.NO.....
7. Long-term care.....	.NO.....
8. Other health.....	.NO.....
9. Private flood.....	.NO.....
10. Private passenger auto.....	.NO.....
11. Short-term limited duration health plans.....	.NO.....
12. Travel	NO



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2024
(To Be Filed By March 1)

FOR THE STATE OF Florida

NAIC Group Code 00588..... NAIC Company Code 71218.....

MCAS LINE OF BUSINESS	1 MCAS Reportable Premium/Considerations (YES/NO)
1. Disability income.....	YES.....
2. Health.....	NO.....
3. Homeowners.....	NO.....
4. Individual annuity.....	NO.....
5. Individual life.....	YES.....
6. Lender-placed home and auto.....	NO.....
7. Long-term care.....	NO.....
8. Other health.....	NO.....
9. Private flood.....	NO.....
10. Private passenger auto.....	NO.....
11. Short-term limited duration health plans.....	NO.....
12. Travel	NO



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2024
(To Be Filed By March 1)

FOR THE STATE OF Georgia

NAIC Group Code 00588..... NAIC Company Code 71218.....

MCAS LINE OF BUSINESS	1 MCAS Reportable Premium/Considerations (YES/NO)
1. Disability income.....	YES.....
2. Health.....	NO.....
3. Homeowners.....	NO.....
4. Individual annuity.....	YES.....
5. Individual life.....	YES.....
6. Lender-placed home and auto.....	NO.....
7. Long-term care.....	NO.....
8. Other health.....	YES.....
9. Private flood.....	NO.....
10. Private passenger auto.....	NO.....
11. Short-term limited duration health plans.....	NO.....
12. Travel	NO



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2024
(To Be Filed By March 1)

FOR THE STATE OF Hawaii

NAIC Group Code 00588..... NAIC Company Code 71218.....

MCAS LINE OF BUSINESS	1 MCAS Reportable Premium/Considerations (YES/NO)
1. Disability income.....	.NO.....
2. Health.....	.NO.....
3. Homeowners.....	.NO.....
4. Individual annuity.....	.NO.....
5. Individual life.....	.YES.....
6. Lender-placed home and auto.....	.NO.....
7. Long-term care.....	.NO.....
8. Other health.....	.NO.....
9. Private flood.....	.NO.....
10. Private passenger auto.....	.NO.....
11. Short-term limited duration health plans.....	.NO.....
12. Travel	NO



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2024
(To Be Filed By March 1)

FOR THE STATE OF Idaho

NAIC Group Code 00588..... NAIC Company Code 71218.....

MCAS LINE OF BUSINESS	1 MCAS Reportable Premium/Considerations (YES/NO)
1. Disability income.....	.NO.....
2. Health.....	.NO.....
3. Homeowners.....	.NO.....
4. Individual annuity.....	.NO.....
5. Individual life.....	.YES.....
6. Lender-placed home and auto.....	.NO.....
7. Long-term care.....	.NO.....
8. Other health.....	.NO.....
9. Private flood.....	.NO.....
10. Private passenger auto.....	.NO.....
11. Short-term limited duration health plans.....	.NO.....
12. Travel	NO



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2024
(To Be Filed By March 1)

FOR THE STATE OF Illinois

NAIC Group Code 00588..... NAIC Company Code 71218.....

MCAS LINE OF BUSINESS	1 MCAS Reportable Premium/Considerations (YES/NO)
1. Disability income.....	YES.....
2. Health.....	NO.....
3. Homeowners.....	NO.....
4. Individual annuity.....	YES.....
5. Individual life.....	YES.....
6. Lender-placed home and auto.....	NO.....
7. Long-term care.....	NO.....
8. Other health.....	NO.....
9. Private flood.....	NO.....
10. Private passenger auto.....	NO.....
11. Short-term limited duration health plans.....	NO.....
12. Travel	NO



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2024
(To Be Filed By March 1)

FOR THE STATE OF Indiana

NAIC Group Code 00588..... NAIC Company Code 71218.....

