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

ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2025

OF THE CONDITION AND AFFAIRS OF THE

MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

NAIC Group Code 0435 (Current) 0435 (Prior) NAIC Company Code 63312 Employer's ID Number 13-1935920

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

Country of Domicile United States of America

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

Incorporated/Organized 12/29/1961 Commenced Business 08/13/1963

Statutory Home Office 191 Rosa Parks Street (Street and Number), Cincinnati, OH, US 45202 (City or Town, State, Country and Zip Code)

Main Administrative Office 191 Rosa Parks Street (Street and Number)

Cincinnati, OH, US 45202 (City or Town, State, Country and Zip Code), 513-361-9000 (Area Code) (Telephone Number)

Mail Address Post Office Box 5420 (Street and Number or P.O. Box), Cincinnati, OH, US 45201 (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 191 Rosa Parks Street (Street and Number)

Cincinnati, OH, US 45202 (City or Town, State, Country and Zip Code), 513-361-9000 (Area Code) (Telephone Number)

Internet Website Address www.massmutualascend.com

Statutory Statement Contact Robert Mayhew Earle II (Name), 513-361-9077 (Area Code) (Telephone Number)

rearle@mmascend.com (E-mail Address), 513-345-9484 (FAX Number)

OFFICERS

President	Dominic Lusean Blue #	Treasurer	Brian Patrick Sponaugle
Secretary	John Paul Gruber	Appointed Actuary	Isaac Cezar Hall

OTHER

Donna Marie Carrelli	Michael Harrison Haney	

DIRECTORS OR TRUSTEES

Dominic Lusean Blue	Susan Marie Cicco	Geoffrey James Craddock
Roger William Crandall	Mary Jane Fortin #	Vy Ho
Paul Anthony LaPiana	Sears Andrew Merritt	Michael James O'Connor
Eric William Partlan		

State of Ohio
County of Hamilton 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.

Dominic Lusean Blue	John Paul Gruber	Brian Patrick Sponaugle
President	Secretary	Treasurer

Subscribed and sworn to before me this
_____ day of February 2026

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.....

OFFICERS AND DIRECTORS WHO DID NOT OCCUPY THE INDICATED POSITION IN THE PREVIOUS ANNUAL STATEMENT

LIFE INSURANCE (STATE PAGE)(b)

NAIC Group Code 0435 BUSINESS IN THE STATE OF Alabama DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 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)	Claims and Benefits Paid: 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	15,770						0	4,813	0	593		5,406
3. Term	83,802						0	100,000	0	0		100,000
4. Indexed							0					0
5. Universal	29,203						0	0	0	8,005		8,005
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	128,775	0	0	0	0	0	0	104,813	0	8,599	0	113,412
Group Life												
12. Whole	0						0	0	0	0		0
13. Term							0	0	0	0		0
14. Universal							0	0	0	0		0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	59,211,788						0	19,220,445		57,675,455		76,895,901
21. Indexed	138,543,932						0	16,488,917		94,418,915		110,907,831
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	313,230		0		313,230
25. Other							0					0
26. Total individual annuities	197,755,720	0	0	0	0	0	0	36,022,592	0	152,094,370	0	188,116,962
Group Annuities												
27. Fixed	2,847						0	0		73,867		73,867
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout	0						0	793,621		0		793,621
32. Other							0					0
33. Total group annuities	2,847	0	0	0	0	0	0	793,621	0	73,867	0	867,488
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	13,054 (f)						0	XXX	XXX	XXX	13,875	13,875
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	0 (f)						0	XXX	XXX	XXX	0	0
44. Long-term care (d)	13,795 (f)						0	XXX	XXX	XXX	0	0
45. Other health (d)	0 (f)						0	XXX	XXX	XXX	0	0
46. Total accident and health	26,849	0	0	0	0	0	0	XXX	XXX	XXX	13,875	13,875
47. Total	197,914,191 (c)	0	0	0	0	0	0	36,921,026	0	152,176,835	13,875	189,111,737

LIFE INSURANCE (STATE PAGE) (Continued)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Alabama DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year								22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life																
1. Industrial								0	0							
2. Whole	3,813	2	4,813	0	0	0	0	2	4,813	0	0	0	(8)	(27,506)	22	226,135
3. Term	(1,000,000)	1	100,000	0	0	0	0	1	100,000	0	0	0	(6)	(725,000)	79	22,106,200
4. Indexed								0	0							
5. Universal	0	0	0	0	0	0	0	0	0	0	0	0	3	491,311	42	4,933,827
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	(996,187)	3	104,813	0	0	0	0	3	104,813	0	0	0	(11)	(261,195)	143	27,266,162
Group Life																
12. Whole	0	0	0	0	0	0		0	0	0	0	0	(7)	(33,289)	0	0
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	(7)	(33,289)	0	0
Individual Annuities																
20. Fixed	15,817,399	195	18,049,224					195	18,049,224	3,189,098	355	56,454,198	(691)	(56,338,416)	3,890	415,407,597
21. Indexed	15,670,490	130	16,364,456					130	16,364,456	2,081,899	999	140,767,333	(789)	(70,939,371)	5,460	744,074,649
22. Variable with guarantees								0	0							
23. Variable without guarantees								0	0							
24. Life contingent payout	185,148	4	185,148					4	185,148		15	1,496,864	(7)	(379,531)	57	2,611,913
25. Other								0	0		8	778,165	(5)	(799,318)	64	3,406,704
26. Total individual annuities	31,673,036	329	34,598,828	0	0	0	0	329	34,598,828	5,270,997	1,377	199,496,560	(1,492)	(128,456,637)	9,471	1,165,500,863
Group Annuities																
27. Fixed	0	0	0					0	0	0	0	0	(4)	(326,484)	82	1,438,542
28. Indexed								0	0							
29. Variable with guarantees								0	0							
30. Variable without guarantees								0	0							
31. Life contingent payout	0	0	0					0	0	0	0	0	(6)	(390,470)	181	8,931,694
32. Other								0	0		0	0	0	0	0	0
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0	(10)	(716,954)	263	10,370,237
Accident and Health																
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)	13,721	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			(1)	(4,109)	2	13,054
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
44. Long-term care (d)	281	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	1,030	6	13,817
45. Other health (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
46. Total accident and health	14,002	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	(1)	(3,079)	8	26,871
47. Total	30,690,851	332	34,703,641	0	0	0	0	332	34,703,641	5,270,997	1,377	199,496,560	(1,521)	(129,471,153)	9,885	1,203,164,133

(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: $ .....0 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 $ .....

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ ..... 13,066 ; Vision Only $ ..... ; Dental Only $ ..... ; Federal Employees Health Benefits Plan $ .....
Title XVIII Medicare $ ..... ; Title XIX Medicaid $ ..... ; Credit A&H $ ..... ; Disability Income $ .....0 ; Long-term Care $ ..... 13,543 ; Other Health $ 0

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Alaska DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 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)	Claims and Benefits Paid: 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	0	0	0		0
3. Term	324						0	100,000	0	0		100,000
4. Indexed							0					0
5. Universal	4,173						0	0	0	0		0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	4,497	0	0	0	0	0	0	100,000	0	0	0	100,000
Group Life												
12. Whole	0						0	0	0	0		0
13. Term							0	0	0	0		0
14. Universal							0	0	0	0		0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	2,698,274						0	1,153,254		208,348		1,361,601
21. Indexed	1,080,088						0	888,644		1,791,887		2,680,531
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	34,645		0		34,645
25. Other							0					0
26. Total individual annuities	3,778,362	0	0	0	0	0	0	2,076,542	0	2,000,235	0	4,076,777
Group Annuities												
27. Fixed	0						0	0		0		0
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout	0						0	28,757		0		28,757
32. Other							0					0
33. Total group annuities	0	0	0	0	0	0	0	28,757	0	0	0	28,757
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	0 (f)						0	XXX	XXX	XXX	0	0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	0 (f)						0	XXX	XXX	XXX	0	0
44. Long-term care (d)	0 (f)						0	XXX	XXX	XXX	0	0
45. Other health (d)	0 (f)						0	XXX	XXX	XXX	0	0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	3,782,859 (c)	0	0	0	0	0	0	2,205,299	0	2,000,235	0	4,205,534

LIFE INSURANCE (STATE PAGE) (Continued)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Alaska DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year								22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life																
1. Industrial								0	0							
2. Whole	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	11,842
3. Term	100,000	1	100,000	0	0	0	0	1	100,000	0	0	0	(1)	(100,000)	3	700,000
4. Indexed								0	0							
5. Universal	0	0	0	0	0	0	0	0	0	0	0	0	(4)	(372,570)	7	573,804
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	100,000	1	100,000	0	0	0	0	1	100,000	0	0	0	(5)	(472,570)	12	1,285,646
Group Life																
12. Whole	0	0	0					0	0	0	0	0	1	5,166	1	5,166
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	1	5,166	1	5,166
Individual Annuities																
20. Fixed	957,269	4	957,269					4	957,269	0	6	2,231,464	(1)	641,119	61	9,156,403
21. Indexed	682,415	2	682,415					2	682,415	0	4	654,283	(16)	546,097	70	12,678,975
22. Variable with guarantees								0	0							
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0					0	0		0	0	0	(12,542)	3	204,661
25. Other								0	0		2	268,330	0	(100,367)	13	692,898
26. Total individual annuities	1,639,683	6	1,639,683	0	0	0	0	6	1,639,683	0	12	3,154,076	(17)	1,074,308	147	22,732,938
Group Annuities																
27. Fixed	0	0	0					0	0	0	0	0	(1)	(14,192)	6	25,584
28. Indexed								0	0							
29. Variable with guarantees								0	0							
30. Variable without guarantees								0	0							
31. Life contingent payout	0	0	0					0	0		0	0	(1)	(16,636)	8	352,826
32. Other								0	0		0	0	0	0	0	0
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0	(2)	(30,828)	14	378,411
Accident and Health																
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
44. Long-term care (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
45. Other health (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
46. Total accident and health	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	1,739,683	7	1,739,683	0	0	0	0	7	1,739,683	0	12	3,154,076	(23)	576,076	174	24,402,160

(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: $ .....0 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 $ .....

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ .....0 ; Vision Only $ ..... ; Dental Only $ ..... ; Federal Employees Health Benefits Plan $ .....
Title XVIII Medicare $ ..... ; Title XIX Medicaid $ ..... ; Credit A&H $ ..... ; Disability Income $ .....0 ; Long-term Care $ .....0 ; Other Health $ 0

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Arizona DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 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)	Claims and Benefits Paid: 8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole	12,069						0	32,386	797	0		33,183
3. Term	235,321						0	0	0	0		0
4. Indexed							0					0
5. Universal	141,454						0	227,000	0	70,769		297,769
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	388,844	0	0	0	0	0	0	259,386	797	70,769	0	330,952
Group Life												
12. Whole	0						0	0	0	0		0
13. Term							0	0	0	0		0
14. Universal							0	0	0	0		0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	55,106,443						0	14,014,338		26,282,775		40,297,114
21. Indexed	100,497,715						0	15,253,927		106,835,881		122,089,807
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout	60,628						0	737,692		0		737,692
25. Other							0					0
26. Total individual annuities	155,664,786	0	0	0	0	0	0	30,005,957	0	133,118,656	0	163,124,613
Group Annuities												
27. Fixed	27,390						0	108,320		929,158		1,037,477
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout	0						0	1,125,642		0		1,125,642
32. Other							0					0
33. Total group annuities	27,390	0	0	0	0	0	0	1,233,961	0	929,158	0	2,163,119
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	8,019 (f)						0	XXX	XXX	XXX	3,701	3,701
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	0 (f)						0	XXX	XXX	XXX	0	0
44. Long-term care (d)	14,303 (f)						0	XXX	XXX	XXX	0	0
45. Other health (d)	25 (f)						0	XXX	XXX	XXX	0	0
46. Total accident and health	22,347	0	0	0	0	0	0	XXX	XXX	XXX	3,701	3,701
47. Total	156,103,367 (c)	0	0	0	0	0	0	31,499,304	797	134,118,583	3,701	165,622,385

LIFE INSURANCE (STATE PAGE) (Continued)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Arizona DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year								22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life																
1. Industrial								0	0							
2. Whole	46,762	6	33,183	0	0	0	0	6	33,183	15,000	0	0	(39)	(92,897)	24	408,056
3. Term	0	0	0	0	0	0	0	0	0	0	0	0	(13)	(4,631,000)	178	45,129,000
4. Indexed								0	0							
5. Universal	126,000	3	227,000	0	0	0	0	3	227,000	0	0	0	(7)	(481,478)	141	20,791,793
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	172,762	9	260,183	0	0	0	0	9	260,183	15,000	0	0	(59)	(5,205,375)	343	66,328,850
Group Life																
12. Whole	0	0	0					0	0	0	0	0	(10)	(16,195)	0	0
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	(10)	(16,195)	0	0
Individual Annuities																
20. Fixed	10,937,169	69	11,426,669					69	11,426,669	2,053,718	284	57,216,290	(228)	(29,926,468)	2,127	284,147,438
21. Indexed	11,445,920	114	14,586,148					114	14,586,148	1,701,835	555	94,096,333	(741)	(71,237,769)	4,362	648,621,201
22. Variable with guarantees								0	0							
23. Variable without guarantees								0	0							
24. Life contingent payout	134,160	2	134,160					2	134,160		6	236,016	(5)	(346,762)	108	3,818,512
25. Other								0	0		31	1,883,589	(22)	(2,067,857)	171	7,187,544
26. Total individual annuities	22,517,249	185	26,146,977	0	0	0	0	185	26,146,977	3,755,553	876	153,432,228	(996)	(103,578,857)	6,768	943,774,695
Group Annuities																
27. Fixed	108,320	5	108,320					5	108,320	0	0	0	(45)	(666,531)	520	11,754,744
28. Indexed								0	0							
29. Variable with guarantees								0	0							
30. Variable without guarantees								0	0							
31. Life contingent payout	0	0	0					0	0		0	0	(8)	(592,595)	391	14,468,820
32. Other								0	0		0	0	0	0	0	0
33. Total group annuities	108,320	5	108,320	0	0	0	0	5	108,320	0	0	0	(53)	(1,259,126)	911	26,223,563
Accident and Health																
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)	3,912	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	593	1	8,019
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
44. Long-term care (d)	287	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	992	6	14,303
45. Other health (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	1	25
46. Total accident and health	4,199	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	1,585	8	22,347
47. Total	22,802,529	199	26,515,479	0	0	0	0	199	26,515,479	3,770,553	876	153,432,228	(1,118)	(110,057,967)	8,030	1,036,349,455

(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: $ ..... 64,543 Group: $ ..... Total: $ 64,543

(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 $ .....

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ ..... 8,018 ; Vision Only $ ..... ; Dental Only $ ..... ; Federal Employees Health Benefits Plan $ .....
Title XVIII Medicare $ ..... ; Title XIX Medicaid $ ..... ; Credit A&H $ ..... ; Disability Income $ ..... 0 ; Long-term Care $ ..... 13,447 ; Other Health $ 0

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Arkansas DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 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)	Claims and Benefits Paid: 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	9,147						0	816	0	0		816
3. Term	91,547						0	100,000	0	0		100,000
4. Indexed							0					0
5. Universal	29,598						0	0	0	8,573		8,573
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	130,292	0	0	0	0	0	0	100,816	0	8,573	0	109,389
Group Life												
12. Whole	0						0	79,421	0	0		79,421
13. Term							0	0	0	0		0
14. Universal							0	0	0	0		0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	79,421	0	0	0	79,421
Individual Annuities												
20. Fixed	16,823,351						0	3,701,465		7,469,767		11,171,232
21. Indexed	47,455,137						0	4,825,638		37,231,084		42,056,722
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	130,402		0		130,402
25. Other							0					0
26. Total individual annuities	64,278,488	0	0	0	0	0	0	8,657,505	0	44,700,851	0	53,358,356
Group Annuities												
27. Fixed	600						0	19,274		49,426		68,700
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout	151,199						0	511,706		0		511,706
32. Other							0					0
33. Total group annuities	151,799	0	0	0	0	0	0	530,981	0	49,426	0	580,406
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	0 (f)						0	XXX	XXX	XXX	0	0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	0 (f)						0	XXX	XXX	XXX	0	0
44. Long-term care (d)	1,348 (f)						0	XXX	XXX	XXX	0	0
45. Other health (d)	0 (f)						0	XXX	XXX	XXX	0	0
46. Total accident and health	1,348	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	64,561,927 (c)	0	0	0	0	0	0	9,368,723	0	44,758,849	0	54,127,572

LIFE INSURANCE (STATE PAGE) (Continued)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Arkansas DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole	816	1	816	0	0	0	0	1	816	0	0	0	(5)	(4,772)	12	169,926
3. Term	100,000	1	100,000	0	0	0	0	1	100,000	0	0	0	(6)	(1,700,000)	63	11,631,000
4. Indexed								0	0							
5. Universal	0	0	0	0	0	0	0	0	0	0	0	0	(3)	(384,368)	37	4,345,876
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	100,816	2	100,816	0	0	0	0	2	100,816	0	0	0	(14)	(2,089,140)	112	16,146,801
Group Life															
12. Whole	79,421	21	79,421					21	79,421	0	0	0	(170)	(762,046)	0	0
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	79,421	21	79,421	0	0	0	0	21	79,421	0	0	0	(170)	(762,046)	0	0
Individual Annuities															
20. Fixed	3,733,964	43	3,058,691					43	3,058,691	1,289,528	112	17,344,721	(136)	(7,584,424)	1,092	95,115,785
21. Indexed	5,026,114	37	4,740,232					37	4,740,232	1,325,217	293	45,904,193	(259)	(26,272,985)	1,924	277,792,144
22. Variable with guarantees								0	0							
23. Variable without guarantees								0	0							
24. Life contingent payout	5,284	1	5,284					1	5,284		3	224,178	(3)	(88,649)	11	1,130,980
25. Other								0	0		3	192,224	(5)	(487,567)	38	2,151,133
26. Total individual annuities	8,765,362	81	7,804,206	0	0	0	0	81	7,804,206	2,614,745	411	63,665,317	(403)	(34,433,625)	3,065	376,190,042
Group Annuities															
27. Fixed	11,144	1	11,144					1	11,144	0	0	0	(3)	24,464	42	666,388
28. Indexed								0	0							
29. Variable with guarantees								0	0							
30. Variable without guarantees								0	0							
31. Life contingent payout	0	0	0					0	0		0	0	(1)	(88,311)	167	5,901,366
32. Other								0	0		0	0	0	(4,336)	2	2,561
33. Total group annuities	11,144	1	11,144	0	0	0	0	1	11,144	0	0	0	(4)	(68,183)	211	6,570,314
Accident and Health															
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
44. Long-term care (d)	19	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			(1)	0	3	1,348
45. Other health (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
46. Total accident and health	19	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	(1)	0	3	1,348
47. Total	8,956,761	105	7,995,587	0	0	0	0	105	7,995,587	2,614,745	411	63,665,317	(592)	(37,352,993)	3,391	398,908,505

(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: $ .....0 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 $ .....

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ .....0 ; Vision Only $ ..... ; Dental Only $ ..... ; Federal Employees Health Benefits Plan $ .....
Title XVIII Medicare $ ..... ; Title XIX Medicaid $ ..... ; Credit A&H $ ..... ; Disability Income $ .....0 ; Long-term Care $ .....1,348 ; Other Health $ 0

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF California DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 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)	Claims and Benefits Paid: 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	130,916						0	70,126	525	13,501		84,152
3. Term	2,254,139						0	1,531,536	0	34,798		1,566,334
4. Indexed							0					0
5. Universal	1,566,032						0	3,120,378	0	542,795		3,663,174
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	3,951,087	0	0	0	0	0	0	4,722,040	525	591,094	0	5,313,660
Group Life												
12. Whole	0						0	7,922	0	0		7,922
13. Term							0	1,078	0	0		1,078
14. Universal							0	0	0	0		0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	9,000	0	0	0	9,000
Individual Annuities												
20. Fixed	656,064,343						0	58,477,469		160,813,961		219,291,430
21. Indexed	498,866,001						0	58,116,323		360,392,329		418,508,653
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout	181,884						0	4,147,835		26,071		4,173,906
25. Other							0					0
26. Total individual annuities	1,155,112,228	0	0	0	0	0	0	120,741,628	0	521,232,361	0	641,973,989
Group Annuities												
27. Fixed	1,318,735						0	2,158,436		16,453,338		18,611,773
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout	16,066						0	3,839,213		7,565		3,846,778
32. Other							0					0
33. Total group annuities	1,334,801	0	0	0	0	0	0	5,997,649	0	16,460,902	0	22,458,551
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	9,555 (f)						0	XXX	XXX	XXX	7	7
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	(14)(f)						0	XXX	XXX	XXX	6,256	6,256
44. Long-term care (d)	11,098 (f)						0	XXX	XXX	XXX	8,521	8,521
45. Other health (d)	148 (f)						0	XXX	XXX	XXX	115	115
46. Total accident and health	20,787	0	0	0	0	0	0	XXX	XXX	XXX	14,899	14,899
47. Total	1,160,418,903 (c)	0	0	0	0	0	0	131,470,316	525	538,284,357	14,899	669,770,097

LIFE INSURANCE (STATE PAGE) (Continued)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF California DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole	115,684	12	80,765	0	0	0	0	12	80,765	37,940	0	0	(65)	(708,001)	310	6,566,513
3. Term	2,072,500	10	1,522,500	0	0	0	0	10	1,522,500	650,000	0	5,000	(77)	(19,610,500)	1,950	539,506,240
4. Indexed								0	0						
5. Universal	3,220,378	28	3,120,378	0	0	0	0	28	3,120,378	300,000	0	10,000	(79)	(10,539,143)	1,753	283,637,375
6. Universal with secondary guarantees								0	0						
7. Variable								0	0						
8. Variable universal								0	0						
9. Credit								0	0						
10. Other								0	0						
11. Total individual life	5,408,563	50	4,723,643	0	0	0	0	50	4,723,643	987,940	0	15,000	(221)	(30,857,644)	4,013	829,710,128
Group Life															
12. Whole	7,922	1	7,922					1	7,922	0	0	0	(6)	(24,896)	0	0
13. Term								0	0						
14. Universal								0	0						
15. Variable								0	0						
16. Variable universal								0	0						
17. Credit								0	0						(a)
18. Other								0	0						
19. Total group life	7,922	1	7,922	0	0	0	0	1	7,922	0	0	0	(6)	(24,896)	0	0
Individual Annuities															
20. Fixed	40,373,247	372	42,330,155					372	42,330,155	11,610,403	3,182	713,571,884	(1,687)	(169,170,514)	18,402	2,577,541,381
21. Indexed	53,891,746	352	56,374,497					352	56,374,497	14,802,452	2,690	541,285,751	(2,594)	(290,868,334)	17,536	2,757,814,423
22. Variable with guarantees								0	0						
23. Variable without guarantees								0	0						
24. Life contingent payout	391,206	14	391,206					14	391,206		41	2,877,572	(36)	(2,354,660)	619	27,907,566
25. Other								0	0		219	13,668,048	(246)	(12,330,354)	1,178	45,657,757
26. Total individual annuities	94,656,199	738	99,095,857	0	0	0	0	738	99,095,857	26,412,856	6,132	1,271,403,254	(4,563)	(474,723,862)	37,735	5,408,921,126
Group Annuities															
27. Fixed	2,177,533	65	2,158,436					65	2,158,436	733,077	0	0	(474)	(10,915,620)	6,586	186,926,899
28. Indexed								0	0						
29. Variable with guarantees								0	0						
30. Variable without guarantees								0	0						
31. Life contingent payout	0	0	0					0	0		0	0	(32)	(2,251,538)	1,723	53,417,884
32. Other								0	0		0	0	0	(10,132)	1	159,298
33. Total group annuities	2,177,533	65	2,158,436	0	0	0	0	65	2,158,436	733,077	0	0	(506)	(13,177,291)	8,310	240,504,080
Accident and Health															
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)	273	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	779	1	8,924
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)	11,643	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			(1)	(359)	2	(14)
44. Long-term care (d)	43,224	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			(2)	204	5	10,941
45. Other health (d)	116	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	2	149
46. Total accident and health	55,256	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	(3)	624	10	20,000
47. Total	102,305,473	854	105,985,858	0	0	0	0	854	105,985,858	28,133,873	6,132	1,271,418,254	(5,299)	(518,783,069)	50,068	6,479,155,335

(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: $ 361,260 Group: $ ..... Total: $ 361,260

(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 $ .....

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ 8,903 ; Vision Only $ ..... ; Dental Only $ ..... ; Federal Employees Health Benefits Plan $ .....
Title XVIII Medicare $ ..... ; Title XIX Medicaid $ ..... ; Credit A&H $ ..... ; Disability Income $ 119 ; Long-term Care $ 10,039 ; Other Health $ 115

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Colorado DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 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)	Claims and Benefits Paid: 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	3,947						0	0	0	0		0
3. Term	114,489						0	0	0	0		0
4. Indexed							0					0
5. Universal	48,636						0	281,654	0	29,522		311,176
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	167,072	0	0	0	0	0	0	281,654	0	29,522	0	311,176
Group Life												
12. Whole	0						0	62,527	0	0		62,527
13. Term							0	0	0	0		0
14. Universal							0	0	0	0		0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	62,527	0	0	0	62,527
Individual Annuities												
20. Fixed	45,751,942						0	8,747,269		12,869,506		21,616,775
21. Indexed	68,210,246						0	9,155,479		50,774,981		59,930,460
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	486,685		0		486,685
25. Other							0					0
26. Total individual annuities	113,962,188	0	0	0	0	0	0	18,389,433	0	63,644,487	0	82,033,920
Group Annuities												
27. Fixed	0						0	82,660		230,448		313,109
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout	6,377						0	411,423		39,249		450,672
32. Other							0					0
33. Total group annuities	6,377	0	0	0	0	0	0	494,084	0	269,697	0	763,781
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	5,746 (f)						0	XXX	XXX	XXX	1,739	1,739
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	0 (f)						0	XXX	XXX	XXX	0	0
44. Long-term care (d)	69,296 (f)						0	XXX	XXX	XXX	373,799	373,799
45. Other health (d)	0 (f)						0	XXX	XXX	XXX	0	0
46. Total accident and health	75,042	0	0	0	0	0	0	XXX	XXX	XXX	375,538	375,538
47. Total	114,210,679 (c)	0	0	0	0	0	0	19,227,698	0	63,943,706	375,538	83,546,942

LIFE INSURANCE (STATE PAGE) (Continued)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Colorado DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole	0	0	0	0	0	0	0	0	0	0	0	0	(8)	(16,142)	10	88,538
3. Term	0	0	0	0	0	0	0	0	0	0	0	0	0	(48,000)	99	25,663,001
4. Indexed								0	0							
5. Universal	281,654	3	281,654	0	0	0	0	3	281,654	0	0	0	(5)	(481,712)	49	7,032,961
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	281,654	3	281,654	0	0	0	0	3	281,654	0	0	0	(13)	(545,854)	158	32,784,499
Group Life															
12. Whole	62,527	17	62,527					17	62,527	0	0	0	25	75,442	151	578,642
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	62,527	17	62,527	0	0	0	0	17	62,527	0	0	0	25	75,442	151	578,642
Individual Annuities															
20. Fixed	6,675,671	35	5,885,734					35	5,885,734	868,639	254	50,758,894	(102)	(13,820,832)	1,072	177,452,374
21. Indexed	9,916,328	70	8,980,553					70	8,980,553	2,624,660	360	68,588,275	(382)	(31,139,998)	2,612	412,042,104
22. Variable with guarantees								0	0							
23. Variable without guarantees								0	0							
24. Life contingent payout	62,281	3	62,281					3	62,281		8	940,427	(7)	(393,090)	45	3,248,669
25. Other								0	0		13	1,226,108	(23)	(2,086,327)	132	6,133,942
26. Total individual annuities	16,654,280	108	14,928,569	0	0	0	0	108	14,928,569	3,493,299	635	121,513,704	(514)	(47,440,247)	3,861	598,877,089
Group Annuities															
27. Fixed	82,660	2	82,660					2	82,660	0	0	0	(3)	(210,482)	207	3,041,922
28. Indexed								0	0							
29. Variable with guarantees								0	0							
30. Variable without guarantees								0	0							
31. Life contingent payout	0	0	0					0	0		0	0	(13)	(353,685)	170	5,676,168
32. Other								0	0		0	0	0	0	0	0
33. Total group annuities	82,660	2	82,660	0	0	0	0	2	82,660	0	0	0	(16)	(564,167)	377	8,718,090
Accident and Health															
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)	1,931	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	359	1	5,746
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
44. Long-term care (d)	85,883	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			(4)	(7,648)	44	92,321
45. Other health (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
46. Total accident and health	87,815	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	(4)	(7,289)	45	98,067
47. Total	17,168,936	130	15,355,410	0	0	0	0	130	15,355,410	3,493,299	635	121,513,704	(522)	(48,482,115)	4,592	641,056,388

(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: $ 327,409 Group: $ ..... Total: $ 327,409

(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 $ .....

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ 5,744 ; Vision Only $ ..... ; Dental Only $ ..... ; Federal Employees Health Benefits Plan $ .....
Title XVIII Medicare $ ..... ; Title XIX Medicaid $ ..... ; Credit A&H $ ..... ; Disability Income $ 0 ; Long-term Care $ 96,246 ; Other Health $ 0

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Connecticut DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 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)	Claims and Benefits Paid: 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	32,218						0	52,317	1,288	15,827		69,432
3. Term	201,352						0	0	0	17,891		17,891
4. Indexed							0					0
5. Universal	34,810						0	104,000	0	22,479		126,479
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	268,380	0	0	0	0	0	0	156,317	1,288	56,196	0	213,801
Group Life												
12. Whole	0						0	201,598	3,992	0		205,590
13. Term							0	254	0	0		254
14. Universal							0	0	0	0		0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	201,852	3,992	0	0	205,844
Individual Annuities												
20. Fixed	52,903,246						0	11,119,438		31,104,840		42,224,278
21. Indexed	134,637,691						0	9,594,488		94,052,711		103,647,199
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	2,324,285		16,329		2,340,614
25. Other							0					0
26. Total individual annuities	187,540,937	0	0	0	0	0	0	23,038,211	0	125,173,880	0	148,212,091
Group Annuities												
27. Fixed	12,498						0	115,877		88,349		204,226
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout	0						0	1,251,425		0		1,251,425
32. Other							0					0
33. Total group annuities	12,498	0	0	0	0	0	0	1,367,302	0	88,349	0	1,455,651
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	0 (f)						0	XXX	XXX	XXX	0	0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	102 (f)						0	XXX	XXX	XXX	53	53
44. Long-term care (d)	2,519 (f)						0	XXX	XXX	XXX	0	0
45. Other health (d)	180 (f)						0	XXX	XXX	XXX	168	168
46. Total accident and health	2,801	0	0	0	0	0	0	XXX	XXX	XXX	221	221
47. Total	187,824,616 (c)	0	0	0	0	0	0	24,763,682	5,280	125,318,425	221	150,087,608

LIFE INSURANCE (STATE PAGE) (Continued)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Connecticut DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year								22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life																
1. Industrial								0	0							
2. Whole	58,605	8	53,605	0	0	0	0	8	53,605	10,000	0	0	(28)	(835,787)	293	6,049,623
3. Term	0	0	0	0	0	0	0	0	0	0	0	0	(3)	(351,000)	91	27,406,000
4. Indexed								0	0							
5. Universal	104,000	2	104,000	0	0	0	0	2	104,000	0	0	0	(6)	(1,011,296)	41	5,635,054
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	162,605	10	157,605	0	0	0	0	10	157,605	10,000	0	0	(37)	(2,198,084)	425	39,090,677
Group Life																
12. Whole	205,436	30	205,590					30	205,590	0	0	0	355	1,710,128	706	3,708,569
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	205,436	30	205,590	0	0	0	0	30	205,590	0	0	0	355	1,710,128	706	3,708,569
Individual Annuities																
20. Fixed	7,818,681	79	6,657,686					79	6,657,686	2,407,453	317	56,798,971	(321)	(36,172,713)	3,041	324,495,442
21. Indexed	8,144,785	84	9,129,308					84	9,129,308	1,034,651	774	144,474,315	(740)	(66,664,738)	5,425	780,312,543
22. Variable with guarantees								0	0							
23. Variable without guarantees								0	0							
24. Life contingent payout	57,224	4	57,224					4	57,224		9	442,104	(19)	(1,247,753)	165	14,647,133
25. Other								0	0		41	2,819,345	(55)	(3,973,779)	275	12,070,380
26. Total individual annuities	16,020,689	167	15,844,218	0	0	0	0	167	15,844,218	3,442,104	1,141	204,534,735	(1,135)	(108,058,983)	8,906	1,131,525,498
Group Annuities																
27. Fixed	115,877	2	115,877					2	115,877	83,305	0	0	(5)	(21,667)	82	2,299,991
28. Indexed								0	0							
29. Variable with guarantees								0	0							
30. Variable without guarantees								0	0							
31. Life contingent payout	0	0	0					0	0		0	0	(6)	11,278	345	16,117,207
32. Other								0	0		0	0	0	(4,268)	1	1,432
33. Total group annuities	115,877	2	115,877	0	0	0	0	2	115,877	83,305	0	0	(11)	(14,657)	428	18,418,630
Accident and Health																
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)	1,175	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	41	0	102
44. Long-term care (d)	35	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	1	2,519
45. Other health (d)	169	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	3	180
46. Total accident and health	1,379	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	41	4	2,801
47. Total	16,505,986	209	16,323,290	0	0	0	0	209	16,323,290	3,535,408	1,141	204,534,735	(828)	(108,561,555)	10,469	1,192,746,175

(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: $ .....0 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 $ .....

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ .....0 ; Vision Only $ ..... ; Dental Only $ ..... ; Federal Employees Health Benefits Plan $ .....
Title XVIII Medicare $ ..... ; Title XIX Medicaid $ ..... ; Credit A&H $ ..... ; Disability Income $ .....102 ; Long-term Care $ .....2,519 ; Other Health $ 168

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Delaware DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 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)	Claims and Benefits Paid: 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	1,488						0	0	0	0		0
3. Term	24,380						0	250,000	0	0		250,000
4. Indexed							0					0
5. Universal	9,484						0	25,000	0	10,000		35,000
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	35,352	0	0	0	0	0	0	275,000	0	10,000	0	285,000
Group Life												
12. Whole	0						0	0	0	0		0
13. Term							0	0	0	0		0
14. Universal							0	0	0	0		0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	10,314,440						0	1,897,066		5,839,945		7,737,011
21. Indexed	14,197,456						0	2,371,340		20,058,900		22,430,240
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	62,208		0		62,208
25. Other							0					0
26. Total individual annuities	24,511,896	0	0	0	0	0	0	4,330,614	0	25,898,846	0	30,229,460
Group Annuities												
27. Fixed	0						0	0		81,445		81,445
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout	0						0	167,030		0		167,030
32. Other							0					0
33. Total group annuities	0	0	0	0	0	0	0	167,030	0	81,445	0	248,475
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	0 (f)						0	XXX	XXX	XXX	0	0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	0 (f)						0	XXX	XXX	XXX	0	0
44. Long-term care (d)	0 (f)						0	XXX	XXX	XXX	0	0
45. Other health (d)	0 (f)						0	XXX	XXX	XXX	0	0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	24,547,248 (c)	0	0	0	0	0	0	4,772,644	0	25,990,291	0	30,762,934

LIFE INSURANCE (STATE PAGE) (Continued)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Delaware DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year								22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life																
1. Industrial								0	0							
2. Whole	0	0	0	0	0	0	0	0	0	0	0	0	0	0	5	98,406
3. Term	250,000	1	250,000	0	0	0	0	1	250,000	0	0	0	(3)	(500,000)	33	6,899,300
4. Indexed								0	0							
5. Universal	25,000	1	25,000	0	0	0	0	1	25,000	0	0	0	(3)	(161,649)	9	696,781
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	275,000	2	275,000	0	0	0	0	2	275,000	0	0	0	(6)	(661,649)	47	7,694,487
Group Life																
12. Whole	0	0	0					0	0	0	0	0	0	0	0	0
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities																
20. Fixed	1,552,869	16	1,549,529					16	1,549,529	110,722	82	11,078,407	(47)	(2,079,317)	764	102,934,149
21. Indexed	2,720,745	23	2,284,943					23	2,284,943	865,763	80	14,578,411	(144)	(12,641,813)	954	125,688,006
22. Variable with guarantees								0	0							
23. Variable without guarantees								0	0							
24. Life contingent payout	53,842	1	53,842					1	53,842		3	58,647	0	(42,806)	4	65,800
25. Other								0	0		1	37,182	(6)	(374,375)	17	630,486
26. Total individual annuities	4,327,456	40	3,888,314	0	0	0	0	40	3,888,314	976,484	166	25,752,648	(197)	(15,138,312)	1,739	229,318,441
Group Annuities																
27. Fixed	0	0	0					0	0	0	0	0	(1)	(60,020)	24	706,335
28. Indexed								0	0							
29. Variable with guarantees								0	0							
30. Variable without guarantees								0	0							
31. Life contingent payout	0	0	0					0	0	0	0	0	(2)	(108,875)	42	1,882,837
32. Other								0	0		0	0	0	0	0	0
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0	(3)	(168,895)	66	2,589,172
Accident and Health																
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
44. Long-term care (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
45. Other health (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
46. Total accident and health	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	4,602,456	42	4,163,314	0	0	0	0	42	4,163,314	976,484	166	25,752,648	(206)	(15,968,856)	1,852	239,602,100

(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: $ .....0 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 $ .....

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ .....0 ; Vision Only $ ..... ; Dental Only $ ..... ; Federal Employees Health Benefits Plan $ .....
Title XVIII Medicare $ ..... ; Title XIX Medicaid $ ..... ; Credit A&H $ ..... ; Disability Income $ .....0 ; Long-term Care $ .....0 ; Other Health $ 0

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF District of Columbia DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 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)	Claims and Benefits Paid: 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	1,416						0	10,000	0	0		10,000
3. Term	4,330						0	0	0	0		0
4. Indexed							0					0
5. Universal	14,154						0	0	0	17,099		17,099
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	19,900	0	0	0	0	0	0	10,000	0	17,099	0	27,099
Group Life												
12. Whole	0						0	0	0	0		0
13. Term							0	0	0	0		0
14. Universal							0	0	0	0		0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	1,895,561						0	410,790		512,462		923,253
21. Indexed	5,741,162						0	375,590		1,908,975		2,284,564
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	37,223		0		37,223
25. Other							0					0
26. Total individual annuities	7,636,723	0	0	0	0	0	0	823,603	0	2,421,437	0	3,245,040
Group Annuities												
27. Fixed	0						0	19,043		0		19,043
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout	0						0	18,351		0		18,351
32. Other							0					0
33. Total group annuities	0	0	0	0	0	0	0	37,394	0	0	0	37,394
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	0 (f)						0	XXX	XXX	XXX	0	0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	0 (f)						0	XXX	XXX	XXX	0	0
44. Long-term care (d)	0 (f)						0	XXX	XXX	XXX	0	0
45. Other health (d)	0 (f)						0	XXX	XXX	XXX	0	0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	7,656,623 (c)	0	0	0	0	0	0	870,997	0	2,438,536	0	3,309,533

LIFE INSURANCE (STATE PAGE) (Continued)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF District of Columbia DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year								22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life																
1. Industrial								0	0							
2. Whole	10,000	1	10,000	0	0	0	0	1	10,000	0	0	0	(1)	(10,000)	9	125,429
3. Term	0	0	0	0	0	0	0	0	0	0	0	0	0	0	5	1,550,000
4. Indexed								0	0							
5. Universal	0	0	0	0	0	0	0	0	0	0	0	0	(3)	(179,257)	19	2,742,120
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	10,000	1	10,000	0	0	0	0	1	10,000	0	0	0	(4)	(189,257)	33	4,417,549
Group Life																
12. Whole	0	0	0					0	0	0	0	0	0	0	0	0
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities																
20. Fixed	914,578	6	356,360					6	356,360	592,692	3	1,548,057	(17)	(579,323)	122	13,229,303
21. Indexed	291,797	2	291,797					2	291,797	0	22	6,848,903	(22)	(2,567,929)	154	28,338,979
22. Variable with guarantees								0	0							
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0					0	0	0	0	0	(1)	(20,238)	4	226,027
25. Other								0	0		3	183,489	(1)	(3,906)	4	202,696
26. Total individual annuities	1,206,375	8	648,157	0	0	0	0	8	648,157	592,692	28	8,580,448	(41)	(3,171,397)	284	41,997,005
Group Annuities																
27. Fixed	19,043	1	19,043					1	19,043	24,684	0	0	1	21,213	9	53,426
28. Indexed								0	0							
29. Variable with guarantees								0	0							
30. Variable without guarantees								0	0							
31. Life contingent payout	0	0	0					0	0	0	0	0	0	(10,090)	3	236,929
32. Other								0	0		0	0	0	0	0	0
33. Total group annuities	19,043	1	19,043	0	0	0	0	1	19,043	24,684	0	0	1	11,123	12	290,354
Accident and Health																
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
44. Long-term care (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
45. Other health (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
46. Total accident and health	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	1,235,418	10	677,200	0	0	0	0	10	677,200	617,376	28	8,580,448	(44)	(3,349,531)	329	46,704,908

(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: $ .....0 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 $ .....

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ .....0 ; Vision Only $ ..... ; Dental Only $ ..... ; Federal Employees Health Benefits Plan $ .....
Title XVIII Medicare $ ..... ; Title XIX Medicaid $ ..... ; Credit A&H $ ..... ; Disability Income $ .....0 ; Long-term Care $ .....0 ; Other Health $ 0

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Florida DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 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)	Claims and Benefits Paid: 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	96,761						0	122,445	0	90,486		212,931
3. Term	797,381						0	1,487,151	0	36,559		1,523,710
4. Indexed							0					0
5. Universal	517,749						0	723,804	6,632	353,337		1,083,772
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	1,411,891	0	0	0	0	0	0	2,333,400	6,632	480,382	0	2,820,414
Group Life												
12. Whole	0						0	19,160	0	0		19,160
13. Term							0	0	0	0		0
14. Universal							0	0	0	0		0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	19,160	0	0	0	19,160
Individual Annuities												
20. Fixed	453,283,766						0	44,208,399		157,089,124		201,297,523
21. Indexed	463,559,640						0	50,166,116		416,474,622		466,640,738
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout	342,645						0	2,737,721		0		2,737,721
25. Other							0					0
26. Total individual annuities	917,186,051	0	0	0	0	0	0	97,112,235	0	573,563,746	0	670,675,982
Group Annuities												
27. Fixed	416,473						0	348,109		7,222,729		7,570,838
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout	0						0	5,537,211		0		5,537,211
32. Other							0					0
33. Total group annuities	416,473	0	0	0	0	0	0	5,885,319	0	7,222,729	0	13,108,048
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	197,070 (f)						0	XXX	XXX	XXX	198,287	198,287
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	0 (f)						0	XXX	XXX	XXX	0	0
44. Long-term care (d)	29,569 (f)						0	XXX	XXX	XXX	264,170	264,170
45. Other health (d)	140 (f)						0	XXX	XXX	XXX	0	0
46. Total accident and health	226,779	0	0	0	0	0	0	XXX	XXX	XXX	462,457	462,457
47. Total	919,241,194 (c)	0	0	0	0	0	0	105,350,114	6,632	581,266,858	462,457	687,086,060

LIFE INSURANCE (STATE PAGE) (Continued)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Florida DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole	122,101	19	122,445	0	0	0	0	19	122,445	18,000	1	50,000	(41)	(583,774)	211	3,336,476
3. Term	1,487,151	10	1,487,151	0	0	0	0	10	1,487,151	0	0	0	(27)	(2,946,860)	631	167,398,308
4. Indexed								0	0							
5. Universal	905,435	10	730,435	0	0	0	0	10	730,435	300,000	0	20,000	(32)	(4,015,808)	537	77,593,957
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	2,514,688	39	2,340,031	0	0	0	0	39	2,340,031	318,000	1	70,000	(100)	(7,546,442)	1,379	248,328,742
Group Life															
12. Whole	12,685	7	19,160					7	19,160	0	0	0	(31)	(150,193)	2	3,139
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	12,685	7	19,160	0	0	0	0	7	19,160	0	0	0	(31)	(150,193)	2	3,139
Individual Annuities															
20. Fixed	36,300,889	304	33,397,076					304	33,397,076	9,686,506	2,319	469,666,580	(1,481)	(129,462,450)	12,412	1,837,567,864
21. Indexed	49,085,264	383	49,006,943					383	49,006,943	13,885,086	2,250	429,041,973	(2,724)	(235,856,107)	19,683	2,966,104,344
22. Variable with guarantees								0	0							
23. Variable without guarantees								0	0							
24. Life contingent payout	460,609	11	460,609					11	460,609		23	3,225,138	(37)	(2,147,975)	347	17,686,706
25. Other								0	0		99	6,567,817	(143)	(6,860,389)	687	32,210,779
26. Total individual annuities	85,846,761	698	82,864,627	0	0	0	0	698	82,864,627	23,571,592	4,691	908,501,508	(4,385)	(374,326,921)	33,129	4,853,569,693
Group Annuities															
27. Fixed	425,254	15	347,091					15	347,091	161,863	0	0	(175)	(3,918,587)	2,618	66,714,028
28. Indexed								0	0							
29. Variable with guarantees								0	0							
30. Variable without guarantees								0	0							
31. Life contingent payout	0	0	0					0	0		0	0	(23)	(3,414,268)	1,143	63,291,082
32. Other								0	0		0	0	0	21,010	2	317,392
33. Total group annuities	425,254	15	347,091	0	0	0	0	15	347,091	161,863	0	0	(198)	(7,311,844)	3,763	130,322,502
Accident and Health															
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)	199,617	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			(8)	(27,670)	57	198,881
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	(82)	0	0
44. Long-term care (d)	(270,288)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			(2)	(1,692)	21	54,072
45. Other health (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	3	140
46. Total accident and health	(70,672)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	(10)	(29,444)	81	253,093
47. Total	88,728,717	759	85,570,909	0	0	0	0	759	85,570,909	24,051,454	4,692	908,571,508	(4,724)	(389,364,844)	38,354	5,232,477,169

(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: $ 1,501,135 Group: $ ..... Total: $ 1,501,135

(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 $ .....