MCAS LINE OF BUSINESS	1 MCAS Reportable Premium/Considerations (YES/NO)
1. Disability income.....	YES.....
2. Health.....	NO.....
3. Homeowners.....	NO.....
4. Individual annuity.....	YES.....
5. Individual life.....	YES.....
6. Lender-placed home and auto.....	NO.....
7. Long-term care.....	NO.....
8. Other health.....	NO.....
9. Private flood.....	NO.....
10. Private passenger auto.....	NO.....
11. Short-term limited duration health plans.....	NO.....
12. Travel	NO



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2024
(To Be Filed By March 1)

FOR THE STATE OF Iowa

NAIC Group Code 00588..... NAIC Company Code 71218.....

MCAS LINE OF BUSINESS	1 MCAS Reportable Premium/Considerations (YES/NO)
1. Disability income.....	.NO.....
2. Health.....	.NO.....
3. Homeowners.....	.NO.....
4. Individual annuity.....	.NO.....
5. Individual life.....	.YES.....
6. Lender-placed home and auto.....	.NO.....
7. Long-term care.....	.NO.....
8. Other health.....	.NO.....
9. Private flood.....	.NO.....
10. Private passenger auto.....	.NO.....
11. Short-term limited duration health plans.....	.NO.....
12. Travel	NO



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2024
(To Be Filed By March 1)

FOR THE STATE OF Kansas

NAIC Group Code 00588..... NAIC Company Code 71218.....

MCAS LINE OF BUSINESS	1 MCAS Reportable Premium/Considerations (YES/NO)
1. Disability income.....	NO.....
2. Health.....	NO.....
3. Homeowners.....	NO.....
4. Individual annuity.....	NO.....
5. Individual life.....	YES.....
6. Lender-placed home and auto.....	NO.....
7. Long-term care.....	NO.....
8. Other health.....	NO.....
9. Private flood.....	NO.....
10. Private passenger auto.....	NO.....
11. Short-term limited duration health plans.....	NO.....
12. Travel	NO



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2024
(To Be Filed By March 1)

FOR THE STATE OF Kentucky

NAIC Group Code 00588..... NAIC Company Code 71218.....

MCAS LINE OF BUSINESS	1 MCAS Reportable Premium/Considerations (YES/NO)
1. Disability income.....	YES.....
2. Health.....	NO.....
3. Homeowners.....	NO.....
4. Individual annuity.....	YES.....
5. Individual life.....	YES.....
6. Lender-placed home and auto.....	NO.....
7. Long-term care.....	NO.....
8. Other health.....	YES.....
9. Private flood.....	NO.....
10. Private passenger auto.....	NO.....
11. Short-term limited duration health plans.....	NO.....
12. Travel	NO



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2024
(To Be Filed By March 1)

FOR THE STATE OF Louisiana

NAIC Group Code 00588..... NAIC Company Code 71218.....

MCAS LINE OF BUSINESS	1 MCAS Reportable Premium/Considerations (YES/NO)
1. Disability income.....	.NO.....
2. Health.....	.NO.....
3. Homeowners.....	.NO.....
4. Individual annuity.....	.NO.....
5. Individual life.....	.YES.....
6. Lender-placed home and auto.....	.NO.....
7. Long-term care.....	.NO.....
8. Other health.....	.NO.....
9. Private flood.....	.NO.....
10. Private passenger auto.....	.NO.....
11. Short-term limited duration health plans.....	.NO.....
12. Travel	NO



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2024
(To Be Filed By March 1)

FOR THE STATE OF Maine

NAIC Group Code 00588..... NAIC Company Code 71218.....

MCAS LINE OF BUSINESS	1 MCAS Reportable Premium/Considerations (YES/NO)
1. Disability income.....	.NO.....
2. Health.....	.NO.....
3. Homeowners.....	.NO.....
4. Individual annuity.....	.NO.....
5. Individual life.....	.YES.....
6. Lender-placed home and auto.....	.NO.....
7. Long-term care.....	.NO.....
8. Other health.....	.NO.....
9. Private flood.....	.NO.....
10. Private passenger auto.....	.NO.....
11. Short-term limited duration health plans.....	.NO.....
12. Travel	NO



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2024
(To Be Filed By March 1)

FOR THE STATE OF Maryland

NAIC Group Code 00588..... NAIC Company Code 71218.....

MCAS LINE OF BUSINESS	1 MCAS Reportable Premium/Considerations (YES/NO)
1. Disability income.....	.NO.....
2. Health.....	.NO.....
3. Homeowners.....	.NO.....
4. Individual annuity.....	.NO.....
5. Individual life.....	.YES.....
6. Lender-placed home and auto.....	.NO.....
7. Long-term care.....	.NO.....
8. Other health.....	.NO.....
9. Private flood.....	.NO.....
10. Private passenger auto.....	.NO.....
11. Short-term limited duration health plans.....	.NO.....
12. Travel	NO



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2024
(To Be Filed By March 1)

FOR THE STATE OF Massachusetts

NAIC Group Code 00588..... NAIC Company Code 71218.....

MCAS LINE OF BUSINESS	1 MCAS Reportable Premium/Considerations (YES/NO)
1. Disability income.....	.NO.....
2. Health.....	.NO.....
3. Homeowners.....	.NO.....
4. Individual annuity.....	.NO.....
5. Individual life.....	.YES.....
6. Lender-placed home and auto.....	.NO.....
7. Long-term care.....	.NO.....
8. Other health.....	.NO.....
9. Private flood.....	.NO.....
10. Private passenger auto.....	.NO.....
11. Short-term limited duration health plans.....	.NO.....
12. Travel	NO



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2024
(To Be Filed By March 1)

FOR THE STATE OF Michigan

NAIC Group Code 00588..... NAIC Company Code 71218.....

MCAS LINE OF BUSINESS	1 MCAS Reportable Premium/Considerations (YES/NO)
1. Disability income.....	NO.....
2. Health.....	NO.....
3. Homeowners.....	NO.....
4. Individual annuity.....	YES.....
5. Individual life.....	YES.....
6. Lender-placed home and auto.....	NO.....
7. Long-term care.....	NO.....
8. Other health.....	NO.....
9. Private flood.....	NO.....
10. Private passenger auto.....	NO.....
11. Short-term limited duration health plans.....	NO.....
12. Travel	NO



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2024
(To Be Filed By March 1)

FOR THE STATE OF Minnesota

NAIC Group Code 00588.....

NAIC Company Code 71218.....

MCAS LINE OF BUSINESS	1 MCAS Reportable Premium/Considerations (YES/NO)
1. Disability income.....	NO.....
2. Health.....	NO.....
3. Homeowners.....	NO.....
4. Individual annuity.....	YES.....
5. Individual life.....	YES.....
6. Lender-placed home and auto.....	NO.....
7. Long-term care.....	NO.....
8. Other health.....	NO.....
9. Private flood.....	NO.....
10. Private passenger auto.....	NO.....
11. Short-term limited duration health plans.....	NO.....
12. Travel	NO



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2024
(To Be Filed By March 1)

FOR THE STATE OF Mississippi

NAIC Group Code 00588.....

NAIC Company Code 71218.....

MCAS LINE OF BUSINESS	1 MCAS Reportable Premium/Considerations (YES/NO)
1. Disability income.....	.NO.....
2. Health.....	.NO.....
3. Homeowners.....	.NO.....
4. Individual annuity.....	.NO.....
5. Individual life.....	.YES.....
6. Lender-placed home and auto.....	.NO.....
7. Long-term care.....	.NO.....
8. Other health.....	.NO.....
9. Private flood.....	.NO.....
10. Private passenger auto.....	.NO.....
11. Short-term limited duration health plans.....	.NO.....
12. Travel	NO



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2024
(To Be Filed By March 1)

FOR THE STATE OF Missouri

NAIC Group Code 00588.....

NAIC Company Code 71218.....

MCAS LINE OF BUSINESS	1 MCAS Reportable Premium/Considerations (YES/NO)
1. Disability income.....	.NO.....
2. Health.....	.NO.....
3. Homeowners.....	.NO.....
4. Individual annuity.....	.NO.....
5. Individual life.....	.YES.....
6. Lender-placed home and auto.....	.NO.....
7. Long-term care.....	.NO.....
8. Other health.....	.NO.....
9. Private flood.....	.NO.....
10. Private passenger auto.....	.NO.....
11. Short-term limited duration health plans.....	.NO.....
12. Travel	NO



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2024
(To Be Filed By March 1)

FOR THE STATE OF Montana

NAIC Group Code 00588..... NAIC Company Code 71218.....