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ 199,025 ; Vision Only $ ..... ; Dental Only $ ..... ; Federal Employees Health Benefits Plan $ .....
Title XVIII Medicare $ ..... ; Title XIX Medicaid $ ..... ; Credit A&H $ ..... ; Disability Income $ 0 ; Long-term Care $ 60,082 ; Other Health $ (84)

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Georgia DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 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)	Claims and Benefits Paid: 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	68,524						0	126,053	0	0		126,053
3. Term	304,581						0	1,782,000	0	0		1,782,000
4. Indexed							0					0
5. Universal	236,359						0	75,000	0	71,257		146,257
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	609,464	0	0	0	0	0	0	1,983,053	0	71,257	0	2,054,310
Group Life												
12. Whole	0						0	4,683	0	0		4,683
13. Term							0	0	0	0		0
14. Universal							0	0	0	0		0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	4,683	0	0	0	4,683
Individual Annuities												
20. Fixed	100,112,988						0	20,661,708		45,587,952		66,249,660
21. Indexed	217,679,858						0	20,100,154		121,115,094		141,215,248
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	493,717		0		493,717
25. Other							0					0
26. Total individual annuities	317,792,846	0	0	0	0	0	0	41,255,579	0	166,703,046	0	207,958,624
Group Annuities												
27. Fixed	0						0	266,785		280,725		547,510
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout	49,783						0	1,333,124		0		1,333,124
32. Other							0					0
33. Total group annuities	49,783	0	0	0	0	0	0	1,599,909	0	280,725	0	1,880,634
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	20,662 (f)						0	XXX	XXX	XXX	6,952	6,952
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	0 (f)						0	XXX	XXX	XXX	0	0
44. Long-term care (d)	72,273 (f)						0	XXX	XXX	XXX	47,143	47,143
45. Other health (d)	215 (f)						0	XXX	XXX	XXX	215	215
46. Total accident and health	93,150	0	0	0	0	0	0	XXX	XXX	XXX	54,310	54,310
47. Total	318,545,243 (c)	0	0	0	0	0	0	44,843,223	0	167,055,028	54,310	211,952,561

LIFE INSURANCE (STATE PAGE) (Continued)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Georgia DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole	121,511	9	126,053	0	0	0	0	9	126,053	458	0	0	(14)	(37,212)	106	1,356,980
3. Term	532,000	6	1,282,000	0	0	0	0	6	1,282,000	0	0	0	(22)	(4,377,850)	311	68,465,397
4. Indexed								0	0							
5. Universal	575,000	2	575,000	0	0	0	0	2	575,000	0	0	0	(14)	(2,131,408)	233	32,502,039
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	1,228,511	17	1,983,053	0	0	0	0	17	1,983,053	458	0	0	(50)	(6,546,470)	650	102,324,416
Group Life																
12. Whole	4,683	1	4,683					1	4,683	0	0	0	(18)	(97,195)	0	0
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	4,683	1	4,683	0	0	0	0	1	4,683	0	0	0	(18)	(97,195)	0	0
Individual Annuities																
20. Fixed	18,931,391	135	18,405,087					135	18,405,087	2,761,209	583	108,328,316	(574)	(54,067,172)	3,767	464,195,730
21. Indexed	17,792,370	183	19,680,410					183	19,680,410	3,122,940	1,321	216,933,783	(927)	(61,320,236)	7,726	1,112,362,616
22. Variable with guarantees								0	0							
23. Variable without guarantees								0	0							
24. Life contingent payout	169,409	4	169,409					4	169,409		7	292,218	(4)	(227,640)	52	2,696,615
25. Other								0	0		13	1,011,506	(20)	(1,540,160)	139	5,412,721
26. Total individual annuities	36,893,170	322	38,254,906	0	0	0	0	322	38,254,906	5,884,150	1,924	326,565,823	(1,525)	(117,155,207)	11,684	1,584,667,682
Group Annuities																
27. Fixed	266,133	2	266,133					2	266,133	0	0	0	(15)	(844,750)	196	3,648,127
28. Indexed								0	0							
29. Variable with guarantees								0	0							
30. Variable without guarantees								0	0							
31. Life contingent payout	0	0	0					0	0		0	0	(17)	(916,607)	356	15,886,848
32. Other								0	0		0	0	0	(2,140)	3	110,390
33. Total group annuities	266,133	2	266,133	0	0	0	0	2	266,133	0	0	0	(32)	(1,763,497)	555	19,645,365
Accident and Health																
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)	7,548	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	963	4	15,391
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
44. Long-term care (d)	138,794	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	6,738	34	85,110
45. Other health (d)	217	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	1	215
46. Total accident and health	146,558	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	7,701	39	100,716
47. Total	38,539,055	342	40,508,775	0	0	0	0	342	40,508,775	5,884,608	1,924	326,565,823	(1,625)	(125,554,668)	12,928	1,706,738,179

(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: $ .....0 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 $ .....

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ ..... 15,293 ; Vision Only $ ..... ; Dental Only $ ..... ; Federal Employees Health Benefits Plan $ .....
Title XVIII Medicare $ ..... ; Title XIX Medicaid $ ..... ; Credit A&H $ ..... ; Disability Income $ .....0 ; Long-term Care $ ..... 81,236 ; Other Health $ 215

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Hawaii DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 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)	Claims and Benefits Paid: 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	2,240						0	0	0	0		0
3. Term	51,966						0	0	0	0		0
4. Indexed							0					0
5. Universal	137,719						0	157,271	0	29,935		187,206
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	191,925	0	0	0	0	0	0	157,271	0	29,935	0	187,206
Group Life												
12. Whole	0						0	0	0	0		0
13. Term							0	0	0	0		0
14. Universal							0	0	0	0		0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	67,566,239						0	3,548,610		16,019,820		19,568,429
21. Indexed	64,733,418						0	3,242,681		47,242,264		50,484,945
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	173,435		0		173,435
25. Other							0					0
26. Total individual annuities	132,299,657	0	0	0	0	0	0	6,964,725	0	63,262,084	0	70,226,809
Group Annuities												
27. Fixed	33,318						0	88,818		1,501,289		1,590,107
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout	0						0	945,464		0		945,464
32. Other							0					0
33. Total group annuities	33,318	0	0	0	0	0	0	1,034,282	0	1,501,289	0	2,535,571
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	0 (f)						0	XXX	XXX	XXX	0	0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	0 (f)						0	XXX	XXX	XXX	0	0
44. Long-term care (d)	0 (f)						0	XXX	XXX	XXX	0	0
45. Other health (d)	0 (f)						0	XXX	XXX	XXX	0	0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	132,524,900 (c)	0	0	0	0	0	0	8,156,279	0	64,793,307	0	72,949,586

LIFE INSURANCE (STATE PAGE) (Continued)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Hawaii DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole	0	0	0	0	0	0	0	0	0	0	0	0	(3)	(62,454)	11	735,600
3. Term	0	0	0	0	0	0	0	0	0	0	0	0	(3)	(1,000,000)	46	11,238,900
4. Indexed								0	0							
5. Universal	132,271	4	157,271	0	0	0	0	4	157,271	0	0	25,000	(8)	(945,236)	193	23,950,170
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	132,271	4	157,271	0	0	0	0	4	157,271	0	0	25,000	(14)	(2,007,690)	250	35,924,670
Group Life																
12. Whole	0	0	0					0	0	0	0	0	0	0	0	0
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities																
20. Fixed	2,504,296	27	2,405,349					27	2,405,349	472,360	353	68,497,648	(167)	(7,750,824)	2,154	251,921,832
21. Indexed	3,219,485	32	3,190,484					32	3,190,484	1,313,188	384	64,102,037	(306)	(32,769,178)	1,880	263,565,591
22. Variable with guarantees								0	0							
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0					0	0		2	47,373	(3)	(131,824)	36	1,333,967
25. Other								0	0		19	843,281	(17)	(637,347)	127	2,925,229
26. Total individual annuities	5,723,781	59	5,595,833	0	0	0	0	59	5,595,833	1,785,548	758	133,490,339	(493)	(41,289,172)	4,197	519,746,619
Group Annuities																
27. Fixed	36,233	6	88,818					6	88,818	3,350	0	0	(36)	(454,580)	683	22,924,858
28. Indexed								0	0							
29. Variable with guarantees								0	0							
30. Variable without guarantees								0	0							
31. Life contingent payout	0	0	0					0	0		0	0	(5)	(555,362)	425	11,094,316
32. Other								0	0		0	0	0	0	0	0
33. Total group annuities	36,233	6	88,818	0	0	0	0	6	88,818	3,350	0	0	(41)	(1,009,941)	1,108	34,019,174
Accident and Health																
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
44. Long-term care (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
45. Other health (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
46. Total accident and health	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	5,892,285	69	5,841,922	0	0	0	0	69	5,841,922	1,788,898	758	133,515,339	(548)	(44,306,804)	5,555	589,690,463

(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: $ .....0 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 $ .....

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ .....0 ; Vision Only $ ..... ; Dental Only $ ..... ; Federal Employees Health Benefits Plan $ .....
Title XVIII Medicare $ ..... ; Title XIX Medicaid $ ..... ; Credit A&H $ ..... ; Disability Income $ .....0 ; Long-term Care $ .....0 ; Other Health $ 0

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Idaho DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 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)	Claims and Benefits Paid: 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	520						0	871	0	0		871
3. Term	55,657						0	66,717	0	0		66,717
4. Indexed							0					0
5. Universal	14,562						0	0	0	0		0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	70,739	0	0	0	0	0	0	67,588	0	0	0	67,588
Group Life												
12. Whole	0						0	0	0	0		0
13. Term							0	0	0	0		0
14. Universal							0	0	0	0		0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	21,785,493						0	3,191,127		7,498,600		10,689,727
21. Indexed	23,467,657						0	5,749,470		21,559,118		27,308,588
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	297,389		0		297,389
25. Other							0					0
26. Total individual annuities	45,253,150	0	0	0	0	0	0	9,237,986	0	29,057,718	0	38,295,704
Group Annuities												
27. Fixed	2,100						0	0		324,306		324,306
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout	0						0	2,272,209		0		2,272,209
32. Other							0					0
33. Total group annuities	2,100	0	0	0	0	0	0	2,272,209	0	324,306	0	2,596,515
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	0 (f)						0	XXX	XXX	XXX	0	0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	0 (f)						0	XXX	XXX	XXX	0	0
44. Long-term care (d)	8,917 (f)						0	XXX	XXX	XXX	0	0
45. Other health (d)	0 (f)						0	XXX	XXX	XXX	0	0
46. Total accident and health	8,917	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	45,334,906 (c)	0	0	0	0	0	0	11,577,783	0	29,382,024	0	40,959,807

LIFE INSURANCE (STATE PAGE) (Continued)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Idaho DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole	871	1	871	0	0	0	0	1	871	0	0	0	(18)	(37,808)	9	27,751
3. Term	66,717	1	66,717	0	0	0	0	1	66,717	0	0	0	(1)	165,000	54	15,843,800
4. Indexed								0	0							
5. Universal	0	0	0	0	0	0	0	0	0	0	0	0	2	460,000	14	3,158,000
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	67,588	2	67,588	0	0	0	0	2	67,588	0	0	0	(17)	587,192	77	19,029,551
Group Life															
12. Whole	0	0	0					0	0	0	0	0	0	0	0	0
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities															
20. Fixed	2,654,852	23	2,450,431					23	2,450,431	228,086	110	23,138,138	(71)	(7,366,018)	705	88,826,029
21. Indexed	4,110,094	31	5,621,339					31	5,621,339	492,074	142	22,883,621	(169)	(14,001,685)	1,333	184,273,268
22. Variable with guarantees								0	0							
23. Variable without guarantees								0	0							
24. Life contingent payout	20,081	1	20,081					1	20,081		2	64,506	(5)	(141,867)	43	1,433,725
25. Other								0	0		5	227,695	(20)	(712,835)	66	1,430,596
26. Total individual annuities	6,785,028	55	8,091,851	0	0	0	0	55	8,091,851	720,160	259	46,313,960	(265)	(22,222,405)	2,147	275,963,618
Group Annuities															
27. Fixed	0	0	0					0	0	0	0	0	(11)	(352,943)	141	4,461,244
28. Indexed								0	0							
29. Variable with guarantees								0	0							
30. Variable without guarantees								0	0							
31. Life contingent payout	0	0	0					0	0	0	0	0	(12)	(1,436,433)	472	26,381,284
32. Other								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	(23)	(1,789,376)	613	30,842,527
Accident and Health															
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
44. Long-term care (d)	(448)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			(2)	(5,228)	1	3,255
45. Other health (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
46. Total accident and health	(448)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	(2)	(5,228)	1	3,255
47. Total	6,852,167	57	8,159,439	0	0	0	0	57	8,159,439	720,160	259	46,313,960	(307)	(23,429,817)	2,838	325,838,952

(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: $ .....0 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 $ .....

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ .....0 ; Vision Only $ ..... ; Dental Only $ ..... ; Federal Employees Health Benefits Plan $ .....
Title XVIII Medicare $ ..... ; Title XIX Medicaid $ ..... ; Credit A&H $ ..... ; Disability Income $ .....0 ; Long-term Care $ .....9,109 ; Other Health $ 0

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Illinois DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 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)	Claims and Benefits Paid: 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	49,114						0	25,500	0	14,320		39,820
3. Term	309,970						0	576,400	0	0		576,400
4. Indexed							0					0
5. Universal	137,846						0	25,000	0	120,579		145,579
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	496,930	0	0	0	0	0	0	626,900	0	134,899	0	761,799
Group Life												
12. Whole	0						0	0	0	0		0
13. Term							0	0	0	0		0
14. Universal							0	0	0	0		0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	156,143,332						0	18,317,843		59,022,086		77,339,929
21. Indexed	197,314,225						0	21,848,215		148,469,916		170,318,131
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout	16,040						0	1,849,982		0		1,849,982
25. Other							0					0
26. Total individual annuities	353,473,597	0	0	0	0	0	0	42,016,039	0	207,492,002	0	249,508,042
Group Annuities												
27. Fixed	49,197						0	31,347		481,446		512,793
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout	104,417						0	1,964,565		220,592		2,185,157
32. Other							0					0
33. Total group annuities	153,614	0	0	0	0	0	0	1,995,912	0	702,038	0	2,697,950
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	30,672 (f)						0	XXX	XXX	XXX	22,413	22,413
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	0 (f)						0	XXX	XXX	XXX	0	0
44. Long-term care (d)	76,737 (f)						0	XXX	XXX	XXX	253,132	253,132
45. Other health (d)	0 (f)						0	XXX	XXX	XXX	0	0
46. Total accident and health	107,409	0	0	0	0	0	0	XXX	XXX	XXX	275,545	275,545
47. Total	354,231,550 (c)	0	0	0	0	0	0	44,638,852	0	208,328,939	275,545	253,243,336

LIFE INSURANCE (STATE PAGE) (Continued)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Illinois DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole	30,500	1	25,500	0	0	0	0	1	25,500	5,000	0	0	(8)	(53,854)	63	1,314,773
3. Term	621,400	4	576,400	0	0	0	0	4	576,400	45,000	0	0	(16)	(4,417,400)	260	100,809,484
4. Indexed								0	0							
5. Universal	(165,817)	1	25,000	0	0	0	0	1	25,000	0	0	0	(9)	(1,088,363)	152	20,709,155
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	486,083	6	626,900	0	0	0	0	6	626,900	50,000	0	0	(33)	(5,559,617)	475	122,833,412
Group Life																
12. Whole	0	0	0					0	0	0	0	0	174	728,602	179	742,570
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	174	728,602	179	742,570
Individual Annuities																
20. Fixed	15,909,069	153	14,629,610					153	14,629,610	2,922,040	967	162,813,437	(642)	(57,823,364)	5,383	627,841,863
21. Indexed	22,775,976	172	21,160,004					172	21,160,004	4,786,114	1,272	207,353,377	(1,207)	(111,471,320)	7,548	1,063,144,932
22. Variable with guarantees								0	0							
23. Variable without guarantees								0	0							
24. Life contingent payout	1,051,365	13	1,051,365					13	1,051,365		20	1,119,224	(19)	(1,667,059)	115	5,750,900
25. Other								0	0		40	1,969,849	(46)	(3,855,518)	230	9,062,922
26. Total individual annuities	39,736,409	338	36,840,979	0	0	0	0	338	36,840,979	7,708,154	2,299	373,255,886	(1,914)	(174,817,262)	13,276	1,705,800,617
Group Annuities																
27. Fixed	30,951	4	30,951					4	30,951	10,243	0	0	(6)	(190,303)	220	7,646,393
28. Indexed								0	0							
29. Variable with guarantees								0	0							
30. Variable without guarantees								0	0							
31. Life contingent payout	0	0	0					0	0		0	0	(18)	(1,061,290)	469	24,294,712
32. Other								0	0		0	0	(1)	2,912	2	57,623
33. Total group annuities	30,951	4	30,951	0	0	0	0	4	30,951	10,243	0	0	(25)	(1,248,681)	691	31,998,728
Accident and Health																
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)	21,760	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			(3)	(13,578)	5	26,383
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
44. Long-term care (d)	510,206	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	2,565	42	89,122
45. Other health (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
46. Total accident and health	531,966	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	(3)	(11,013)	47	115,505
47. Total	40,785,409	348	37,498,830	0	0	0	0	348	37,498,830	7,768,397	2,299	373,255,886	(1,801)	(180,907,971)	14,668	1,861,490,832

(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: $ .....0 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 $ .....

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ ..... 30,569 ; Vision Only $ ..... ; Dental Only $ ..... ; Federal Employees Health Benefits Plan $ .....
Title XVIII Medicare $ ..... ; Title XIX Medicaid $ ..... ; Credit A&H $ ..... ; Disability Income $ .....0 ; Long-term Care $ ..... 87,384 ; Other Health $ 0

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Indiana DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 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)	Claims and Benefits Paid: 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	21,059						0	17,087	51	1,501		18,640
3. Term	83,413						0	0	0	0		0
4. Indexed							0					0
5. Universal	34,738						0	100,000	0	188		100,188
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	139,210	0	0	0	0	0	0	117,087	51	1,690	0	118,828
Group Life												
12. Whole	0						0	0	0	0		0
13. Term							0	426	0	0		426
14. Universal							0	0	0	0		0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	426	0	0	0	426
Individual Annuities												
20. Fixed	47,771,078						0	10,564,267		21,253,912		31,818,179
21. Indexed	142,801,872						0	24,247,678		167,429,415		191,677,093
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	453,716		(209,760)		243,956
25. Other							0					0
26. Total individual annuities	190,572,950	0	0	0	0	0	0	35,265,661	0	188,473,567	0	223,739,228
Group Annuities												
27. Fixed	11,958						0	213,095		464,614		677,708
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout	0						0	1,779,920		164,471		1,944,391
32. Other							0					0
33. Total group annuities	11,958	0	0	0	0	0	0	1,993,014	0	629,085	0	2,622,099
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	100,305 (f)						0	XXX	XXX	XXX	86,598	86,598
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	0 (f)						0	XXX	XXX	XXX	0	0
44. Long-term care (d)	3,616 (f)						0	XXX	XXX	XXX	37,505	37,505
45. Other health (d)	0 (f)						0	XXX	XXX	XXX	0	0
46. Total accident and health	103,921	0	0	0	0	0	0	XXX	XXX	XXX	124,103	124,103
47. Total	190,828,039 (c)	0	0	0	0	0	0	37,376,188	51	189,104,341	124,103	226,604,684

LIFE INSURANCE (STATE PAGE) (Continued)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Indiana DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole	17,138	3	17,138	0	0	0	0	3	17,138	0	0	0	(4)	(24,263)	48	472,629
3. Term	0	0	0	0	0	0	0	0	0	0	0	0	(2)	(1,001,000)	82	16,502,000
4. Indexed								0	0							
5. Universal	100,000	1	100,000	0	0	0	0	1	100,000	0	0	0	(2)	(145,075)	47	5,722,585
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	117,138	4	117,138	0	0	0	0	4	117,138	0	0	0	(8)	(1,170,338)	177	22,697,213
Group Life															
12. Whole	0	0	0					0	0	0	0	0	0	0	0	0
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities															
20. Fixed	9,364,628	91	8,070,505					91	8,070,505	1,754,761	320	48,216,881	(290)	(20,856,116)	2,118	219,977,536
21. Indexed	25,047,710	202	23,808,349					202	23,808,349	5,299,740	974	142,420,772	(1,481)	(131,242,536)	7,653	977,777,219
22. Variable with guarantees								0	0							
23. Variable without guarantees								0	0							
24. Life contingent payout	62,994	2	62,994					2	62,994		6	318,159	(6)	(482,489)	65	2,802,485
25. Other								0	0		20	1,419,382	(35)	(2,426,332)	163	6,127,185
26. Total individual annuities	34,475,332	295	31,941,848	0	0	0	0	295	31,941,848	7,054,501	1,320	192,375,194	(1,812)	(155,007,473)	9,999	1,206,684,425
Group Annuities															
27. Fixed	212,293	5	212,293					5	212,293	30,433	0	0	(12)	(436,835)	146	5,265,681
28. Indexed								0	0							
29. Variable with guarantees								0	0							
30. Variable without guarantees								0	0							
31. Life contingent payout	1,008	1	1,008					1	1,008		0	0	(9)	(1,266,962)	408	23,468,166
32. Other								0	0		0	0	(1)	(799)	0	0
33. Total group annuities	213,302	6	213,302	0	0	0	0	6	213,302	30,433	0	0	(22)	(1,704,596)	554	28,733,847
Accident and Health															
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)	88,015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			(2)	(12,371)	23	96,644
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
44. Long-term care (d)	322,501	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			1	7,759	2	9,453
45. Other health (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
46. Total accident and health	410,516	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	(1)	(4,612)	25	106,097
47. Total	35,216,288	305	32,272,288	0	0	0	0	305	32,272,288	7,084,933	1,320	192,375,194	(1,843)	(157,887,018)	10,755	1,258,221,583

(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: $ .....0 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 $ .....