MCAS LINE OF BUSINESS	1 MCAS Reportable Premium/Considerations (YES/NO)
1. Disability income.....	.NO.....
2. Health.....	.NO.....
3. Homeowners.....	.NO.....
4. Individual annuity.....	.NO.....
5. Individual life.....	.YES.....
6. Lender-placed home and auto.....	.NO.....
7. Long-term care.....	.NO.....
8. Other health.....	.NO.....
9. Private flood.....	.NO.....
10. Private passenger auto.....	.NO.....
11. Short-term limited duration health plans.....	.NO.....
12. Travel	NO



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2024
(To Be Filed By March 1)

FOR THE STATE OF Nebraska

NAIC Group Code 00588..... NAIC Company Code 71218.....

MCAS LINE OF BUSINESS	1 MCAS Reportable Premium/Considerations (YES/NO)
1. Disability income.....	.NO.....
2. Health.....	.NO.....
3. Homeowners.....	.NO.....
4. Individual annuity.....	.NO.....
5. Individual life.....	.YES.....
6. Lender-placed home and auto.....	.NO.....
7. Long-term care.....	.NO.....
8. Other health.....	.NO.....
9. Private flood.....	.NO.....
10. Private passenger auto.....	.NO.....
11. Short-term limited duration health plans.....	.NO.....
12. Travel	NO



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2024
(To Be Filed By March 1)

FOR THE STATE OF Nevada

NAIC Group Code 00588..... NAIC Company Code 71218.....

MCAS LINE OF BUSINESS	1 MCAS Reportable Premium/Considerations (YES/NO)
1. Disability income.....	.NO.....
2. Health.....	.NO.....
3. Homeowners.....	.NO.....
4. Individual annuity.....	.NO.....
5. Individual life.....	.YES.....
6. Lender-placed home and auto.....	.NO.....
7. Long-term care.....	.NO.....
8. Other health.....	.NO.....
9. Private flood.....	.NO.....
10. Private passenger auto.....	.NO.....
11. Short-term limited duration health plans.....	.NO.....
12. Travel	NO



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2024
(To Be Filed By March 1)

FOR THE STATE OF New Hampshire

NAIC Group Code 00588..... NAIC Company Code 71218.....

MCAS LINE OF BUSINESS	1 MCAS Reportable Premium/Considerations (YES/NO)
1. Disability income.....	.NO.....
2. Health.....	.NO.....
3. Homeowners.....	.NO.....
4. Individual annuity.....	.NO.....
5. Individual life.....	.YES.....
6. Lender-placed home and auto.....	.NO.....
7. Long-term care.....	.NO.....
8. Other health.....	.NO.....
9. Private flood.....	.NO.....
10. Private passenger auto.....	.NO.....
11. Short-term limited duration health plans.....	.NO.....
12. Travel	NO



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2024
(To Be Filed By March 1)

FOR THE STATE OF New Jersey

NAIC Group Code 00588..... NAIC Company Code 71218.....

MCAS LINE OF BUSINESS	1 MCAS Reportable Premium/Considerations (YES/NO)
1. Disability income.....	NO.....
2. Health.....	NO.....
3. Homeowners.....	NO.....
4. Individual annuity.....	NO.....
5. Individual life.....	YES.....
6. Lender-placed home and auto.....	NO.....
7. Long-term care.....	NO.....
8. Other health.....	NO.....
9. Private flood.....	NO.....
10. Private passenger auto.....	NO.....
11. Short-term limited duration health plans.....	NO.....
12. Travel	NO



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2024
(To Be Filed By March 1)

FOR THE STATE OF New Mexico

NAIC Group Code 00588..... NAIC Company Code 71218.....

MCAS LINE OF BUSINESS	1 MCAS Reportable Premium/Considerations (YES/NO)
1. Disability income.....	NO.....
2. Health.....	NO.....
3. Homeowners.....	NO.....
4. Individual annuity.....	NO.....
5. Individual life.....	YES.....
6. Lender-placed home and auto.....	NO.....
7. Long-term care.....	NO.....
8. Other health.....	NO.....
9. Private flood.....	NO.....
10. Private passenger auto.....	NO.....
11. Short-term limited duration health plans.....	NO.....
12. Travel	NO



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2024
(To Be Filed By March 1)

FOR THE STATE OF North Carolina

NAIC Group Code 00588..... NAIC Company Code 71218.....

MCAS LINE OF BUSINESS	1 MCAS Reportable Premium/Considerations (YES/NO)
1. Disability income.....	.NO.....
2. Health.....	.NO.....
3. Homeowners.....	.NO.....
4. Individual annuity.....	.NO.....
5. Individual life.....	.YES.....
6. Lender-placed home and auto.....	.NO.....
7. Long-term care.....	.NO.....
8. Other health.....	.YES.....
9. Private flood.....	.NO.....
10. Private passenger auto.....	.NO.....
11. Short-term limited duration health plans.....	.NO.....
12. Travel	NO



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2024
(To Be Filed By March 1)

FOR THE STATE OF Ohio

NAIC Group Code 00588..... NAIC Company Code 71218.....

MCAS LINE OF BUSINESS	1 MCAS Reportable Premium/Considerations (YES/NO)
1. Disability income.....	YES.....
2. Health.....	NO.....
3. Homeowners.....	NO.....
4. Individual annuity.....	YES.....
5. Individual life.....	YES.....
6. Lender-placed home and auto.....	NO.....
7. Long-term care.....	NO.....
8. Other health.....	YES.....
9. Private flood.....	NO.....
10. Private passenger auto.....	NO.....
11. Short-term limited duration health plans.....	NO.....
12. Travel	NO



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2024
(To Be Filed By March 1)

FOR THE STATE OF Oklahoma

NAIC Group Code 00588..... NAIC Company Code 71218.....

MCAS LINE OF BUSINESS	1 MCAS Reportable Premium/Considerations (YES/NO)
1. Disability income.....	.NO.....
2. Health.....	.NO.....
3. Homeowners.....	.NO.....
4. Individual annuity.....	.NO.....
5. Individual life.....	.YES.....
6. Lender-placed home and auto.....	.NO.....
7. Long-term care.....	.NO.....
8. Other health.....	.NO.....
9. Private flood.....	.NO.....
10. Private passenger auto.....	.NO.....
11. Short-term limited duration health plans.....	.NO.....
12. Travel	NO



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2024
(To Be Filed By March 1)

FOR THE STATE OF Oregon

NAIC Group Code 00588..... NAIC Company Code 71218.....

MCAS LINE OF BUSINESS	1 MCAS Reportable Premium/Considerations (YES/NO)
1. Disability income.....	NO.....
2. Health.....	NO.....
3. Homeowners.....	NO.....
4. Individual annuity.....	NO.....
5. Individual life.....	YES.....
6. Lender-placed home and auto.....	NO.....
7. Long-term care.....	NO.....
8. Other health.....	NO.....
9. Private flood.....	NO.....
10. Private passenger auto.....	NO.....
11. Short-term limited duration health plans.....	NO.....
12. Travel	NO



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2024
(To Be Filed By March 1)

FOR THE STATE OF Pennsylvania

NAIC Group Code 00588..... NAIC Company Code 71218.....

MCAS LINE OF BUSINESS	1 MCAS Reportable Premium/Considerations (YES/NO)
1. Disability income.....	NO.....
2. Health.....	NO.....
3. Homeowners.....	NO.....
4. Individual annuity.....	NO.....
5. Individual life.....	YES.....
6. Lender-placed home and auto.....	NO.....
7. Long-term care.....	NO.....
8. Other health.....	NO.....
9. Private flood.....	NO.....
10. Private passenger auto.....	NO.....
11. Short-term limited duration health plans.....	NO.....
12. Travel	NO



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2024
(To Be Filed By March 1)

FOR THE STATE OF Puerto Rico

NAIC Group Code 00588..... NAIC Company Code 71218.....

MCAS LINE OF BUSINESS	1 MCAS Reportable Premium/Considerations (YES/NO)
1. Disability income.....	.NO.....
2. Health.....	.NO.....
3. Homeowners.....	.NO.....
4. Individual annuity.....	.NO.....
5. Individual life.....	.YES.....
6. Lender-placed home and auto.....	.NO.....
7. Long-term care.....	.NO.....
8. Other health.....	.NO.....
9. Private flood.....	.NO.....
10. Private passenger auto.....	.NO.....
11. Short-term limited duration health plans.....	.NO.....
12. Travel	NO



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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(To Be Filed By March 1)

FOR THE STATE OF Rhode Island

NAIC Group Code 00588..... NAIC Company Code 71218.....