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ .....101,623 ; Vision Only $ ..... ; Dental Only $ ..... ; Federal Employees Health Benefits Plan $ .....
Title XVIII Medicare $ ..... ; Title XIX Medicaid $ ..... ; Credit A&H $ ..... ; Disability Income $ .....0 ; Long-term Care $ .....6,597 ; Other Health $ 0

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Iowa DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 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)	Claims and Benefits Paid: 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	35,690						0	9,000	0	8,875		17,875
3. Term	51,545						0	100,000	0	0		100,000
4. Indexed							0					0
5. Universal	11,524						0	0	0	73,295		73,295
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	98,759	0	0	0	0	0	0	109,000	0	82,170	0	191,170
Group Life												
12. Whole	0						0	0	0	0		0
13. Term							0	0	0	0		0
14. Universal							0	0	0	0		0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	18,198,983						0	6,193,486		6,807,509		13,000,995
21. Indexed	37,657,720						0	6,199,750		51,972,089		58,171,839
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	453,955		0		453,955
25. Other							0					0
26. Total individual annuities	55,856,703	0	0	0	0	0	0	12,847,191	0	58,779,598	0	71,626,789
Group Annuities												
27. Fixed	0						0	80,123		434,396		514,519
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout	0						0	543,160		0		543,160
32. Other							0					0
33. Total group annuities	0	0	0	0	0	0	0	623,283	0	434,396	0	1,057,679
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	64,846 (f)						0	XXX	XXX	XXX	34,917	34,917
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	0 (f)						0	XXX	XXX	XXX	0	0
44. Long-term care (d)	8,113 (f)						0	XXX	XXX	XXX	0	0
45. Other health (d)	0 (f)						0	XXX	XXX	XXX	0	0
46. Total accident and health	72,959	0	0	0	0	0	0	XXX	XXX	XXX	34,917	34,917
47. Total	56,028,421 (c)	0	0	0	0	0	0	13,579,474	0	59,296,164	34,917	72,910,554

LIFE INSURANCE (STATE PAGE) (Continued)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Iowa DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year								22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life																
1. Industrial								0	0							
2. Whole	9,000	2	9,000	0	0	0	0	2	9,000	0	0	0	(8)	(148,000)	74	1,782,027
3. Term	100,000	2	100,000	0	0	0	0	2	100,000	0	0	0	(3)	(450,000)	26	8,227,000
4. Indexed								0	0							
5. Universal	0	0	0	0	0	0	0	0	0	0	0	0	(3)	(499,186)	13	2,103,226
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	109,000	4	109,000	0	0	0	0	4	109,000	0	0	0	(14)	(1,097,186)	113	12,112,253
Group Life																
12. Whole	0	0	0					0	0	0	0	0	(1)	(2,040)	0	0
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	(1)	(2,040)	0	0
Individual Annuities																
20. Fixed	1,832,346	31	2,310,336					31	2,310,336	480,870	128	18,811,710	(105)	(5,970,891)	1,263	116,544,045
21. Indexed	4,544,997	67	5,716,189					67	5,716,189	840,129	270	37,256,173	(459)	(35,291,759)	2,515	297,828,100
22. Variable with guarantees								0	0							
23. Variable without guarantees								0	0							
24. Life contingent payout	25,480	2	25,480					2	25,480		3	154,927	(1)	(118,981)	68	3,493,245
25. Other								0	0		27	1,596,571	(31)	(3,369,703)	241	8,292,246
26. Total individual annuities	6,402,823	100	8,052,005	0	0	0	0	100	8,052,005	1,320,999	428	57,819,382	(596)	(44,751,334)	4,087	426,157,636
Group Annuities																
27. Fixed	80,123	2	80,123					2	80,123	0	0	0	(11)	(183,235)	85	2,546,371
28. Indexed								0	0							
29. Variable with guarantees								0	0							
30. Variable without guarantees								0	0							
31. Life contingent payout	0	0	0					0	0		0	0	2	1,741	189	6,819,545
32. Other								0	0		0	0	0	0	0	0
33. Total group annuities	80,123	2	80,123	0	0	0	0	2	80,123	0	0	0	(9)	(181,495)	274	9,365,916
Accident and Health																
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)	36,328	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			(1)	(22,328)	11	64,846
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
44. Long-term care (d)	112	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	2	8,113
45. Other health (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
46. Total accident and health	36,440	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	(1)	(22,328)	13	72,959
47. Total	6,628,386	106	8,241,128	0	0	0	0	106	8,241,128	1,320,999	428	57,819,382	(621)	(46,054,382)	4,487	447,708,764

(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: $ .....0 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 $ .....

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ .....67,252 ; Vision Only $ ..... ; Dental Only $ ..... ; Federal Employees Health Benefits Plan $ .....
Title XVIII Medicare $ ..... ; Title XIX Medicaid $ ..... ; Credit A&H $ ..... ; Disability Income $ .....0 ; Long-term Care $ .....8,113 ; Other Health $ 0

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Kansas DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 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)	Claims and Benefits Paid: 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	6,615						0	65,000	0	0		65,000
3. Term	31,701						0	0	0	0		0
4. Indexed							0					0
5. Universal	41,659						0	0	0	0		0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	79,975	0	0	0	0	0	0	65,000	0	0	0	65,000
Group Life												
12. Whole	0						0	0	0	0		0
13. Term							0	0	0	0		0
14. Universal							0	0	0	0		0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	8,283,044						0	1,535,697		3,263,783		4,799,480
21. Indexed	26,014,265						0	3,764,104		19,952,885		23,716,989
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	162,776		0		162,776
25. Other							0					0
26. Total individual annuities	34,297,309	0	0	0	0	0	0	5,462,577	0	23,216,668	0	28,679,245
Group Annuities												
27. Fixed	0						0	0		5,991		5,991
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout	0						0	963,506		3,805		967,312
32. Other							0					0
33. Total group annuities	0	0	0	0	0	0	0	963,506	0	9,797	0	973,303
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	51,555 (f)						0	XXX	XXX	XXX	34,717	34,717
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	0 (f)						0	XXX	XXX	XXX	0	0
44. Long-term care (d)	66,687 (f)						0	XXX	XXX	XXX	55,898	55,898
45. Other health (d)	0 (f)						0	XXX	XXX	XXX	0	0
46. Total accident and health	118,242	0	0	0	0	0	0	XXX	XXX	XXX	90,615	90,615
47. Total	34,495,526 (c)	0	0	0	0	0	0	6,491,083	0	23,226,465	90,615	29,808,163

LIFE INSURANCE (STATE PAGE) (Continued)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Kansas DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole	65,000	3	65,000	0	0	0	0	3	65,000	0	0	0	(3)	(65,000)	17	124,933
3. Term	0	0	0	0	0	0	0	0	0	0	0	0	(3)	(1,000,000)	43	10,755,000
4. Indexed								0	0							
5. Universal	0	0	0	0	0	0	0	0	0	0	0	0	(1)	(126,613)	40	5,517,341
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	65,000	3	65,000	0	0	0	0	3	65,000	0	0	0	(7)	(1,191,613)	100	16,397,274
Group Life																
12. Whole	0	0	0					0	0	0	0	0	0	0	0	0
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities																
20. Fixed	1,201,264	14	921,600					14	921,600	304,140	52	8,493,132	(29)	(2,168,472)	288	38,461,657
21. Indexed	4,253,398	36	3,572,073					36	3,572,073	1,608,767	145	26,442,314	(139)	(8,136,227)	1,396	178,947,842
22. Variable with guarantees								0	0							
23. Variable without guarantees								0	0							
24. Life contingent payout	88,144	4	88,144					4	88,144		3	286,730	(5)	(145,326)	17	770,676
25. Other								0	0		3	322,630	(6)	(401,372)	37	1,722,601
26. Total individual annuities	5,542,806	54	4,581,817	0	0	0	0	54	4,581,817	1,912,906	203	35,544,806	(179)	(10,851,397)	1,738	219,902,776
Group Annuities																
27. Fixed	0	0	0					0	0	0	0	0	1	4,568	29	255,534
28. Indexed								0	0							
29. Variable with guarantees								0	0							
30. Variable without guarantees								0	0							
31. Life contingent payout	0	0	0					0	0	0	0	0	(24)	(858,270)	560	11,899,558
32. Other								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	(23)	(853,701)	589	12,155,093
Accident and Health																
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)	35,469	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			(1)	(7,839)	7	51,554
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
44. Long-term care (d)	44,026	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			(1)	5,605	35	74,572
45. Other health (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
46. Total accident and health	79,495	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	(2)	(2,234)	42	126,126
47. Total	5,687,301	57	4,646,817	0	0	0	0	57	4,646,817	1,912,906	203	35,544,806	(211)	(12,898,946)	2,469	248,581,269

(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: $ .....0 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 $ .....

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ ..... 51,599 ; Vision Only $ ..... ; Dental Only $ ..... ; Federal Employees Health Benefits Plan $ .....
Title XVIII Medicare $ ..... ; Title XIX Medicaid $ ..... ; Credit A&H $ ..... ; Disability Income $ .....0 ; Long-term Care $ ..... 72,320 ; Other Health $ 0

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Kentucky DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members 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)	Claims and Benefits Paid 8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole	17,324						0	25,000	0	0		25,000
3. Term	80,649						0	0	0	0		0
4. Indexed							0					0
5. Universal	28,065						0	0	0	30,844		30,844
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	126,038	0	0	0	0	0	0	25,000	0	30,844	0	55,844
Group Life												
12. Whole	0						0	11,857	0	0		11,857
13. Term							0	0	0	0		0
14. Universal							0	0	0	0		0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	11,857	0	0	0	11,857
Individual Annuities												
20. Fixed	39,248,852						0	9,443,007		31,560,879		41,003,885
21. Indexed	56,470,346						0	9,182,603		59,430,505		68,613,108
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout	12,430						0	300,565		0		300,565
25. Other							0					0
26. Total individual annuities	95,731,628	0	0	0	0	0	0	18,926,175	0	90,991,384	0	109,917,559
Group Annuities												
27. Fixed	4,681						0	78,262		461,423		539,685
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout	0						0	1,615,371		0		1,615,371
32. Other							0					0
33. Total group annuities	4,681	0	0	0	0	0	0	1,693,633	0	461,423	0	2,155,056
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	80,100 (f)						0	XXX	XXX	XXX	65,330	65,330
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	0 (f)						0	XXX	XXX	XXX	0	0
44. Long-term care (d)	0 (f)						0	XXX	XXX	XXX	802	802
45. Other health (d)	0 (f)						0	XXX	XXX	XXX	0	0
46. Total accident and health	80,100	0	0	0	0	0	0	XXX	XXX	XXX	66,132	66,132
47. Total	95,942,447 (c)	0	0	0	0	0	0	20,656,665	0	91,483,651	66,132	112,206,447

LIFE INSURANCE (STATE PAGE) (Continued)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Kentucky DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole	10,000	1	10,000	0	0	0	0	1	10,000	0	0	0	(2)	44,321	31	349,176
3. Term	0	0	0	0	0	0	0	0	0	0	0	0	(4)	(711,000)	87	18,092,000
4. Indexed								0	0							
5. Universal	15,000	1	15,000	0	0	0	0	1	15,000	0	0	0	(1)	(124,746)	19	3,450,518
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	25,000	2	25,000	0	0	0	0	2	25,000	0	0	0	(7)	(791,425)	137	21,891,694
Group Life															
12. Whole	11,857	1	11,857					1	11,857	0	0	0	(2)	(15,933)	0	0
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	11,857	1	11,857	0	0	0	0	1	11,857	0	0	0	(2)	(15,933)	0	0
Individual Annuities															
20. Fixed	8,851,410	104	8,340,684					104	8,340,684	1,674,478	250	39,629,273	(361)	(31,264,765)	2,507	271,622,059
21. Indexed	7,717,449	78	9,045,107					78	9,045,107	853,052	273	54,426,612	(455)	(41,298,747)	2,534	342,315,134
22. Variable with guarantees								0	0							
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0					0	0		5	103,131	(1)	90,632	31	1,474,989
25. Other								0	0		12	476,962	(6)	(445,826)	74	3,088,964
26. Total individual annuities	16,568,859	182	17,385,791	0	0	0	0	182	17,385,791	2,527,531	540	94,635,977	(823)	(72,918,707)	5,146	618,501,146
Group Annuities															
27. Fixed	70,803	4	70,803					4	70,803	44,590	0	0	(16)	(342,309)	161	4,382,147
28. Indexed								0	0							
29. Variable with guarantees								0	0							
30. Variable without guarantees								0	0							
31. Life contingent payout	0	0	0					0	0		0	0	(11)	(1,595,314)	364	19,949,395
32. Other								0	0		0	0	0	(7,326)	1	4,945
33. Total group annuities	70,803	4	70,803	0	0	0	0	4	70,803	44,590	0	0	(27)	(1,944,950)	526	24,336,487
Accident and Health															
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)	64,005	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			(5)	(39,147)	11	83,761
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
44. Long-term care (d)	802	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	(208)	2	802
45. Other health (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
46. Total accident and health	64,807	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	(5)	(39,355)	13	84,563
47. Total	16,741,327	189	17,493,451	0	0	0	0	189	17,493,451	2,572,121	540	94,635,977	(864)	(75,710,370)	5,822	664,813,890

(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: $ .....0 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 $ .....

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ .....85,032 ; Vision Only $ ..... ; Dental Only $ ..... ; Federal Employees Health Benefits Plan $ .....
Title XVIII Medicare $ ..... ; Title XIX Medicaid $ ..... ; Credit A&H $ ..... ; Disability Income $ .....0 ; Long-term Care $ .....802 ; Other Health $ 0

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Louisiana DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members 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)	Claims and Benefits Paid 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	10,706						0	13,000	0	4,147		17,147
3. Term	104,524						0	0	0	0		0
4. Indexed							0					0
5. Universal	67,703						0	0	0	9,403		9,403
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	182,933	0	0	0	0	0	0	13,000	0	13,550	0	26,550
Group Life												
12. Whole	0						0	192,739	91	9,509		202,339
13. Term							0	0	0	0		0
14. Universal							0	0	0	0		0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	192,739	91	9,509	0	202,339
Individual Annuities												
20. Fixed	44,898,959						0	10,368,946		15,583,293		25,952,240
21. Indexed	123,569,967						0	15,183,551		118,721,306		133,904,857
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout	231,762						0	593,198		0		593,198
25. Other							0					0
26. Total individual annuities	168,700,688	0	0	0	0	0	0	26,145,695	0	134,304,599	0	160,450,294
Group Annuities												
27. Fixed	0						0	21,891		43,511		65,402
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout	0						0	189,520		32,323		221,844
32. Other							0					0
33. Total group annuities	0	0	0	0	0	0	0	211,411	0	75,835	0	287,246
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	0 (f)						0	XXX	XXX	XXX	0	0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	0 (f)						0	XXX	XXX	XXX	0	0
44. Long-term care (d)	0 (f)						0	XXX	XXX	XXX	0	0
45. Other health (d)	0 (f)						0	XXX	XXX	XXX	0	0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	168,883,621 (c)	0	0	0	0	0	0	26,562,845	91	134,403,493	0	160,966,429

LIFE INSURANCE (STATE PAGE) (Continued)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Louisiana DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year								22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life																
1. Industrial								0	0							
2. Whole	20,285	2	13,000	0	0	0	0	2	13,000	7,285	0	0	(5)	(41,212)	21	302,236
3. Term	0	0	0	0	0	0	0	0	0	0	0	10,000	(5)	(880,000)	113	22,144,500
4. Indexed								0	0							
5. Universal	0	0	0	0	0	0	0	0	0	0	0	0	(1)	(56,514)	89	8,028,942
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	20,285	2	13,000	0	0	0	0	2	13,000	7,285	0	10,000	(11)	(977,726)	223	30,475,677
Group Life																
12. Whole	171,125	32	192,830					32	192,830	0	0	0	(319)	(1,567,115)	0	0
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	171,125	32	192,830	0	0	0	0	32	192,830	0	0	0	(319)	(1,567,115)	0	0
Individual Annuities																
20. Fixed	7,715,156	62	9,558,355					62	9,558,355	816,946	214	43,915,305	(194)	(11,925,939)	1,725	244,785,254
21. Indexed	16,491,332	101	15,012,816					101	15,012,816	6,141,476	708	125,546,050	(857)	(92,208,468)	5,412	849,524,251
22. Variable with guarantees								0	0							
23. Variable without guarantees								0	0							
24. Life contingent payout	434,890	5	434,890					5	434,890		13	1,089,804	(4)	(217,745)	43	2,711,204
25. Other								0	0		10	839,029	(16)	(1,054,954)	54	2,829,520
26. Total individual annuities	24,641,378	168	25,006,060	0	0	0	0	168	25,006,060	6,958,422	945	171,390,189	(1,071)	(105,407,106)	7,234	1,099,850,229
Group Annuities																
27. Fixed	21,891	3	21,891					3	21,891	0	0	0	(40)	(151,804)	32	707,099
28. Indexed								0	0							
29. Variable with guarantees								0	0							
30. Variable without guarantees								0	0							
31. Life contingent payout	0	0	0					0	0		0	0	(2)	(112,660)	60	3,383,064
32. Other								0	0		0	0	0	0	0	0
33. Total group annuities	21,891	3	21,891	0	0	0	0	3	21,891	0	0	0	(42)	(264,464)	92	4,090,162
Accident and Health																
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
44. Long-term care (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
45. Other health (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
46. Total accident and health	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	24,854,679	205	25,233,781	0	0	0	0	205	25,233,781	6,965,707	945	171,400,189	(1,443)	(108,216,411)	7,549	1,134,416,068

(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: $ 225,301 Group: $ ..... Total: $ 225,301

(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 $ .....

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ 0 ; Vision Only $ ..... ; Dental Only $ ..... ; Federal Employees Health Benefits Plan $ .....
Title XVIII Medicare $ ..... ; Title XIX Medicaid $ ..... ; Credit A&H $ ..... ; Disability Income $ 0 ; Long-term Care $ 0 ; Other Health $ 0

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Maine DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 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)	Claims and Benefits Paid: 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	3,193						0	42,500	0	4,721		47,221
3. Term	52,776						0	0	0	0		0
4. Indexed							0					0
5. Universal	3,270						0	0	0	0		0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	59,239	0	0	0	0	0	0	42,500	0	4,721	0	47,221
Group Life												
12. Whole	0						0	0	0	0		0
13. Term							0	0	0	0		0
14. Universal							0	0	0	0		0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	16,890,494						0	2,732,542		3,031,959		5,764,501
21. Indexed	24,707,254						0	2,940,202		24,746,478		27,686,680
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	242,785		0		242,785
25. Other							0					0
26. Total individual annuities	41,597,748	0	0	0	0	0	0	5,915,529	0	27,778,437	0	33,693,965
Group Annuities												
27. Fixed	142,633						0	48,574		1,248,864		1,297,438
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout	0						0	932,785		0		932,785
32. Other							0					0
33. Total group annuities	142,633	0	0	0	0	0	0	981,359	0	1,248,864	0	2,230,223
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	3,620 (f)						0	XXX	XXX	XXX	562	562
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	0 (f)						0	XXX	XXX	XXX	0	0
44. Long-term care (d)	3,672 (f)						0	XXX	XXX	XXX	0	0
45. Other health (d)	0 (f)						0	XXX	XXX	XXX	0	0
46. Total accident and health	7,292	0	0	0	0	0	0	XXX	XXX	XXX	562	562
47. Total	41,806,912 (c)	0	0	0	0	0	0	6,939,387	0	29,032,022	562	35,971,971

LIFE INSURANCE (STATE PAGE) (Continued)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Maine DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole	16,000	3	17,500	0	0	0	0	3	17,500	0	0	0	(7)	(86,424)	31	469,538
3. Term	25,000	1	25,000	0	0	0	0	1	25,000	0	0	0	(1)	(359,000)	68	14,629,000
4. Indexed								0	0							
5. Universal	0	0	0	0	0	0	0	0	0	0	0	0	0	758	7	879,211
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	41,000	4	42,500	0	0	0	0	4	42,500	0	0	0	(8)	(444,666)	106	15,977,749
Group Life															
12. Whole	0	0	0					0	0	0	0	0	(5)	(34,205)	0	0
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	(5)	(34,205)	0	0
Individual Annuities															
20. Fixed	2,142,154	21	1,999,969					21	1,999,969	236,630	108	17,422,551	(50)	(2,105,425)	596	59,533,033
21. Indexed	2,722,768	30	2,907,758					30	2,907,758	451,515	148	24,303,708	(167)	(10,689,974)	1,387	198,525,031
22. Variable with guarantees								0	0							
23. Variable without guarantees								0	0							
24. Life contingent payout	19,344	1	19,344					1	19,344		1	246,694	(4)	(144,037)	53	1,765,656
25. Other								0	0		2	22,655	(4)	(617,782)	48	1,495,163
26. Total individual annuities	4,884,266	52	4,927,071	0	0	0	0	52	4,927,071	688,146	259	41,995,609	(225)	(13,557,218)	2,084	261,318,883
Group Annuities															
27. Fixed	48,574	1	48,574					1	48,574	0	0	0	(26)	(1,102,952)	274	8,712,758
28. Indexed								0	0							
29. Variable with guarantees								0	0							
30. Variable without guarantees								0	0							
31. Life contingent payout	0	0	0					0	0	0	0	0	(7)	(535,688)	215	10,392,945
32. Other								0	0	0	0	0	0	0	0	0
33. Total group annuities	48,574	1	48,574	0	0	0	0	1	48,574	0	0	0	(33)	(1,638,640)	489	19,105,702
Accident and Health															
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)	647	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	89	1	3,620
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
44. Long-term care (d)	90	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	461	3	3,903
45. Other health (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
46. Total accident and health	737	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	550	4	7,523
47. Total	4,974,577	57	5,018,145	0	0	0	0	57	5,018,145	688,146	259	41,995,609	(271)	(15,674,180)	2,683	296,409,857

(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: $ .....0 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 $ .....

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ .....3,619 ; Vision Only $ ..... ; Dental Only $ ..... ; Federal Employees Health Benefits Plan $ .....
Title XVIII Medicare $ ..... ; Title XIX Medicaid $ ..... ; Credit A&H $ ..... ; Disability Income $ .....0 ; Long-term Care $ .....3,552 ; Other Health $ 0

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Maryland DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 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)	Claims and Benefits Paid: 8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole	23,435						0	32,396	0	8,072		40,468
3. Term	245,559						0	100,506	0	0		100,506
4. Indexed							0					0
5. Universal	150,460						0	411,538	0	15,653		427,191
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	419,454	0	0	0	0	0	0	544,440	0	23,725	0	568,166
Group Life												
12. Whole	0						0	0	0	0		0
13. Term							0	0	0	0		0
14. Universal							0	0	0	0		0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	87,728,972						0	8,143,647		21,595,342		29,738,989
21. Indexed	143,561,651						0	9,621,972		65,302,167		74,924,139
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	188,562		0		188,562
25. Other							0					0
26. Total individual annuities	231,290,623	0	0	0	0	0	0	17,954,180	0	86,897,510	0	104,851,689
Group Annuities												
27. Fixed	2,000						0	1,600		113,596		115,196
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout	0						0	558,131		0		558,131
32. Other							0					0
33. Total group annuities	2,000	0	0	0	0	0	0	559,731	0	113,596	0	673,327
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	0 (f)						0	XXX	XXX	XXX	0	0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	0 (f)						0	XXX	XXX	XXX	0	0
44. Long-term care (d)	7,033 (f)						0	XXX	XXX	XXX	163,273	163,273
45. Other health (d)	0 (f)						0	XXX	XXX	XXX	0	0
46. Total accident and health	7,033	0	0	0	0	0	0	XXX	XXX	XXX	163,273	163,273
47. Total	231,719,110 (c)	0	0	0	0	0	0	19,058,351	0	87,034,831	163,273	106,256,455

LIFE INSURANCE (STATE PAGE) (Continued)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Maryland DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole	17,396	4	32,396	0	0	0	0	4	32,396	0	0	0	(7)	(93,172)	50	1,271,173
3. Term	506	2	100,506	0	0	0	0	2	100,506	0	0	0	(8)	(4,302,000)	248	62,904,668
4. Indexed								0	0							
5. Universal	436,538	5	411,538	0	0	0	0	5	411,538	275,000	0	10,000	(10)	(1,011,159)	202	25,390,692
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	454,440	11	544,440	0	0	0	0	11	544,440	275,000	0	10,000	(25)	(5,406,331)	500	89,566,532
Group Life															
12. Whole	0	0	0					0	0	0	0	0	(1)	(2,884)	0	0
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	(1)	(2,884)	0	0
Individual Annuities															
20. Fixed	5,954,193	73	6,403,246					73	6,403,246	562,283	535	94,120,683	(305)	(23,868,362)	2,891	398,196,928
21. Indexed	9,214,710	87	9,325,887					87	9,325,887	3,193,342	773	156,286,917	(506)	(47,542,943)	4,080	646,683,764
22. Variable with guarantees								0	0							
23. Variable without guarantees								0	0							
24. Life contingent payout	2,230	1	2,230					1	2,230		6	1,362,422	(3)	(104,324)	30	2,288,042
25. Other								0	0		20	1,199,726	(22)	(1,045,235)	109	5,001,380
26. Total individual annuities	15,171,132	161	15,731,363	0	0	0	0	161	15,731,363	3,755,626	1,334	252,969,748	(836)	(72,560,864)	7,110	1,052,170,114
Group Annuities															
27. Fixed	1,600	0	1,600					0	1,600	0	0	0	(1)	35,755	65	2,000,385
28. Indexed								0	0							
29. Variable with guarantees								0	0							
30. Variable without guarantees								0	0							
31. Life contingent payout	0	0	0					0	0	0	0	0	(6)	(335,891)	157	6,144,758
32. Other								0	0	0	0	0	0	0	0	0
33. Total group annuities	1,600	0	1,600	0	0	0	0	0	1,600	0	0	0	(7)	(300,136)	222	8,145,143
Accident and Health															
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)	0	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						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
44. Long-term care (d)	144,377	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	4,171	4	24,361		
45. Other health (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
46. Total accident and health	144,377	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	1	4,171	4	24,361
47. Total	15,771,550	172	16,277,403	0	0	0	0	172	16,277,403	4,030,626	1,334	252,979,748	(868)	(78,266,043)	7,836	1,149,906,151

(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: $ .....0 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 $ .....

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ .....0 ; Vision Only $ ..... ; Dental Only $ ..... ; Federal Employees Health Benefits Plan $ .....
Title XVIII Medicare $ ..... ; Title XIX Medicaid $ ..... ; Credit A&H $ ..... ; Disability Income $ .....0 ; Long-term Care $ ..... 21,461 ; Other Health $ 0

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Massachusetts DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 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)	Claims and Benefits Paid: 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	16,211						0	9,126	0	2,388		11,514
3. Term	210,305						0	2,400,000	0	7,195		2,407,195
4. Indexed							0					0
5. Universal	146,361						0	150,000	0	89,385		239,385
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	372,877	0	0	0	0	0	0	2,559,126	0	98,968	0	2,658,094
Group Life												
12. Whole	0						0	27,430	0	0		27,430
13. Term							0	14	0	0		14
14. Universal							0	0	0	0		0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	27,444	0	0	0	27,444
Individual Annuities												
20. Fixed	98,622,623						0	12,820,238		42,124,691		54,944,929
21. Indexed	123,566,531						0	10,741,966		76,403,980		87,145,946
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	1,992,816		0		1,992,816
25. Other							0					0
26. Total individual annuities	222,189,154	0	0	0	0	0	0	25,555,020	0	118,528,671	0	144,083,691
Group Annuities												
27. Fixed	844,454						0	475,095		6,167,882		6,642,978
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout	0						0	3,877,730		83,623		3,961,353
32. Other							0					0
33. Total group annuities	844,454	0	0	0	0	0	0	4,352,826	0	6,251,505	0	10,604,331
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	0 (f)						0	XXX	XXX	XXX	0	0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	0 (f)						0	XXX	XXX	XXX	0	0
44. Long-term care (d)	0 (f)						0	XXX	XXX	XXX	0	0
45. Other health (d)	0 (f)						0	XXX	XXX	XXX	0	0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	223,406,485 (c)	0	0	0	0	0	0	32,494,415	0	124,879,145	0	157,373,560

LIFE INSURANCE (STATE PAGE) (Continued)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Massachusetts DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits: Claims Settled During Current Year: Totals Paid 14 Number of Pols/ Certs	Totals Paid 15 Amount	Reduction by Compromise 16 Number of Pols/ Certs	Reduction by Compromise 17 Amount	Amount Rejected 18 Number of Pols/ Certs	Amount Rejected 19 Amount	Total Settled During Current Year 20 Number of Pols/ Certs	Total Settled During Current Year 21 Amount	22 Unpaid December 31, Current Year	Policy Exhibit: Issued During Year 23 Number of Pols/ Certs	Issued During Year 24 Amount	Other Changes to In Force (Net) 25 Number of Pols/ Certs	Other Changes to In Force (Net) 26 Amount	In Force December 31, Current Year (b) 27 Number of Pols/ Certs	In Force December 31, Current Year (b) 28 Amount
Individual Life																
1. Industrial								0	0							
2. Whole	4,126	3	9,140	0	0	0	0	3	9,140	0	0	0	(4)	(39,376)	62	1,301,194
3. Term	2,100,000	3	2,400,000	0	0	0	0	3	2,400,000	0	0	0	(14)	(4,728,000)	150	40,588,350
4. Indexed								0	0							
5. Universal	50,000	2	150,000	0	0	0	0	2	150,000	0	0	0	(5)	(1,500,768)	130	25,107,262
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	2,154,126	8	2,559,140	0	0	0	0	8	2,559,140	0	0	0	(23)	(6,268,144)	342	66,996,806
Group Life																
12. Whole	27,430	6	27,430					6	27,430	0	0	0	1	13,557	47	302,854
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	27,430	6	27,430	0	0	0	0	6	27,430	0	0	0	1	13,557	47	302,854
Individual Annuities																
20. Fixed	7,920,141	71	5,947,192					71	5,947,192	4,457,491	602	107,567,084	(338)	(42,089,711)	4,496	517,284,176
21. Indexed	11,143,813	96	10,181,486					96	10,181,486	2,900,164	685	128,964,889	(585)	(34,094,288)	4,584	766,579,601
22. Variable with guarantees								0	0							
23. Variable without guarantees								0	0							
24. Life contingent payout	289,286	6	289,286					6	289,286		7	624,454	(16)	(790,748)	229	11,682,390
25. Other								0	0		45	3,475,723	(83)	(6,108,183)	432	18,602,350
26. Total individual annuities	19,353,240	173	16,417,964	0	0	0	0	173	16,417,964	7,357,655	1,339	240,632,149	(1,022)	(83,082,930)	9,741	1,314,148,517
Group Annuities																
27. Fixed	475,095	9	475,095					9	475,095	303,603	0	0	(90)	(1,383,814)	1,928	105,522,016
28. Indexed								0	0							
29. Variable with guarantees								0	0							
30. Variable without guarantees								0	0							
31. Life contingent payout	0	0	0					0	0		0	0	(34)	(3,691,702)	810	50,034,111
32. Other								0	0		0	0	0	0	0	0
33. Total group annuities	475,095	9	475,095	0	0	0	0	9	475,095	303,603	0	0	(124)	(5,075,517)	2,738	155,556,127
Accident and Health																
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
44. Long-term care (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
45. Other health (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
46. Total accident and health	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	22,009,891	196	19,479,630	0	0	0	0	196	19,479,630	7,661,258	1,339	240,632,149	(1,168)	(94,413,034)	12,868	1,537,004,304

(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: $ 1,250,054 Group: $ ..... Total: $ 1,250,054

(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 $ .....

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ .....0 ; Vision Only $ ..... ; Dental Only $ ..... ; Federal Employees Health Benefits Plan $ .....
Title XVIII Medicare $ ..... ; Title XIX Medicaid $ ..... ; Credit A&H $ ..... ; Disability Income $ .....0 ; Long-term Care $ .....0 ; Other Health $ 0

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Michigan DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 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)	Claims and Benefits Paid: 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	11,567						0	37,000	0	9,546		46,546
3. Term	135,184						0	0	0	0		0
4. Indexed							0					0
5. Universal	73,364						0	0	0	3,211		3,211
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	220,115	0	0	0	0	0	0	37,000	0	12,757	0	49,757
Group Life												
12. Whole	0						0	0	0	0		0
13. Term							0	0	0	0		0
14. Universal							0	0	0	0		0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	146,526,367						0	30,375,364		53,174,269		83,549,632
21. Indexed	172,079,740						0	26,646,186		200,939,619		227,585,805
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout	69,442						0	1,011,125		0		1,011,125
25. Other							0					0
26. Total individual annuities	318,675,549	0	0	0	0	0	0	58,032,675	0	254,113,888	0	312,146,563
Group Annuities												
27. Fixed	19,652						0	144,393		816,383		960,776
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout	25,503						0	1,994,309		16,297		2,010,605
32. Other							0					0
33. Total group annuities	45,155	0	0	0	0	0	0	2,138,701	0	832,680	0	2,971,382
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	3,340 (f)						0	XXX	XXX	XXX	5,093	5,093
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	0 (f)						0	XXX	XXX	XXX	0	0
44. Long-term care (d)	0 (f)						0	XXX	XXX	XXX	0	0
45. Other health (d)	0 (f)						0	XXX	XXX	XXX	0	0
46. Total accident and health	3,340	0	0	0	0	0	0	XXX	XXX	XXX	5,093	5,093
47. Total	318,944,159 (c)	0	0	0	0	0	0	60,208,377	0	254,959,324	5,093	315,172,794

LIFE INSURANCE (STATE PAGE) (Continued)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Michigan DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole	37,000	4	37,000	0	0	0	0	4	37,000	0	0	0	(8)	(45,740)	80	916,253
3. Term	0	0	0	0	0	0	0	0	0	0	0	0	(5)	(3,115,000)	101	25,818,921
4. Indexed								0	0							
5. Universal	0	0	0	0	0	0	0	0	0	0	0	0	(2)	(320,910)	51	9,294,764
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	37,000	4	37,000	0	0	0	0	4	37,000	0	0	0	(15)	(3,481,650)	232	36,029,939
Group Life																
12. Whole	0	0	0					0	0	0	0	0	(3)	(12,887)	0	0
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	(3)	(12,887)	0	0
Individual Annuities																
20. Fixed	21,891,513	199	20,117,984					199	20,117,984	5,492,243	1,036	149,591,038	(715)	(54,581,008)	6,825	697,040,628
21. Indexed	26,678,266	264	26,157,492					264	26,157,492	6,606,614	1,113	174,051,174	(1,931)	(144,101,625)	10,717	1,360,198,023
22. Variable with guarantees								0	0							
23. Variable without guarantees								0	0							
24. Life contingent payout	235,953	7	235,953					7	235,953		25	1,912,953	(16)	(1,302,950)	145	6,609,777
25. Other								0	0		83	6,265,725	(87)	(8,036,411)	550	31,101,154
26. Total individual annuities	48,805,732	470	46,511,429	0	0	0	0	470	46,511,429	12,098,857	2,257	331,820,890	(2,749)	(208,021,993)	18,237	2,094,949,582
Group Annuities																
27. Fixed	140,585	7	140,585					7	140,585	1,206	0	0	(42)	(721,958)	387	12,835,489
28. Indexed								0	0							
29. Variable with guarantees								0	0							
30. Variable without guarantees								0	0							
31. Life contingent payout	0	0	0					0	0		0	0	(19)	(1,264,754)	435	27,273,843
32. Other								0	0		0	0	0	(3,686)	1	1,574
33. Total group annuities	140,585	7	140,585	0	0	0	0	7	140,585	1,206	0	0	(61)	(1,990,398)	823	40,110,906
Accident and Health																
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)	5,172	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	82	1	3,340
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
44. Long-term care (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
45. Other health (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
46. Total accident and health	5,172	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	82	1	3,340
47. Total	48,988,489	481	46,689,014	0	0	0	0	481	46,689,014	12,100,063	2,257	331,820,890	(2,828)	(213,506,846)	19,293	2,171,093,767

(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: $ ..... 97,142 Group: $ ..... Total: $ 97,142

(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 $ .....

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ .....3,340 ; Vision Only $ ..... ; Dental Only $ ..... ; Federal Employees Health Benefits Plan $ .....
Title XVIII Medicare $ ..... ; Title XIX Medicaid $ ..... ; Credit A&H $ ..... ; Disability Income $ .....0 ; Long-term Care $ .....0 ; Other Health $ 0

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Minnesota DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 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)	Claims and Benefits Paid: 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	28,065						0	63,229	3,948	14,376		81,553
3. Term	138,312						0	0	0	0		0
4. Indexed							0					0
5. Universal	242,417						0	351,000	0	371		351,371
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	408,794	0	0	0	0	0	0	414,229	3,948	14,747	0	432,924
Group Life												
12. Whole	0						0	0	0	0		0
13. Term							0	0	0	0		0
14. Universal							0	0	0	0		0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	61,019,276						0	8,684,284		16,355,951		25,040,235
21. Indexed	104,178,724						0	12,159,426		119,644,494		131,803,920
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	393,676		0		393,676
25. Other							0					0
26. Total individual annuities	165,198,000	0	0	0	0	0	0	21,237,385	0	136,000,445	0	157,237,831
Group Annuities												
27. Fixed	3,067						0	58,862		194,376		253,238
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout	13,998						0	1,176,766		0		1,176,766
32. Other							0					0
33. Total group annuities	17,065	0	0	0	0	0	0	1,235,628	0	194,376	0	1,430,004
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	0 (f)						0	XXX	XXX	XXX	0	0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	0 (f)						0	XXX	XXX	XXX	0	0
44. Long-term care (d)	5,281 (f)						0	XXX	XXX	XXX	0	0
45. Other health (d)	0 (f)						0	XXX	XXX	XXX	0	0
46. Total accident and health	5,281	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	165,629,140 (c)	0	0	0	0	0	0	22,887,243	3,948	136,209,567	0	159,100,758

LIFE INSURANCE (STATE PAGE) (Continued)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Minnesota DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole	65,677	14	67,177	0	0	0	0	14	67,177	0	2	175,000	(10)	(69,247)	99	835,789
3. Term	0	0	0	0	0	0	0	0	0	0	0	0	(4)	(825,000)	115	31,433,400
4. Indexed								0	0							
5. Universal	101,000	2	351,000	0	0	0	0	2	351,000	0	0	0	(3)	(411,214)	55	7,524,097
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	166,677	16	418,177	0	0	0	0	16	418,177	0	2	175,000	(17)	(1,305,461)	269	39,793,286
Group Life															
12. Whole	0	0	0					0	0	0	0	0	0	0	0	0
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities															
20. Fixed	5,393,941	64	5,507,702					64	5,507,702	1,323,688	400	65,412,862	(214)	(16,893,663)	1,885	210,303,584
21. Indexed	13,079,494	93	11,824,700					93	11,824,700	5,768,581	649	107,974,479	(962)	(95,255,453)	5,005	656,632,188
22. Variable with guarantees								0	0							
23. Variable without guarantees								0	0							
24. Life contingent payout	10,095	1	10,095					1	10,095		12	2,032,021	(10)	(2,036,586)	60	2,135,854
25. Other								0	0		31	2,075,228	(41)	(2,208,785)	208	7,604,152
26. Total individual annuities	18,483,530	158	17,342,496	0	0	0	0	158	17,342,496	7,092,269	1,092	177,494,591	(1,227)	(116,394,486)	7,158	876,675,777
Group Annuities															
27. Fixed	49,514	3	49,514					3	49,514	0	0	0	(15)	(99,977)	201	4,970,499
28. Indexed								0	0							
29. Variable with guarantees								0	0							
30. Variable without guarantees								0	0							
31. Life contingent payout	0	0	0					0	0		0	0	(7)	(799,437)	230	14,365,989
32. Other								0	0		0	0	0	(8,838)	3	21,070
33. Total group annuities	49,514	3	49,514	0	0	0	0	3	49,514	0	0	0	(22)	(908,252)	434	19,357,558
Accident and Health															
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
44. Long-term care (d)	153	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	171	2	5,423
45. Other health (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
46. Total accident and health	153	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	171	2	5,423
47. Total	18,699,874	177	17,810,187	0	0	0	0	177	17,810,187	7,092,269	1,094	177,669,591	(1,266)	(118,608,028)	7,863	935,832,044

(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: $ .....0 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 $ .....

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ .....0 ; Vision Only $ ..... ; Dental Only $ ..... ; Federal Employees Health Benefits Plan $ .....
Title XVIII Medicare $ ..... ; Title XIX Medicaid $ ..... ; Credit A&H $ ..... ; Disability Income $ .....0 ; Long-term Care $ .....5,280 ; Other Health $ 0

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Mississippi DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 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)	Claims and Benefits Paid: 8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole	4,526						0	6	0	0		6
3. Term	68,443						0	0	0	0		0
4. Indexed							0					0
5. Universal	35,429						0	0	0	6,800		6,800
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	108,398	0	0	0	0	0	0	6	0	6,800	0	6,806
Group Life												
12. Whole	0						0	0	0	0		0
13. Term							0	0	0	0		0
14. Universal							0	0	0	0		0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	17,329,663						0	5,704,501		13,083,660		18,788,161
21. Indexed	33,706,204						0	5,018,193		40,887,131		45,905,324
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout	92,120						0	78,454		0		78,454
25. Other							0					0
26. Total individual annuities	51,127,987	0	0	0	0	0	0	10,801,149	0	53,970,790	0	64,771,939
Group Annuities												
27. Fixed	6,345						0	10,653		66,254		76,908
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout	138,564						0	572,109		64,105		636,215
32. Other							0					0
33. Total group annuities	144,909	0	0	0	0	0	0	582,763	0	130,360	0	713,122
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	0 (f)						0	XXX	XXX	XXX	0	0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	0 (f)						0	XXX	XXX	XXX	0	0
44. Long-term care (d)	2,199 (f)						0	XXX	XXX	XXX	0	0
45. Other health (d)	0 (f)						0	XXX	XXX	XXX	0	0
46. Total accident and health	2,199	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	51,383,493 (c)	0	0	0	0	0	0	11,383,917	0	54,107,950	0	65,491,867

LIFE INSURANCE (STATE PAGE) (Continued)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Mississippi DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year								22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life																
1. Industrial								0	0							
2. Whole	6	1	6	0	0	0	0	1	6	0	0	0	(1)	(4,156)	14	66,105
3. Term	0	0	0	0	0	0	0	0	0	0	0	0	0	(60,000)	62	17,581,600
4. Indexed								0	0							
5. Universal	0	0	0	0	0	0	0	0	0	0	0	25,000	1	39,313	51	5,198,416
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	6	1	6	0	0	0	0	1	6	0	0	25,000	0	(24,843)	127	22,846,121
Group Life																
12. Whole	0	0	0					0	0	0	0	0	(3)	(26,314)	1	7,931
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	(3)	(26,314)	1	7,931
Individual Annuities																
20. Fixed	5,061,845	53	4,859,291					53	4,859,291	668,720	112	17,879,384	(233)	(11,217,166)	1,473	137,194,999
21. Indexed	4,954,167	33	4,456,549					33	4,456,549	829,857	211	33,012,994	(238)	(28,220,047)	1,462	214,394,334
22. Variable with guarantees								0	0							
23. Variable without guarantees								0	0							
24. Life contingent payout	10,335	1	10,335					1	10,335		5	364,756	(1)	(69,920)	20	924,524
25. Other								0	0		3	973,076	(6)	36,363	26	2,814,223
26. Total individual annuities	10,026,347	87	9,326,175	0	0	0	0	87	9,326,175	1,498,577	331	52,230,210	(478)	(39,470,770)	2,981	355,328,080
Group Annuities																
27. Fixed	10,653	1	10,653					1	10,653	8,014	0	0	(4)	(56,534)	63	1,009,846
28. Indexed								0	0							
29. Variable with guarantees								0	0							
30. Variable without guarantees								0	0							
31. Life contingent payout	0	0	0					0	0		0	0	(5)	(336,082)	170	7,225,045
32. Other								0	0		0	0	0	0	0	0
33. Total group annuities	10,653	1	10,653	0	0	0	0	1	10,653	8,014	0	0	(9)	(392,617)	233	8,234,891
Accident and Health																
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
44. Long-term care (d)	(36)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			(1)	(2,932)	0	0
45. Other health (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
46. Total accident and health	(36)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	(1)	(2,932)	0	0
47. Total	10,036,970	89	9,336,834	0	0	0	0	89	9,336,834	1,506,591	331	52,255,210	(491)	(39,917,476)	3,342	386,417,023

(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: $ ..... 14,335 Group: $ ..... Total: $ 14,335

(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 $ .....