MCAS LINE OF BUSINESS	1 MCAS Reportable Premium/Considerations (YES/NO)
1. Disability income.....	.NO.....
2. Health.....	.NO.....
3. Homeowners.....	.NO.....
4. Individual annuity.....	.NO.....
5. Individual life.....	.YES.....
6. Lender-placed home and auto.....	.NO.....
7. Long-term care.....	.NO.....
8. Other health.....	.NO.....
9. Private flood.....	.NO.....
10. Private passenger auto.....	.NO.....
11. Short-term limited duration health plans.....	.NO.....
12. Travel	NO



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2024
(To Be Filed By March 1)

FOR THE STATE OF South Carolina

NAIC Group Code 00588..... NAIC Company Code 71218.....

MCAS LINE OF BUSINESS	1 MCAS Reportable Premium/Considerations (YES/NO)
1. Disability income.....	NO.....
2. Health.....	NO.....
3. Homeowners.....	NO.....
4. Individual annuity.....	YES.....
5. Individual life.....	YES.....
6. Lender-placed home and auto.....	NO.....
7. Long-term care.....	NO.....
8. Other health.....	NO.....
9. Private flood.....	NO.....
10. Private passenger auto.....	NO.....
11. Short-term limited duration health plans.....	NO.....
12. Travel	NO



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2024
(To Be Filed By March 1)

FOR THE STATE OF South Dakota

NAIC Group Code 00588..... NAIC Company Code 71218.....

MCAS LINE OF BUSINESS	1 MCAS Reportable Premium/Considerations (YES/NO)
1. Disability income.....	NO.....
2. Health.....	NO.....
3. Homeowners.....	NO.....
4. Individual annuity.....	NO.....
5. Individual life.....	YES.....
6. Lender-placed home and auto.....	NO.....
7. Long-term care.....	NO.....
8. Other health.....	NO.....
9. Private flood.....	NO.....
10. Private passenger auto.....	NO.....
11. Short-term limited duration health plans.....	NO.....
12. Travel	NO



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2024
(To Be Filed By March 1)

FOR THE STATE OF Tennessee

NAIC Group Code 00588.....

NAIC Company Code 71218.....

MCAS LINE OF BUSINESS	1 MCAS Reportable Premium/Considerations (YES/NO)
1. Disability income.....	YES.....
2. Health.....	NO.....
3. Homeowners.....	NO.....
4. Individual annuity.....	YES.....
5. Individual life.....	YES.....
6. Lender-placed home and auto.....	NO.....
7. Long-term care.....	NO.....
8. Other health.....	YES.....
9. Private flood.....	NO.....
10. Private passenger auto.....	NO.....
11. Short-term limited duration health plans.....	NO.....
12. Travel	NO



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2024
(To Be Filed By March 1)

FOR THE STATE OF Texas

NAIC Group Code 00588..... NAIC Company Code 71218.....

MCAS LINE OF BUSINESS	1 MCAS Reportable Premium/Considerations (YES/NO)
1. Disability income.....	.NO.....
2. Health.....	.NO.....
3. Homeowners.....	.NO.....
4. Individual annuity.....	.NO.....
5. Individual life.....	.YES.....
6. Lender-placed home and auto.....	.NO.....
7. Long-term care.....	.NO.....
8. Other health.....	.NO.....
9. Private flood.....	.NO.....
10. Private passenger auto.....	.NO.....
11. Short-term limited duration health plans.....	.NO.....
12. Travel	NO



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2024
(To Be Filed By March 1)

FOR THE STATE OF Utah

NAIC Group Code 00588..... NAIC Company Code 71218.....

MCAS LINE OF BUSINESS	1 MCAS Reportable Premium/Considerations (YES/NO)
1. Disability income.....	.NO.....
2. Health.....	.NO.....
3. Homeowners.....	.NO.....
4. Individual annuity.....	.NO.....
5. Individual life.....	.YES.....
6. Lender-placed home and auto.....	.NO.....
7. Long-term care.....	.NO.....
8. Other health.....	.NO.....
9. Private flood.....	.NO.....
10. Private passenger auto.....	.NO.....
11. Short-term limited duration health plans.....	.NO.....
12. Travel	NO



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2024
(To Be Filed By March 1)

FOR THE STATE OF Vermont

NAIC Group Code 00588.....