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ .....0 ; Vision Only $ ..... ; Dental Only $ ..... ; Federal Employees Health Benefits Plan $ .....
Title XVIII Medicare $ ..... ; Title XIX Medicaid $ ..... ; Credit A&H $ ..... ; Disability Income $ .....0 ; Long-term Care $ .....2,207 ; Other Health $ 0

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Missouri DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 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)	Claims and Benefits Paid: 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	81,426						0	13,934	0	61,423		75,357
3. Term	158,283						0	201,000	0	0		201,000
4. Indexed							0					0
5. Universal	46,400						0	0	0	11,088		11,088
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	286,109	0	0	0	0	0	0	214,934	0	72,511	0	287,445
Group Life												
12. Whole	0						0	8,354	0	0		8,354
13. Term							0	0	0	0		0
14. Universal							0	0	0	0		0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	8,354	0	0	0	8,354
Individual Annuities												
20. Fixed	188,461,685						0	17,124,793		86,503,442		103,628,236
21. Indexed	221,278,017						0	26,075,235		209,856,735		235,931,970
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	443,755		0		443,755
25. Other							0					0
26. Total individual annuities	409,739,702	0	0	0	0	0	0	43,643,784	0	296,360,177	0	340,003,961
Group Annuities												
27. Fixed	2,000						0	1,018		483,744		484,762
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout	(58)						0	850,743		0		850,743
32. Other							0					0
33. Total group annuities	1,942	0	0	0	0	0	0	851,760	0	483,744	0	1,335,505
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	31,978 (f)						0	XXX	XXX	XXX	37,799	37,799
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	0 (f)						0	XXX	XXX	XXX	0	0
44. Long-term care (d)	120,353 (f)						0	XXX	XXX	XXX	125,296	125,296
45. Other health (d)	41 (f)						0	XXX	XXX	XXX	41	41
46. Total accident and health	152,372	0	0	0	0	0	0	XXX	XXX	XXX	163,135	163,135
47. Total	410,180,125 (c)	0	0	0	0	0	0	44,718,832	0	296,916,432	163,135	341,798,400

LIFE INSURANCE (STATE PAGE) (Continued)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Missouri DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole	32,934	2	13,934	0	0	0	0	2	13,934	19,000	2	100,000	(6)	(194,352)	38	601,490
3. Term	201,000	2	201,000	0	0	0	0	2	201,000	0	0	0	(12)	(2,466,000)	141	33,286,999
4. Indexed								0	0							
5. Universal	0	0	0	0	0	0	0	0	0	0	0	0	(1)	(217,320)	57	7,476,500
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	233,934	4	214,934	0	0	0	0	4	214,934	19,000	2	100,000	(19)	(2,877,671)	236	41,364,989
Group Life																
12. Whole	8,354	1	8,354					1	8,354	0	0	0	357	2,056,389	381	2,154,018
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	8,354	1	8,354	0	0	0	0	1	8,354	0	0	0	357	2,056,389	381	2,154,018
Individual Annuities																
20. Fixed	17,050,909	117	15,075,280					117	15,075,280	3,952,928	230	38,784,994	250	80,776,881	6,377	910,639,249
21. Indexed	27,317,878	218	25,756,031					218	25,756,031	4,684,478	486	85,512,065	(1,028)	(22,242,488)	9,808	1,447,244,690
22. Variable with guarantees								0	0							
23. Variable without guarantees								0	0							
24. Life contingent payout	197,860	3	197,860					3	197,860		5	441,349	(3)	(544,664)	52	1,823,784
25. Other								0	0		14	428,322	(10)	(1,445,661)	102	5,122,622
26. Total individual annuities	44,566,648	338	41,029,172	0	0	0	0	338	41,029,172	8,637,407	735	125,166,730	(791)	56,544,069	16,339	2,364,830,344
Group Annuities																
27. Fixed	(2,554)	1	0					1	0	0	0	0	(9)	(388,797)	91	1,788,277
28. Indexed								0	0							
29. Variable with guarantees								0	0							
30. Variable without guarantees								0	0							
31. Life contingent payout	0	0	0					0	0		0	0	(13)	(619,030)	270	10,096,298
32. Other								0	0		0	0	(1)	(1,015)	0	0
33. Total group annuities	(2,554)	1	0	0	0	0	0	1	0	0	0	0	(23)	(1,008,842)	361	11,884,574
Accident and Health																
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)	36,575	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			(5)	(17,957)	7	32,256
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
44. Long-term care (d)	124,057	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			(4)	1,004	65	138,146
45. Other health (d)	41	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	1	41
46. Total accident and health	160,673	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	(9)	(16,953)	73	170,443
47. Total	44,967,054	344	41,252,460	0	0	0	0	344	41,252,460	8,656,407	737	125,266,730	(485)	54,696,992	17,390	2,420,404,368

(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: $ .....0 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 $ .....

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ .....31,977 ; Vision Only $ ..... ; Dental Only $ ..... ; Federal Employees Health Benefits Plan $ .....
Title XVIII Medicare $ ..... ; Title XIX Medicaid $ ..... ; Credit A&H $ ..... ; Disability Income $ .....0 ; Long-term Care $ .....133,709 ; Other Health $ 41

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Montana DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 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)	Claims and Benefits Paid: 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	1,133						0	10,000	0	0		10,000
3. Term	4,484						0	0	0	0		0
4. Indexed							0					0
5. Universal	37						0	0	0	0		0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	5,654	0	0	0	0	0	0	10,000	0	0	0	10,000
Group Life												
12. Whole	0						0	0	0	0		0
13. Term							0	0	0	0		0
14. Universal							0	0	0	0		0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	3,766,250						0	847,545		462,067		1,309,613
21. Indexed	2,249,286						0	734,589		3,528,914		4,263,503
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	31,712		0		31,712
25. Other							0					0
26. Total individual annuities	6,015,536	0	0	0	0	0	0	1,613,846	0	3,990,982	0	5,604,828
Group Annuities												
27. Fixed	0						0	3,813		19,516		23,330
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout	0						0	101,743		0		101,743
32. Other							0					0
33. Total group annuities	0	0	0	0	0	0	0	105,557	0	19,516	0	125,073
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	0 (f)						0	XXX	XXX	XXX	0	0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	0 (f)						0	XXX	XXX	XXX	0	0
44. Long-term care (d)	0 (f)						0	XXX	XXX	XXX	0	0
45. Other health (d)	0 (f)						0	XXX	XXX	XXX	0	0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	6,021,190 (c)	0	0	0	0	0	0	1,729,402	0	4,010,498	0	5,739,900

LIFE INSURANCE (STATE PAGE) (Continued)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Montana DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year								22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life																
1. Industrial								0	0							
2. Whole	10,000	1	10,000	0	0	0	0	1	10,000	0	0	0	(5)	(23,824)	5	45,600
3. Term	0	0	0	0	0	0	0	0	0	0	0	0	0	30,000	6	1,619,000
4. Indexed								0	0							
5. Universal	0	0	0	0	0	0	0	0	0	0	0	0	(1)	(108,212)	0	0
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	10,000	1	10,000	0	0	0	0	1	10,000	0	0	0	(6)	(102,036)	11	1,664,600
Group Life																
12. Whole	0	0	0					0	0	0	0	0	(1)	(1,942)	0	0
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	(1)	(1,942)	0	0
Individual Annuities																
20. Fixed	334,079	5	380,483					5	380,483	0	10	2,424,938	(2)	914,616	167	16,105,974
21. Indexed	1,252,218	9	733,450					9	733,450	632,376	17	1,995,341	(36)	(2,894,008)	289	30,183,649
22. Variable with guarantees								0	0							
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0					0	0		0	0	(4)	(42,796)	8	209,531
25. Other								0	0		7	352,793	(5)	(363,107)	33	1,706,222
26. Total individual annuities	1,586,298	14	1,113,932	0	0	0	0	14	1,113,932	632,376	34	4,773,072	(47)	(2,385,296)	497	48,205,376
Group Annuities																
27. Fixed	3,813	1	3,813					1	3,813	0	0	0	(3)	(166,587)	36	1,195,327
28. Indexed								0	0							
29. Variable with guarantees								0	0							
30. Variable without guarantees								0	0							
31. Life contingent payout	0	0	0					0	0		0	0	1	(26,702)	25	1,190,081
32. Other								0	0		0	0	0	0	0	0
33. Total group annuities	3,813	1	3,813	0	0	0	0	1	3,813	0	0	0	(2)	(193,289)	61	2,385,408
Accident and Health																
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
44. Long-term care (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	1	0
45. Other health (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
46. Total accident and health	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	1	0
47. Total	1,600,111	16	1,127,746	0	0	0	0	16	1,127,746	632,376	34	4,773,072	(56)	(2,682,562)	570	52,255,384

(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: $ .....0 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 $ .....

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ .....0 ; Vision Only $ ..... ; Dental Only $ ..... ; Federal Employees Health Benefits Plan $ .....
Title XVIII Medicare $ ..... ; Title XIX Medicaid $ ..... ; Credit A&H $ ..... ; Disability Income $ .....0 ; Long-term Care $ .....0 ; Other Health $ 0

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Nebraska DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 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)	Claims and Benefits Paid: 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	2,798						0	27,500	0	0		27,500
3. Term	104,738						0	0	0	0		0
4. Indexed							0					0
5. Universal	8,838						0	0	0	0		0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	116,374	0	0	0	0	0	0	27,500	0	0	0	27,500
Group Life												
12. Whole	0						0	0	0	0		0
13. Term							0	0	0	0		0
14. Universal							0	0	0	0		0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	8,224,414						0	1,616,694		2,132,293		3,748,987
21. Indexed	34,118,878						0	3,420,214		15,263,640		18,683,855
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	52,833		0		52,833
25. Other							0					0
26. Total individual annuities	42,343,292	0	0	0	0	0	0	5,089,742	0	17,395,933	0	22,485,675
Group Annuities												
27. Fixed	0						0	65,777		8,028		73,806
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout	0						0	326,171		0		326,171
32. Other							0					0
33. Total group annuities	0	0	0	0	0	0	0	391,948	0	8,028	0	399,977
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	11,392 (f)						0	XXX	XXX	XXX	2,464	2,464
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	0 (f)						0	XXX	XXX	XXX	0	0
44. Long-term care (d)	61,219 (f)						0	XXX	XXX	XXX	1,130	1,130
45. Other health (d)	0 (f)						0	XXX	XXX	XXX	0	0
46. Total accident and health	72,611	0	0	0	0	0	0	XXX	XXX	XXX	3,594	3,594
47. Total	42,532,277 (c)	0	0	0	0	0	0	5,509,190	0	17,403,962	3,594	22,916,745

LIFE INSURANCE (STATE PAGE) (Continued)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Nebraska DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year								22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life																
1. Industrial								0	0							
2. Whole	27,500	2	27,500	0	0	0	0	2	27,500	0	0	0	(3)	(128,000)	5	36,792
3. Term	0	0	0	0	0	0	0	0	0	0	0	0	0	0	55	15,184,000
4. Indexed								0	0							
5. Universal	0	0	0	0	0	0	0	0	0	0	0	0	0	2,468	14	1,292,733
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	27,500	2	27,500	0	0	0	0	2	27,500	0	0	0	(3)	(125,532)	74	16,513,525
Group Life																
12. Whole	0	0	0					0	0	0	0	0	0	0	0	0
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities																
20. Fixed	1,197,679	16	893,826					16	893,826	337,950	54	7,899,463	(42)	(1,605,288)	428	50,380,778
21. Indexed	4,467,276	37	3,124,511					37	3,124,511	1,579,320	217	35,226,553	(134)	(6,871,215)	1,166	173,600,182
22. Variable with guarantees								0	0							
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0					0	0		1	8,381	0	(37,413)	11	369,713
25. Other								0	0		15	822,176	(13)	(575,837)	48	1,985,905
26. Total individual annuities	5,664,956	53	4,018,337	0	0	0	0	53	4,018,337	1,917,270	287	43,956,572	(189)	(9,089,752)	1,653	226,336,577
Group Annuities																
27. Fixed	93,560	2	63,480					2	63,480	30,080	0	0	(3)	(69,490)	45	899,029
28. Indexed								0	0							
29. Variable with guarantees								0	0							
30. Variable without guarantees								0	0							
31. Life contingent payout	0	0	0					0	0		0	0	(4)	(183,981)	105	3,770,833
32. Other								0	0		0	0	0	(2,205)	2	1,513
33. Total group annuities	93,560	2	63,480	0	0	0	0	2	63,480	30,080	0	0	(7)	(255,676)	152	4,671,374
Accident and Health																
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)	2,812	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	213	2	11,852
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
44. Long-term care (d)	2,082	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	795	24	62,349
45. Other health (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
46. Total accident and health	4,895	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	1,008	26	74,201
47. Total	5,790,910	57	4,109,317	0	0	0	0	57	4,109,317	1,947,350	287	43,956,572	(199)	(9,469,952)	1,905	247,595,678

(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: $ .....0 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 $ .....

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ ..... 11,849 ; Vision Only $ ..... ; Dental Only $ ..... ; Federal Employees Health Benefits Plan $ .....
Title XVIII Medicare $ ..... ; Title XIX Medicaid $ ..... ; Credit A&H $ ..... ; Disability Income $ .....0 ; Long-term Care $ ..... 61,667 ; Other Health $ 0

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Nevada DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 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)	Claims and Benefits Paid: 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	22,061						0	2,519	0	12,948		15,468
3. Term	117,468						0	0	0	0		0
4. Indexed							0					0
5. Universal	107,884						0	0	0	26,452		26,452
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	247,413	0	0	0	0	0	0	2,519	0	39,400	0	41,920
Group Life												
12. Whole	0						0	0	0	0		0
13. Term							0	0	0	0		0
14. Universal							0	0	0	0		0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	32,679,170						0	5,654,539		15,585,094		21,239,633
21. Indexed	21,811,508						0	6,010,031		30,098,917		36,108,948
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	147,254		0		147,254
25. Other							0					0
26. Total individual annuities	54,490,678	0	0	0	0	0	0	11,811,824	0	45,684,011	0	57,495,835
Group Annuities												
27. Fixed	2,100						0	1,096		434,604		435,700
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout	38,177						0	590,518		0		590,518
32. Other							0					0
33. Total group annuities	40,277	0	0	0	0	0	0	591,614	0	434,604	0	1,026,218
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	11,652 (f)						0	XXX	XXX	XXX	3,774	3,774
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	(168) (f)						0	XXX	XXX	XXX	229	229
44. Long-term care (d)	0 (f)						0	XXX	XXX	XXX	0	0
45. Other health (d)	0 (f)						0	XXX	XXX	XXX	0	0
46. Total accident and health	11,484	0	0	0	0	0	0	XXX	XXX	XXX	4,003	4,003
47. Total	54,789,852 (c)	0	0	0	0	0	0	12,405,957	0	46,158,015	4,003	58,567,975

LIFE INSURANCE (STATE PAGE) (Continued)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Nevada DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole	2,519	2	2,519	0	0	0	0	2	2,519	0	0	0	(16)	(118,796)	17	202,450
3. Term	0	0	0	0	0	0	0	0	0	0	0	0	0	460,000	126	30,695,810
4. Indexed								0	0							
5. Universal	0	0	0	0	0	0	0	0	0	0	0	0	(2)	242,477	112	20,568,149
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	2,519	2	2,519	0	0	0	0	2	2,519	0	0	0	(18)	583,681	255	51,466,409
Group Life															
12. Whole	0	0	0					0	0	0	0	0	(1)	(234)	0	0
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	(1)	(234)	0	0
Individual Annuities															
20. Fixed	4,326,247	25	4,636,508					25	4,636,508	381,750	114	30,495,498	(84)	(14,253,327)	808	140,753,121
21. Indexed	6,766,962	37	5,890,087					37	5,890,087	1,778,069	145	21,299,989	(237)	(28,207,723)	1,239	182,115,616
22. Variable with guarantees								0	0							
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0					0	0		1	21,805	1	(81,518)	27	1,038,214
25. Other								0	0		7	534,772	(9)	(927,565)	64	2,373,450
26. Total individual annuities	11,093,209	62	10,526,596	0	0	0	0	62	10,526,596	2,159,818	267	52,352,063	(329)	(43,470,133)	2,138	326,280,401
Group Annuities															
27. Fixed	1,096	1	1,096					1	1,096	1,390	0	0	(7)	(163,347)	123	2,566,114
28. Indexed								0	0							
29. Variable with guarantees								0	0							
30. Variable without guarantees								0	0							
31. Life contingent payout	0	0	0					0	0		0	0	(4)	(463,509)	147	8,091,069
32. Other								0	0		0	0	0	0	0	0
33. Total group annuities	1,096	1	1,096	0	0	0	0	1	1,096	1,390	0	0	(11)	(626,856)	270	10,657,183
Accident and Health															
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)	3,239	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			(1)	(2,801)	1	11,651
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)	(9,245)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			(2)	(525)	0	(168)
44. Long-term care (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
45. Other health (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
46. Total accident and health	(6,006)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	(3)	(3,326)	1	11,483
47. Total	11,090,819	65	10,530,211	0	0	0	0	65	10,530,211	2,161,209	267	52,352,063	(362)	(43,516,868)	2,664	388,415,477

(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: $ .....0 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 $ .....

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ ..... 11,669 ; Vision Only $ ..... ; Dental Only $ ..... ; Federal Employees Health Benefits Plan $ .....
Title XVIII Medicare $ ..... ; Title XIX Medicaid $ ..... ; Credit A&H $ ..... ; Disability Income $ ..... (173) ; Long-term Care $ .....0 ; Other Health $ 0

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF New Hampshire DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 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)	Claims and Benefits Paid: 8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole	4,782						0	7,000	0	0		7,000
3. Term	25,010						0	0	0	0		0
4. Indexed							0					0
5. Universal	18,674						0	0	0	71,088		71,088
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	48,466	0	0	0	0	0	0	7,000	0	71,088	0	78,088
Group Life												
12. Whole	0						0	4,156	0	0		4,156
13. Term							0	0	0	0		0
14. Universal							0	0	0	0		0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	4,156	0	0	0	4,156
Individual Annuities												
20. Fixed	27,586,528						0	5,609,410		9,685,957		15,295,367
21. Indexed	36,264,609						0	3,837,001		30,661,483		34,498,484
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	399,657		0		399,657
25. Other							0					0
26. Total individual annuities	63,851,137	0	0	0	0	0	0	9,846,069	0	40,347,440	0	50,193,509
Group Annuities												
27. Fixed	22,996						0	36,775		388,157		424,932
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout	0						0	676,905		0		676,905
32. Other							0					0
33. Total group annuities	22,996	0	0	0	0	0	0	713,680	0	388,157	0	1,101,837
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	16,544 (f)						0	XXX	XXX	XXX	4,199	4,199
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	0 (f)						0	XXX	XXX	XXX	0	0
44. Long-term care (d)	51,775 (f)						0	XXX	XXX	XXX	260,320	260,320
45. Other health (d)	101 (f)						0	XXX	XXX	XXX	70	70
46. Total accident and health	68,420	0	0	0	0	0	0	XXX	XXX	XXX	264,589	264,589
47. Total	63,991,019 (c)	0	0	0	0	0	0	10,570,905	0	40,806,684	264,589	51,642,179

LIFE INSURANCE (STATE PAGE) (Continued)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF New Hampshire DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole	7,000	2	7,000	0	0	0	0	2	7,000	0	0	0	(1)	(2,804)	40	400,291
3. Term	100,000	0	0	0	0	0	0	0	0	100,000	0	0	(1)	(200,000)	25	7,715,000
4. Indexed								0	0							
5. Universal	0	0	0	0	0	0	0	0	0	0	0	0	0	749,662	14	4,213,913
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	107,000	2	7,000	0	0	0	0	2	7,000	100,000	0	0	(2)	546,858	79	12,329,204
Group Life															
12. Whole	4,156	1	4,156					1	4,156	0	0	0	(2)	(11,495)	0	0
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	4,156	1	4,156	0	0	0	0	1	4,156	0	0	0	(2)	(11,495)	0	0
Individual Annuities															
20. Fixed	3,523,326	40	3,233,662					40	3,233,662	730,575	171	27,521,607	(86)	(7,738,528)	1,024	97,097,137
21. Indexed	4,435,650	29	3,836,571					29	3,836,571	762,072	236	39,463,438	(191)	(17,311,930)	1,744	243,355,236
22. Variable with guarantees								0	0							
23. Variable without guarantees								0	0							
24. Life contingent payout	5,308	1	5,308					1	5,308		2	228,704	(4)	28,791	83	3,237,693
25. Other								0	0		16	1,437,305	(28)	(1,831,027)	132	7,023,516
26. Total individual annuities	7,964,284	70	7,075,541	0	0	0	0	70	7,075,541	1,492,647	425	68,651,054	(309)	(26,852,695)	2,983	350,713,582
Group Annuities															
27. Fixed	36,775	2	36,775					2	36,775	0	0	0	(10)	(296,079)	135	4,846,682
28. Indexed								0	0							
29. Variable with guarantees								0	0							
30. Variable without guarantees								0	0							
31. Life contingent payout	0	0	0					0	0		0	0	(5)	(447,413)	131	10,749,973
32. Other								0	0		0	0	0	0	0	0
33. Total group annuities	36,775	2	36,775	0	0	0	0	2	36,775	0	0	0	(15)	(743,492)	266	15,596,654
Accident and Health															
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)	4,712	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	1,460	3	16,941
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
44. Long-term care (d)	226,168	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			(3)	4,303	27	57,885
45. Other health (d)	70	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	18	2	101
46. Total accident and health	230,951	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	(3)	5,781	32	74,927
47. Total	8,343,166	75	7,123,472	0	0	0	0	75	7,123,472	1,592,647	425	68,651,054	(331)	(27,055,043)	3,360	378,714,367

(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: $ 1,328,599 Group: $ ..... Total: $ 1,328,599

(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 $ .....

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ 16,887 ; Vision Only $ ..... ; Dental Only $ ..... ; Federal Employees Health Benefits Plan $ .....
Title XVIII Medicare $ ..... ; Title XIX Medicaid $ ..... ; Credit A&H $ ..... ; Disability Income $ 0 ; Long-term Care $ 52,927 ; Other Health $ 70

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF New Jersey DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 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)	Claims and Benefits Paid: 8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole	17,050						0	147,301	0	3,776		151,077
3. Term	303,587						0	300,000	0	0		300,000
4. Indexed							0					0
5. Universal	152,381						0	100,000	0	51,335		151,335
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	473,018	0	0	0	0	0	0	547,301	0	55,111	0	602,412
Group Life												
12. Whole	0						0	0	0	0		0
13. Term							0	0	0	0		0
14. Universal							0	0	0	0		0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	153,947,457						0	24,736,774		82,290,882		107,027,656
21. Indexed	216,092,387						0	25,234,738		149,897,101		175,131,839
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	641,022		10,353		651,375
25. Other							0					0
26. Total individual annuities	370,039,844	0	0	0	0	0	0	50,612,533	0	232,198,337	0	282,810,870
Group Annuities												
27. Fixed	133,300						0	82,094		1,444,282		1,526,376
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout	0						0	2,474,410		158,094		2,632,503
32. Other							0					0
33. Total group annuities	133,300	0	0	0	0	0	0	2,556,503	0	1,602,376	0	4,158,879
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	2,862 (f)						0	XXX	XXX	XXX	30	30
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	144 (f)						0	XXX	XXX	XXX	93	93
44. Long-term care (d)	3,303 (f)						0	XXX	XXX	XXX	2,091	2,091
45. Other health (d)	221 (f)						0	XXX	XXX	XXX	221	221
46. Total accident and health	6,530	0	0	0	0	0	0	XXX	XXX	XXX	2,435	2,435
47. Total	370,652,692 (c)	0	0	0	0	0	0	53,716,338	0	233,855,824	2,435	287,574,596

LIFE INSURANCE (STATE PAGE) (Continued)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF New Jersey DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole	144,224	11	149,401	0	0	0	0	11	149,401	0	1	75,000	(16)	(357,047)	137	1,913,765
3. Term	300,000	2	300,000	0	0	0	0	2	300,000	0	0	0	(15)	(2,624,000)	265	67,190,140
4. Indexed								0	0							
5. Universal	100,000	3	100,000	0	0	0	0	3	100,000	0	0	0	(7)	(842,726)	167	23,943,944
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	544,224	16	549,401	0	0	0	0	16	549,401	0	1	75,000	(38)	(3,823,774)	569	93,047,850
Group Life															
12. Whole	0	0	0					0	0	0	0	0	(3)	(23,735)	24	28,921
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	(3)	(23,735)	24	28,921
Individual Annuities															
20. Fixed	21,592,434	162	21,053,224					162	21,053,224	5,438,197	904	168,059,404	(865)	(82,932,303)	7,428	992,384,014
21. Indexed	25,579,812	171	24,454,005					171	24,454,005	6,637,715	1,359	248,762,599	(1,334)	(135,309,063)	8,070	1,199,281,130
22. Variable with guarantees								0	0							
23. Variable without guarantees								0	0							
24. Life contingent payout	243,456	4	243,456					4	243,456		21	1,419,793	(6)	(484,177)	88	4,206,169
25. Other								0	0		38	4,035,098	(40)	(3,542,503)	201	11,061,018
26. Total individual annuities	47,415,702	337	45,750,686	0	0	0	0	337	45,750,686	12,075,912	2,322	422,276,894	(2,245)	(222,268,045)	15,787	2,206,932,332
Group Annuities															
27. Fixed	82,094	6	82,094					6	82,094	427,402	0	0	(37)	(612,596)	627	22,972,755
28. Indexed								0	0							
29. Variable with guarantees								0	0							
30. Variable without guarantees								0	0							
31. Life contingent payout	0	0	0					0	0		0	0	(21)	(2,991,617)	509	31,170,206
32. Other								0	0		0	0	0	0	0	0
33. Total group annuities	82,094	6	82,094	0	0	0	0	6	82,094	427,402	0	0	(58)	(3,604,213)	1,136	54,142,961
Accident and Health															
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)	98	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	70	1	2,862
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)	2,069	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	1	144
44. Long-term care (d)	2,137	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	260	4	5,502
45. Other health (d)	222	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	1	221
46. Total accident and health	4,526	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	330	7	8,729
47. Total	48,046,545	359	46,382,180	0	0	0	0	359	46,382,180	12,503,314	2,323	422,351,894	(2,344)	(229,719,437)	17,523	2,354,160,793

(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: $ .....0 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 $ .....

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ .....2,862 ; Vision Only $ ..... ; Dental Only $ ..... ; Federal Employees Health Benefits Plan $ .....
Title XVIII Medicare $ ..... ; Title XIX Medicaid $ ..... ; Credit A&H $ ..... ; Disability Income $ .....144 ; Long-term Care $ .....5,392 ; Other Health $ 221

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF New Mexico DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 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)	Claims and Benefits Paid: 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	70,990						0	0	0	0		0
3. Term	87,722						0	350,000	0	0		350,000
4. Indexed							0					0
5. Universal	44,826						0	50,000	0	29,551		79,551
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	203,538	0	0	0	0	0	0	400,000	0	29,551	0	429,551
Group Life												
12. Whole	0						0	0	0	0		0
13. Term							0	0	0	0		0
14. Universal							0	0	0	0		0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	12,911,384						0	1,732,567		1,584,254		3,316,821
21. Indexed	8,871,826						0	2,134,161		12,711,080		14,845,241
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout	147,000						0	212,975		0		212,975
25. Other							0					0
26. Total individual annuities	21,930,210	0	0	0	0	0	0	4,079,703	0	14,295,334	0	18,375,037
Group Annuities												
27. Fixed	0						0	1,032		88,392		89,424
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout	0						0	119,496		0		119,496
32. Other							0					0
33. Total group annuities	0	0	0	0	0	0	0	120,528	0	88,392	0	208,920
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	0 (f)						0	XXX	XXX	XXX	0	0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	0 (f)						0	XXX	XXX	XXX	0	0
44. Long-term care (d)	0 (f)						0	XXX	XXX	XXX	0	0
45. Other health (d)	0 (f)						0	XXX	XXX	XXX	0	0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	22,133,748 (c)	0	0	0	0	0	0	4,600,231	0	14,413,277	0	19,013,508

LIFE INSURANCE (STATE PAGE) (Continued)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF New Mexico DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year								22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life																
1. Industrial								0	0							
2. Whole	0	0	0	0	0	0	0	0	0	0	0	0	(3)	(5,887)	8	2,177,969
3. Term	200,000	2	350,000	0	0	0	0	2	350,000	0	0	0	(5)	(860,000)	58	12,832,450
4. Indexed								0	0							
5. Universal	50,000	1	50,000	0	0	0	0	1	50,000	0	0	0	(5)	(325,501)	42	6,252,988
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	250,000	3	400,000	0	0	0	0	3	400,000	0	0	0	(13)	(1,191,388)	108	21,263,407
Group Life																
12. Whole	0	0	0					0	0	0	0	0	(3)	(12,466)	0	0
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	(3)	(12,466)	0	0
Individual Annuities																
20. Fixed	911,882	6	818,332					6	818,332	171,713	57	13,134,789	(25)	(237,666)	326	47,871,978
21. Indexed	2,842,412	14	1,978,813					14	1,978,813	1,459,617	75	9,205,071	(94)	(10,573,997)	708	84,287,861
22. Variable with guarantees								0	0							
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0					0	0		0	0	2	140,868	18	1,391,033
25. Other								0	0		5	569,634	(5)	(796,782)	43	2,362,265
26. Total individual annuities	3,754,294	20	2,797,145	0	0	0	0	20	2,797,145	1,631,330	137	22,909,494	(122)	(11,467,577)	1,095	135,913,137
Group Annuities																
27. Fixed	1,032	1	1,032					1	1,032	0	0	0	(3)	(94,669)	69	1,669,673
28. Indexed								0	0							
29. Variable with guarantees								0	0							
30. Variable without guarantees								0	0							
31. Life contingent payout	0	0	0					0	0		0	0	(3)	(275,755)	36	1,458,053
32. Other								0	0		0	0	0	0	0	0
33. Total group annuities	1,032	1	1,032	0	0	0	0	1	1,032	0	0	0	(6)	(370,424)	105	3,127,726
Accident and Health																
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
44. Long-term care (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
45. Other health (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
46. Total accident and health	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	4,005,326	24	3,198,177	0	0	0	0	24	3,198,177	1,631,330	137	22,909,494	(144)	(13,041,855)	1,308	160,304,271

(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: $ ..... 48,867 Group: $ ..... Total: $ 48,867

(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 $ .....

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ .....0 ; Vision Only $ ..... ; Dental Only $ ..... ; Federal Employees Health Benefits Plan $ .....
Title XVIII Medicare $ ..... ; Title XIX Medicaid $ ..... ; Credit A&H $ ..... ; Disability Income $ .....0 ; Long-term Care $ .....0 ; Other Health $ 0

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF New York DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 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)	Claims and Benefits Paid: 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	3,853						0	0	0	0		0
3. Term	42,434						0	0	0	0		0
4. Indexed							0					0
5. Universal	57,322						0	0	0	293		293
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	103,609	0	0	0	0	0	0	0	0	293	0	293
Group Life												
12. Whole	0						0	7,182	0	0		7,182
13. Term							0	0	0	0		0
14. Universal							0	0	0	0		0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	7,182	0	0	0	7,182
Individual Annuities												
20. Fixed	4,420,899						0	6,508,495		4,599,178		11,107,673
21. Indexed	29,701,158						0	8,460,749		30,282,240		38,742,989
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	297,759		0		297,759
25. Other							0					0
26. Total individual annuities	34,122,057	0	0	0	0	0	0	15,267,003	0	34,881,419	0	50,148,422
Group Annuities												
27. Fixed	2,150						0	4,958		321,511		326,469
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout	0						0	884,546		0		884,546
32. Other							0					0
33. Total group annuities	2,150	0	0	0	0	0	0	889,504	0	321,511	0	1,211,015
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	0 (f)						0	XXX	XXX	XXX	0	0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	0 (f)						0	XXX	XXX	XXX	0	0
44. Long-term care (d)	13,708 (f)						0	XXX	XXX	XXX	0	0
45. Other health (d)	350 (f)						0	XXX	XXX	XXX	112	112
46. Total accident and health	14,058	0	0	0	0	0	0	XXX	XXX	XXX	112	112
47. Total	34,241,874 (c)	0	0	0	0	0	0	16,163,689	0	35,203,222	112	51,367,024

LIFE INSURANCE (STATE PAGE) (Continued)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF New York DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole	0	0	0	0	0	0	0	0	0	0	0	0	(2)	(7,218)	7	69,781
3. Term	0	0	0	0	0	0	0	0	0	0	0	0	2	201,000	36	13,048,000
4. Indexed								0	0							
5. Universal	0	0	0	0	0	0	0	0	0	0	0	0	(2)	(294,744)	49	10,471,003
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	(2)	(100,962)	92	23,588,784
Group Life															
12. Whole	3,639	1	7,182					1	7,182	0	0	0	(8)	(62,546)	0	0
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	3,639	1	7,182	0	0	0	0	1	7,182	0	0	0	(8)	(62,546)	0	0
Individual Annuities															
20. Fixed	6,803,426	56	5,337,324					56	5,337,324	1,734,381	0	0	6	1,822,013	391	35,901,159
21. Indexed	7,127,943	62	8,368,169					62	8,368,169	435,748	0	0	73	26,888,375	1,368	235,869,367
22. Variable with guarantees								0	0							
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0					0	0		0	0	0	45,779	25	2,369,368
25. Other								0	0		6	230,774	(12)	(538,854)	75	2,677,730
26. Total individual annuities	13,931,369	118	13,705,494	0	0	0	0	118	13,705,494	2,170,128	6	230,774	67	28,217,313	1,859	276,817,625
Group Annuities															
27. Fixed	1,778	3	4,161					3	4,161	0	0	0	(4)	(50,527)	134	1,944,780
28. Indexed								0	0							
29. Variable with guarantees								0	0							
30. Variable without guarantees								0	0							
31. Life contingent payout	0	0	0					0	0		0	0	(7)	(567,525)	283	11,024,296
32. Other								0	0		0	0	0	(654)	1	3,523
33. Total group annuities	1,778	3	4,161	0	0	0	0	3	4,161	0	0	0	(11)	(618,705)	418	12,972,598
Accident and Health															
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
44. Long-term care (d)	328	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	1,782	4	14,895
45. Other health (d)	113	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	(83)	3	351
46. Total accident and health	442	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	1,699	7	15,246
47. Total	13,937,227	122	13,716,837	0	0	0	0	122	13,716,837	2,170,128	6	230,774	46	27,436,799	2,376	313,394,253

(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: $ .....0 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 $ .....

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ .....0 ; Vision Only $ ..... ; Dental Only $ ..... ; Federal Employees Health Benefits Plan $ .....
Title XVIII Medicare $ ..... ; Title XIX Medicaid $ ..... ; Credit A&H $ ..... ; Disability Income $ .....0 ; Long-term Care $ ..... 13,571 ; Other Health $ 112

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF North Carolina DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 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)	Claims and Benefits Paid: 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	96,759						0	758,887	0	11,628		770,515
3. Term	486,036						0	755,000	0	0		755,000
4. Indexed							0					0
5. Universal	218,877						0	130,000	0	111,021		241,021
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	801,672	0	0	0	0	0	0	1,643,887	0	122,649	0	1,766,536
Group Life												
12. Whole	0						0	0	0	0		0
13. Term							0	0	0	0		0
14. Universal							0	0	0	0		0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	173,518,531						0	27,088,436		75,422,789		102,511,224
21. Indexed	242,696,417						0	30,202,289		230,586,821		260,789,110
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	973,777		0		973,777
25. Other							0					0
26. Total individual annuities	416,214,948	0	0	0	0	0	0	58,264,502	0	306,009,610	0	364,274,111
Group Annuities												
27. Fixed	36,887						0	114,633		1,245,519		1,360,152
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout	(11,806)						0	1,360,930		0		1,360,930
32. Other							0					0
33. Total group annuities	25,081	0	0	0	0	0	0	1,475,563	0	1,245,519	0	2,721,082
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	143,722 (f)						0	XXX	XXX	XXX	64,948	64,948
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	0 (f)						0	XXX	XXX	XXX	0	0
44. Long-term care (d)	1,148,891 (f)						0	XXX	XXX	XXX	990,416	990,416
45. Other health (d)	170 (f)						0	XXX	XXX	XXX	81	81
46. Total accident and health	1,292,783	0	0	0	0	0	0	XXX	XXX	XXX	1,055,446	1,055,446
47. Total	418,334,484 (c)	0	0	0	0	0	0	61,383,952	0	307,377,778	1,055,446	369,817,175

LIFE INSURANCE (STATE PAGE) (Continued)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF North Carolina DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole	761,033	78	758,887	0	0	0	0	78	758,887	4,077	0	0	(29)	(555,434)	777	5,149,904
3. Term	755,000	6	755,000	0	0	0	0	6	755,000	0	0	0	(26)	(5,500,000)	457	110,992,672
4. Indexed								0	0						
5. Universal	201,000	3	130,000	0	0	0	0	3	130,000	101,000	0	0	(12)	(637,235)	280	34,335,618
6. Universal with secondary guarantees								0	0						
7. Variable								0	0						
8. Variable universal								0	0						
9. Credit								0	0						
10. Other								0	0						
11. Total individual life	1,717,033	87	1,643,887	0	0	0	0	87	1,643,887	105,077	0	0	(67)	(6,692,669)	1,514	150,478,194
Group Life															
12. Whole	0	0	0					0	0	0	0	0	(7)	(38,644)	0	0
13. Term								0	0						
14. Universal								0	0						
15. Variable								0	0						
16. Variable universal								0	0						
17. Credit								0	0						(a)
18. Other								0	0						
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	(7)	(38,644)	0	0
Individual Annuities															
20. Fixed	20,488,918	228	22,703,001					228	22,703,001	2,193,961	1,128	186,102,189	(802)	(79,022,166)	6,288	715,930,084
21. Indexed	27,303,606	264	29,300,920					264	29,300,920	4,912,468	1,423	248,118,477	(1,562)	(144,828,698)	11,160	1,585,028,180
22. Variable with guarantees								0	0						
23. Variable without guarantees								0	0						
24. Life contingent payout	123,982	3	123,982					3	123,982		12	565,519	(10)	(536,836)	147	7,293,352
25. Other								0	0		43	3,427,320	(54)	(3,717,908)	287	12,796,166
26. Total individual annuities	47,916,505	495	52,127,903	0	0	0	0	495	52,127,903	7,106,429	2,606	438,213,505	(2,428)	(228,105,607)	17,882	2,321,047,782
Group Annuities															
27. Fixed	109,524	7	113,011					7	113,011	108,361	0	0	(52)	(610,233)	852	15,537,474
28. Indexed								0	0						
29. Variable with guarantees								0	0						
30. Variable without guarantees								0	0						
31. Life contingent payout	0	0	0					0	0		0	0	(19)	(1,165,821)	389	15,110,983
32. Other								0	0		0	0	(1)	(1,614)	0	0
33. Total group annuities	109,524	7	113,011	0	0	0	0	7	113,011	108,361	0	0	(72)	(1,777,668)	1,241	30,648,457
Accident and Health															
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)	65,352	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			(5)	(13,095)	18	144,303
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
44. Long-term care (d)	860,487	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			(14)	48,439	424	1,264,637
45. Other health (d)	82	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	2	170
46. Total accident and health	925,921	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	(19)	35,344	444	1,409,110
47. Total	50,668,984	589	53,884,801	0	0	0	0	589	53,884,801	7,319,867	2,606	438,213,505	(2,593)	(236,579,243)	21,081	2,503,583,543

(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: $ .....0 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 $ .....

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ .....143,080 ; Vision Only $ ..... ; Dental Only $ ..... ; Federal Employees Health Benefits Plan $ .....
Title XVIII Medicare $ ..... ; Title XIX Medicaid $ ..... ; Credit A&H $ ..... ; Disability Income $ .....0 ; Long-term Care $ .....1,241,017 ; Other Health $ 81

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF North Dakota DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 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)	Claims and Benefits Paid: 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	2,091						0	0	0	0		0
3. Term	26,785						0	0	0	0		0
4. Indexed							0					0
5. Universal	13,270						0	0	0	0		0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	42,146	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole	0						0	0	0	0		0
13. Term							0	0	0	0		0
14. Universal							0	0	0	0		0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	4,695,179						0	810,555		1,767,571		2,578,126
21. Indexed	3,004,076						0	1,954,977		12,490,762		14,445,739
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	85,384		261,778		347,162
25. Other							0					0
26. Total individual annuities	7,699,255	0	0	0	0	0	0	2,850,916	0	14,520,111	0	17,371,026
Group Annuities												
27. Fixed	0						0	0		56,325		56,325
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout	0						0	23,006		0		23,006
32. Other							0					0
33. Total group annuities	0	0	0	0	0	0	0	23,006	0	56,325	0	79,331
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	0 (f)						0	XXX	XXX	XXX	0	0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	0 (f)						0	XXX	XXX	XXX	0	0
44. Long-term care (d)	0 (f)						0	XXX	XXX	XXX	0	0
45. Other health (d)	0 (f)						0	XXX	XXX	XXX	0	0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	7,741,401 (c)	0	0	0	0	0	0	2,873,922	0	14,576,435	0	17,450,357

LIFE INSURANCE (STATE PAGE) (Continued)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF North Dakota DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year								22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life																
1. Industrial								0	0							
2. Whole	0	0	0	0	0	0	0	0	0	0	0	0	(2)	(171)	1	25,000
3. Term	0	0	0	0	0	0	0	0	0	0	0	0	0	0	6	1,473,000
4. Indexed								0	0							
5. Universal	0	0	0	0	0	0	0	0	0	0	0	0	0	(1,638)	4	961,901
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	(2)	(1,809)	11	2,459,901
Group Life																
12. Whole	0	0	0					0	0	0	0	0	0	0	0	0
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities																
20. Fixed	609,595	8	633,779					8	633,779	7,508	40	5,352,434	(26)	(1,966,397)	243	32,737,233
21. Indexed	1,975,548	6	1,946,691					6	1,946,691	28,857	26	2,976,775	(55)	(8,192,526)	428	66,026,853
22. Variable with guarantees								0	0							
23. Variable without guarantees								0	0							
24. Life contingent payout	29,977	1	29,977					1	29,977		0	0	(1)	(61,771)	2	401,742
25. Other								0	0		4	251,007	(3)	(134,375)	18	756,232
26. Total individual annuities	2,615,120	15	2,610,447	0	0	0	0	15	2,610,447	36,366	70	8,580,216	(85)	(10,355,069)	691	99,922,060
Group Annuities																
27. Fixed	0	0	0					0	0	0	0	0	(2)	(56,338)	11	183,395
28. Indexed								0	0							
29. Variable with guarantees								0	0							
30. Variable without guarantees								0	0							
31. Life contingent payout	0	0	0					0	0		0	0	1	91,849	11	395,529
32. Other								0	0		0	0	0	0	0	0
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0	(1)	35,511	22	578,924
Accident and Health																
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
44. Long-term care (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
45. Other health (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
46. Total accident and health	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	2,615,120	15	2,610,447	0	0	0	0	15	2,610,447	36,366	70	8,580,216	(88)	(10,321,367)	724	102,960,886

(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: $ .....0 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 $ .....