NAIC Company Code 71218.....

MCAS LINE OF BUSINESS	1 MCAS Reportable Premium/Considerations (YES/NO)
1. Disability income.....	.NO.....
2. Health.....	.NO.....
3. Homeowners.....	.NO.....
4. Individual annuity.....	.NO.....
5. Individual life.....	.YES.....
6. Lender-placed home and auto.....	.NO.....
7. Long-term care.....	.NO.....
8. Other health.....	.NO.....
9. Private flood.....	.NO.....
10. Private passenger auto.....	.NO.....
11. Short-term limited duration health plans.....	.NO.....
12. Travel	NO



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2024
(To Be Filed By March 1)

FOR THE STATE OF Virginia

NAIC Group Code 00588.....

NAIC Company Code 71218.....

MCAS LINE OF BUSINESS	1 MCAS Reportable Premium/Considerations (YES/NO)
1. Disability income.....	YES.....
2. Health.....	NO.....
3. Homeowners.....	NO.....
4. Individual annuity.....	YES.....
5. Individual life.....	YES.....
6. Lender-placed home and auto.....	NO.....
7. Long-term care.....	NO.....
8. Other health.....	NO.....
9. Private flood.....	NO.....
10. Private passenger auto.....	NO.....
11. Short-term limited duration health plans.....	NO.....
12. Travel	NO



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2024
(To Be Filed By March 1)

FOR THE STATE OF Washington

NAIC Group Code 00588..... NAIC Company Code 71218.....

MCAS LINE OF BUSINESS	1 MCAS Reportable Premium/Considerations (YES/NO)
1. Disability income.....	.NO.....
2. Health.....	.NO.....
3. Homeowners.....	.NO.....
4. Individual annuity.....	.NO.....
5. Individual life.....	.YES.....
6. Lender-placed home and auto.....	.NO.....
7. Long-term care.....	.NO.....
8. Other health.....	.NO.....
9. Private flood.....	.NO.....
10. Private passenger auto.....	.NO.....
11. Short-term limited duration health plans.....	.NO.....
12. Travel	NO



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2024
(To Be Filed By March 1)

FOR THE STATE OF West Virginia

NAIC Group Code 00588..... NAIC Company Code 71218.....

MCAS LINE OF BUSINESS	1 MCAS Reportable Premium/Considerations (YES/NO)
1. Disability income.....	YES.....
2. Health.....	NO.....
3. Homeowners.....	NO.....
4. Individual annuity.....	YES.....
5. Individual life.....	YES.....
6. Lender-placed home and auto.....	NO.....
7. Long-term care.....	NO.....
8. Other health.....	NO.....
9. Private flood.....	NO.....
10. Private passenger auto.....	NO.....
11. Short-term limited duration health plans.....	NO.....
12. Travel	NO



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2024
(To Be Filed By March 1)

FOR THE STATE OF Wisconsin

NAIC Group Code 00588..... NAIC Company Code 71218.....

MCAS LINE OF BUSINESS	1 MCAS Reportable Premium/Considerations (YES/NO)
1. Disability income.....	.NO.....
2. Health.....	.NO.....
3. Homeowners.....	.NO.....
4. Individual annuity.....	.NO.....
5. Individual life.....	.YES.....
6. Lender-placed home and auto.....	.NO.....
7. Long-term care.....	.NO.....
8. Other health.....	.NO.....
9. Private flood.....	.NO.....
10. Private passenger auto.....	.NO.....
11. Short-term limited duration health plans.....	.NO.....
12. Travel	NO



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Grange Life Insurance Company

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2024
(To Be Filed By March 1)

FOR THE STATE OF Wyoming

NAIC Group Code 00588.....

NAIC Company Code 71218.....

MCAS LINE OF BUSINESS	1 MCAS Reportable Premium/Considerations (YES/NO)
1. Disability income.....	NO.....
2. Health.....	NO.....
3. Homeowners.....	NO.....
4. Individual annuity.....	NO.....
5. Individual life.....	YES.....
6. Lender-placed home and auto.....	NO.....
7. Long-term care.....	NO.....
8. Other health.....	NO.....
9. Private flood.....	NO.....
10. Private passenger auto.....	NO.....
11. Short-term limited duration health plans.....	NO.....
12. Travel	NO