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ .....0 ; Vision Only $ ..... ; Dental Only $ ..... ; Federal Employees Health Benefits Plan $ .....
Title XVIII Medicare $ ..... ; Title XIX Medicaid $ ..... ; Credit A&H $ ..... ; Disability Income $ .....0 ; Long-term Care $ .....0 ; Other Health $ 0

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Ohio DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 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)	Claims and Benefits Paid: 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	35,855						0	12,000	0	7,383		19,383
3. Term	211,149						0	0	0	0		0
4. Indexed							0					0
5. Universal	70,871						0	250,000	0	35,292		285,292
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	317,875	0	0	0	0	0	0	262,000	0	42,675	0	304,675
Group Life												
12. Whole	0						0	258	0	0		258
13. Term							0	0	0	0		0
14. Universal							0	0	0	0		0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	258	0	0	0	258
Individual Annuities												
20. Fixed	218,175,018						0	34,006,337		67,806,957		101,813,294
21. Indexed	185,488,251						0	40,241,326		236,137,270		276,378,596
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout	87,530						0	1,201,715		188,512		1,390,228
25. Other							0					0
26. Total individual annuities	403,750,799	0	0	0	0	0	0	75,449,378	0	304,132,739	0	379,582,117
Group Annuities												
27. Fixed	423,525						0	409,833		4,139,089		4,548,922
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout	(196,584)						0	5,220,121		186,016		5,406,137
32. Other							0					0
33. Total group annuities	226,941	0	0	0	0	0	0	5,629,954	0	4,325,105	0	9,955,059
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	49,877 (f)						0	XXX	XXX	XXX	17,168	17,168
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	0 (f)						0	XXX	XXX	XXX	0	0
44. Long-term care (d)	2,651 (f)						0	XXX	XXX	XXX	20,513	20,513
45. Other health (d)	133 (f)						0	XXX	XXX	XXX	49	49
46. Total accident and health	52,661	0	0	0	0	0	0	XXX	XXX	XXX	37,730	37,730
47. Total	404,348,276 (c)	0	0	0	0	0	0	81,341,590	0	308,500,519	37,730	389,879,839

LIFE INSURANCE (STATE PAGE) (Continued)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Ohio DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole	12,000	2	12,000	0	0	0	0	2	12,000	0	1	25,000	(9)	(109,176)	130	1,122,736
3. Term	0	0	0	0	0	0	0	0	0	0	0	10,000	(2)	(1,180,000)	217	54,062,278
4. Indexed								0	0							
5. Universal	0	1	250,000	0	0	0	0	1	250,000	0	0	0	(5)	(1,007,580)	97	12,868,495
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	12,000	3	262,000	0	0	0	0	3	262,000	0	1	35,000	(16)	(2,296,756)	444	68,053,509
Group Life															
12. Whole	0	1	258					1	258	0	0	0	(2)	(287)	0	0
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	0	1	258	0	0	0	0	1	258	0	0	0	(2)	(287)	0	0
Individual Annuities															
20. Fixed	26,592,173	297	26,943,397					297	26,943,397	3,844,359	1,560	221,461,537	(1,029)	(73,619,096)	8,682	843,043,167
21. Indexed	35,828,301	301	38,865,703					301	38,865,703	7,024,676	1,156	192,878,523	(2,102)	(181,240,353)	12,225	1,554,366,170
22. Variable with guarantees								0	0							
23. Variable without guarantees								0	0							
24. Life contingent payout	109,432	6	109,432					6	109,432		18	993,228	(9)	(383,838)	162	6,309,353
25. Other								0	0		87	5,787,555	(95)	(5,906,164)	448	18,892,340
26. Total individual annuities	62,529,906	604	65,918,532	0	0	0	0	604	65,918,532	10,869,036	2,821	421,120,843	(3,235)	(261,149,451)	21,517	2,422,611,030
Group Annuities															
27. Fixed	476,099	19	395,426					19	395,426	235,337	0	0	(136)	(1,620,502)	2,096	66,313,033
28. Indexed								0	0							
29. Variable with guarantees								0	0							
30. Variable without guarantees								0	0							
31. Life contingent payout	0	0	0					0	0		0	0	(42)	(4,141,154)	1,329	70,990,241
32. Other								0	0		0	0	(1)	(13,408)	5	16,256
33. Total group annuities	476,099	19	395,426	0	0	0	0	19	395,426	235,337	0	0	(179)	(5,775,064)	3,430	137,319,531
Accident and Health															
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)	18,947	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			1	8,066	8	53,209
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
44. Long-term care (d)	2,488	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			1	2,261	3	3,028
45. Other health (d)	50	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	1	133
46. Total accident and health	21,485	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	2	10,327	12	56,370
47. Total	63,039,490	627	66,576,216	0	0	0	0	627	66,576,216	11,104,373	2,822	421,155,843	(3,430)	(269,211,232)	25,403	2,628,040,440

(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: $ 196,756 Group: $ ..... Total: $ 196,756

(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 $ .....

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ 53,174 ; Vision Only $ ..... ; Dental Only $ ..... ; Federal Employees Health Benefits Plan $ .....
Title XVIII Medicare $ ..... ; Title XIX Medicaid $ ..... ; Credit A&H $ ..... ; Disability Income $ 0 ; Long-term Care $ 2,535 ; Other Health $ 133

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Oklahoma DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 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)	Claims and Benefits Paid: 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	20,174						0	39,115	0	14,436		53,551
3. Term	409,151						0	101,550	0	0		101,550
4. Indexed							0					0
5. Universal	16,168						0	100,000	0	0		100,000
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	445,493	0	0	0	0	0	0	240,665	0	14,436	0	255,101
Group Life												
12. Whole	0						0	15,178	0	0		15,178
13. Term							0	0	0	0		0
14. Universal							0	0	0	0		0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	15,178	0	0	0	15,178
Individual Annuities												
20. Fixed	13,879,077						0	1,919,728		5,701,756		7,621,483
21. Indexed	44,822,565						0	4,651,511		22,165,959		26,817,470
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	194,317		0		194,317
25. Other							0					0
26. Total individual annuities	58,701,642	0	0	0	0	0	0	6,765,556	0	27,867,715	0	34,633,270
Group Annuities												
27. Fixed	1,200						0	9,886		239,350		249,236
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout	0						0	353,696		0		353,696
32. Other							0					0
33. Total group annuities	1,200	0	0	0	0	0	0	363,582	0	239,350	0	602,932
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	60,735 (f)						0	XXX	XXX	XXX	30,791	30,791
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	0 (f)						0	XXX	XXX	XXX	0	0
44. Long-term care (d)	768 (f)						0	XXX	XXX	XXX	0	0
45. Other health (d)	0 (f)						0	XXX	XXX	XXX	0	0
46. Total accident and health	61,503	0	0	0	0	0	0	XXX	XXX	XXX	30,791	30,791
47. Total	59,209,838 (c)	0	0	0	0	0	0	7,384,980	0	28,121,501	30,791	35,537,273

LIFE INSURANCE (STATE PAGE) (Continued)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Oklahoma DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	13 Incurred During Current Year	Claims Settled During Current Year: Totals Paid 14 Number of Pols/ Certs	Totals Paid 15 Amount	Reduction by Compromise 16 Number of Pols/ Certs	Reduction by Compromise 17 Amount	Amount Rejected 18 Number of Pols/ Certs	Amount Rejected 19 Amount	Total Settled During Current Year 20 Number of Pols/ Certs	Total Settled During Current Year 21 Amount	22 Unpaid December 31, Current Year	Policy Exhibit: Issued During Year 23 Number of Pols/ Certs	Issued During Year 24 Amount	Other Changes to In Force (Net) 25 Number of Pols/ Certs	Other Changes to In Force (Net) 26 Amount	In Force December 31, Current Year (b) 27 Number of Pols/ Certs	In Force December 31, Current Year (b) 28 Amount
Individual Life																
1. Industrial								0	0							
2. Whole	40,665	5	40,665	0	0	0	0	5	40,665	0	0	0	(11)	(251,974)	45	1,380,492
3. Term	100,000	1	100,000	0	0	0	0	1	100,000	0	0	40,000	(7)	(672,028)	291	51,700,000
4. Indexed								0	0							
5. Universal	100,000	1	100,000	0	0	0	0	1	100,000	0	0	0	0	5,118	20	2,528,477
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	240,665	7	240,665	0	0	0	0	7	240,665	0	0	40,000	(18)	(918,884)	356	55,608,969
Group Life																
12. Whole	15,178	5	15,178					5	15,178	0	0	0	(28)	(92,805)	0	0
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	15,178	5	15,178	0	0	0	0	5	15,178	0	0	0	(28)	(92,805)	0	0
Individual Annuities																
20. Fixed	1,595,946	17	1,400,210					17	1,400,210	446,840	67	11,323,371	(68)	(1,222,871)	735	65,022,145
21. Indexed	2,987,285	35	4,442,076					35	4,442,076	53,961	200	46,864,703	(137)	(13,031,973)	1,113	186,230,943
22. Variable with guarantees								0	0							
23. Variable without guarantees								0	0							
24. Life contingent payout	98,778	2	98,778					2	98,778		2	77,260	(5)	(303,231)	20	714,826
25. Other								0	0		6	743,534	(6)	(186,553)	39	2,000,960
26. Total individual annuities	4,682,009	54	5,941,064	0	0	0	0	54	5,941,064	500,801	275	59,008,867	(216)	(14,744,628)	1,907	253,968,874
Group Annuities																
27. Fixed	9,886	2	9,886					2	9,886	1,970	0	0	(24)	51,012	278	4,274,580
28. Indexed								0	0							
29. Variable with guarantees								0	0							
30. Variable without guarantees								0	0							
31. Life contingent payout	0	0	0					0	0		0	0	(2)	(225,770)	131	4,251,631
32. Other								0	0		0	0	0	0	0	0
33. Total group annuities	9,886	2	9,886	0	0	0	0	2	9,886	1,970	0	0	(26)	(174,757)	409	8,526,212
Accident and Health																
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)	30,602	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			(3)	(13,587)	9	67,303
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
44. Long-term care (d)	(197)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	(3,073)	3	0
45. Other health (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
46. Total accident and health	30,405	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	(3)	(16,660)	12	67,303
47. Total	4,978,143	68	6,206,792	0	0	0	0	68	6,206,792	502,772	275	59,048,867	(291)	(15,947,734)	2,684	318,171,357

(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: $ 533,653 Group: $ ..... Total: $ 533,653

(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 $ .....

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ 66,435 ; Vision Only $ ..... ; Dental Only $ ..... ; Federal Employees Health Benefits Plan $ .....
Title XVIII Medicare $ ..... ; Title XIX Medicaid $ ..... ; Credit A&H $ ..... ; Disability Income $ 0 ; Long-term Care $ 1,366 ; Other Health $ 0

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Oregon DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 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)	Claims and Benefits Paid: 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	5,740						0	406,785	16,824	8,063		431,672
3. Term	35,103						0	0	0	0		0
4. Indexed							0					0
5. Universal	51,883						0	0	0	66,762		66,762
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	92,726	0	0	0	0	0	0	406,785	16,824	74,825	0	498,434
Group Life												
12. Whole	(1,295)						0	0	0	0		0
13. Term							0	0	0	0		0
14. Universal							0	0	0	0		0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	(1,295)	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	39,936,991						0	7,167,343		8,438,230		15,605,574
21. Indexed	29,854,805						0	9,640,142		40,493,927		50,134,068
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout	165,953						0	420,192		0		420,192
25. Other							0					0
26. Total individual annuities	69,957,749	0	0	0	0	0	0	17,227,678	0	48,932,157	0	66,159,835
Group Annuities												
27. Fixed	0						0	82,665		480,085		562,750
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout	0						0	434,252		0		434,252
32. Other							0					0
33. Total group annuities	0	0	0	0	0	0	0	516,917	0	480,085	0	997,002
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	14,265 (f)						0	XXX	XXX	XXX	2,451	2,451
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	0 (f)						0	XXX	XXX	XXX	0	0
44. Long-term care (d)	83,588 (f)						0	XXX	XXX	XXX	2,731	2,731
45. Other health (d)	0 (f)						0	XXX	XXX	XXX	0	0
46. Total accident and health	97,853	0	0	0	0	0	0	XXX	XXX	XXX	5,182	5,182
47. Total	70,147,033 (c)	0	0	0	0	0	0	18,151,380	16,824	49,487,067	5,182	67,660,453

LIFE INSURANCE (STATE PAGE) (Continued)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Oregon DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole	401,856	157	423,610	0	0	0	0	157	423,610	18,281	0	0	114	84,329	2,356	5,562,005
3. Term	0	0	0	0	0	0	0	0	0	0	0	0	0	(17,000)	46	7,068,000
4. Indexed								0	0							
5. Universal	0	0	0	0	0	0	0	0	0	0	0	0	(4)	(474,606)	45	6,105,952
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	401,856	157	423,610	0	0	0	0	157	423,610	18,281	0	0	110	(407,277)	2,447	18,735,956
Group Life															
12. Whole	0	0	0					0	0	0	0	0	301	1,498,558	303	1,513,629
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	301	1,498,558	303	1,513,629
Individual Annuities															
20. Fixed	5,102,929	39	5,353,591					39	5,353,591	156,820	177	39,498,270	(83)	(7,119,379)	1,197	157,725,921
21. Indexed	10,969,633	86	9,313,119					86	9,313,119	2,363,355	139	29,829,086	(347)	(36,731,418)	1,873	246,012,283
22. Variable with guarantees								0	0							
23. Variable without guarantees								0	0							
24. Life contingent payout	20,243	1	20,243					1	20,243		10	306,453	0	(251,990)	89	3,024,548
25. Other								0	0		20	1,828,274	(18)	(1,435,775)	128	5,877,179
26. Total individual annuities	16,092,806	126	14,686,953	0	0	0	0	126	14,686,953	2,520,176	346	71,462,083	(448)	(45,538,562)	3,287	412,639,931
Group Annuities															
27. Fixed	87,329	3	82,665					3	82,665	4,664	0	0	21	(189,452)	301	7,281,760
28. Indexed								0	0							
29. Variable with guarantees								0	0							
30. Variable without guarantees								0	0							
31. Life contingent payout	0	0	0					0	0		0	0	(6)	(299,737)	131	4,792,767
32. Other								0	0		0	0	0	0	0	0
33. Total group annuities	87,329	3	82,665	0	0	0	0	3	82,665	4,664	0	0	15	(489,190)	432	12,074,527
Accident and Health															
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)	2,851	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	985	2	14,265
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
44. Long-term care (d)	6,978	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			(1)	19,390	30	87,833
45. Other health (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
46. Total accident and health	9,830	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	(1)	20,375	32	102,098
47. Total	16,591,821	286	15,193,228	0	0	0	0	286	15,193,228	2,543,121	346	71,462,083	(23)	(44,916,095)	6,501	445,066,141

(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: $ .....0 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 $ .....

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ ..... 14,263 ; Vision Only $ ..... ; Dental Only $ ..... ; Federal Employees Health Benefits Plan $ .....
Title XVIII Medicare $ ..... ; Title XIX Medicaid $ ..... ; Credit A&H $ ..... ; Disability Income $ .....0 ; Long-term Care $ ..... 76,895 ; Other Health $ 0

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Pennsylvania DURING THE YEAR 2025 NAIC Company Code 63312

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	129,270						0	66,085	(2,069)	35,708		99,724
3. Term	429,794						0	300,000	0	0		300,000
4. Indexed							0					0
5. Universal	322,938						0	1,825,000	0	15,676		1,840,676
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	882,002	0	0	0	0	0	0	2,191,085	(2,069)	51,385	0	2,240,400
Group Life												
12. Whole	0						0	0	0	0		0
13. Term							0	363	0	0		363
14. Universal							0	0	0	0		0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	363	0	0	0	363
Individual Annuities												
20. Fixed	278,095,828						0	33,503,373		102,766,645		136,270,018
21. Indexed	279,941,225						0	28,155,150		245,506,419		273,661,569
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout	116,040						0	833,740		0		833,740
25. Other							0					0
26. Total individual annuities	558,153,093	0	0	0	0	0	0	62,492,264	0	348,273,064	0	410,765,327
Group Annuities												
27. Fixed	2,993						0	2,826		599,721		602,548
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout	29,791						0	3,547,245		58,157		3,605,402
32. Other							0					0
33. Total group annuities	32,784	0	0	0	0	0	0	3,550,071	0	657,878	0	4,207,950
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	9,929 (f)						0	XXX	XXX	XXX	2,070	2,070
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	0 (f)						0	XXX	XXX	XXX	0	0
44. Long-term care (d)	6,300 (f)						0	XXX	XXX	XXX	0	0
45. Other health (d)	0 (f)						0	XXX	XXX	XXX	0	0
46. Total accident and health	16,229	0	0	0	0	0	0	XXX	XXX	XXX	2,070	2,070
47. Total	559,084,108 (c)	0	0	0	0	0	0	68,233,782	(2,069)	348,982,327	2,070	417,216,110

LIFE INSURANCE (STATE PAGE) (Continued)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Pennsylvania DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole	40,946	9	64,015	0	0	0	0	9	64,015	0	1	600,000	(10)	(381,972)	145	2,162,776
3. Term	100,000	2	300,000	0	0	0	0	2	300,000	0	0	15,000	(12)	(2,536,000)	445	109,583,999
4. Indexed								0	0							
5. Universal	1,701,000	6	1,825,000	0	0	0	0	6	1,825,000	101,000	0	5,000	(6)	(2,034,801)	308	40,828,247
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	1,841,946	17	2,189,015	0	0	0	0	17	2,189,015	101,000	1	620,000	(28)	(4,952,773)	898	152,575,022
Group Life															
12. Whole	0	0	0					0	0	0	0	0	(4)	(22,932)	0	0
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	(4)	(22,932)	0	0
Individual Annuities															
20. Fixed	30,097,883	296	28,224,791					296	28,224,791	6,771,348	1,859	289,257,287	(1,209)	(87,776,618)	10,663	1,302,517,833
21. Indexed	28,706,460	245	26,973,532					245	26,973,532	7,891,994	1,808	283,504,392	(2,121)	(167,115,447)	12,982	1,682,025,539
22. Variable with guarantees								0	0							
23. Variable without guarantees								0	0							
24. Life contingent payout	214,096	8	214,096					8	214,096		43	20,267,275	(41)	(19,897,974)	100	5,131,477
25. Other								0	0		48	3,382,386	(62)	(4,093,560)	324	15,435,382
26. Total individual annuities	59,018,438	549	55,412,419	0	0	0	0	549	55,412,419	14,663,342	3,758	596,411,340	(3,433)	(278,883,599)	24,069	3,005,110,230
Group Annuities															
27. Fixed	0	0	0					0	0	0	0	0	(10)	(841,222)	149	4,672,274
28. Indexed								0	0							
29. Variable with guarantees								0	0							
30. Variable without guarantees								0	0							
31. Life contingent payout	0	0	0					0	0	0	0	0	(43)	(2,791,073)	1,045	43,038,350
32. Other								0	0	0	0	0	0	(2,613)	1	4,796
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0	(53)	(3,634,908)	1,195	47,715,419
Accident and Health															
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)	2,300	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	158	3	10,228
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
44. Long-term care (d)	87	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	2	6,300
45. Other health (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
46. Total accident and health	2,387	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	158	5	16,528
47. Total	60,862,771	566	57,601,435	0	0	0	0	566	57,601,435	14,764,342	3,759	597,031,340	(3,518)	(287,494,055)	26,167	3,205,417,199

(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: $ 784,521 Group: $ ..... Total: $ 784,521

(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 $ .....

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ 10,228 ; Vision Only $ ..... ; Dental Only $ ..... ; Federal Employees Health Benefits Plan $ .....
Title XVIII Medicare $ ..... ; Title XIX Medicaid $ ..... ; Credit A&H $ ..... ; Disability Income $ 0 ; Long-term Care $ 6,300 ; Other Health $ 0

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Rhode Island DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 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)	Claims and Benefits Paid: 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	6,221						0	30,500	0	3,108		33,608
3. Term	53,822						0	0	0	0		0
4. Indexed							0					0
5. Universal	10,917						0	25,000	0	0		25,000
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	70,960	0	0	0	0	0	0	55,500	0	3,108	0	58,608
Group Life												
12. Whole	0						0	3,755	0	0		3,755
13. Term							0	0	0	0		0
14. Universal							0	0	0	0		0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	3,755	0	0	0	3,755
Individual Annuities												
20. Fixed	37,659,617						0	4,962,614		13,377,363		18,339,978
21. Indexed	30,978,630						0	2,642,684		18,194,888		20,837,573
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout	19,961,314						0	1,759,724		0		1,759,724
25. Other							0					0
26. Total individual annuities	88,599,561	0	0	0	0	0	0	9,365,023	0	31,572,252	0	40,937,275
Group Annuities												
27. Fixed	201,876						0	0		2,156,208		2,156,208
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout	0						0	485,479		0		485,479
32. Other							0					0
33. Total group annuities	201,876	0	0	0	0	0	0	485,479	0	2,156,208	0	2,641,687
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	0 (f)						0	XXX	XXX	XXX	0	0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	0 (f)						0	XXX	XXX	XXX	0	0
44. Long-term care (d)	1,349 (f)						0	XXX	XXX	XXX	0	0
45. Other health (d)	0 (f)						0	XXX	XXX	XXX	0	0
46. Total accident and health	1,349	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	88,873,746 (c)	0	0	0	0	0	0	9,909,757	0	33,731,567	0	43,641,324

LIFE INSURANCE (STATE PAGE) (Continued)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Rhode Island DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole	5,000	2	30,500	0	0	0	0	2	30,500	0	0	0	(2)	(31,473)	20	514,606
3. Term	0	0	0	0	0	0	0	0	0	0	0	0	1	1,000,000	19	4,910,000
4. Indexed								0	0							
5. Universal	25,000	1	25,000	0	0	0	0	1	25,000	0	0	0	1	386,106	11	1,899,947
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	30,000	3	55,500	0	0	0	0	3	55,500	0	0	0	0	1,354,634	50	7,324,554
Group Life															
12. Whole	3,755	3	3,755					3	3,755	0	0	0	(4)	(29,390)	0	0
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	3,755	3	3,755	0	0	0	0	3	3,755	0	0	0	(4)	(29,390)	0	0
Individual Annuities															
20. Fixed	3,621,530	39	3,993,553					39	3,993,553	523,083	250	38,395,824	(134)	(12,569,464)	1,364	158,471,062
21. Indexed	1,717,383	24	2,604,505					24	2,604,505	0	169	31,336,671	(181)	(12,278,958)	1,511	207,816,983
22. Variable with guarantees								0	0							
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0					0	0		1	98,692	31	20,801,166	75	25,145,331
25. Other								0	0		20	673,135	(17)	(749,409)	86	2,224,226
26. Total individual annuities	5,338,913	63	6,598,058	0	0	0	0	63	6,598,058	523,083	440	70,504,322	(301)	(4,796,666)	3,036	393,657,602
Group Annuities															
27. Fixed	0	0	0					0	0	0	0	0	(26)	(1,084,906)	329	21,333,643
28. Indexed								0	0							
29. Variable with guarantees								0	0							
30. Variable without guarantees								0	0							
31. Life contingent payout	0	0	0					0	0	0	0	0	(1)	(245,929)	122	7,125,666
32. Other								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	(27)	(1,330,834)	451	28,459,309
Accident and Health															
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
44. Long-term care (d)	(6,893)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			(1)	(6,153)	1	4,040
45. Other health (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
46. Total accident and health	(6,893)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	(1)	(6,153)	1	4,040
47. Total	5,365,774	69	6,657,313	0	0	0	0	69	6,657,313	523,083	440	70,504,322	(333)	(4,808,410)	3,538	429,445,505

(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: $ .....0 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 $ .....

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ .....0 ; Vision Only $ ..... ; Dental Only $ ..... ; Federal Employees Health Benefits Plan $ .....
Title XVIII Medicare $ ..... ; Title XIX Medicaid $ ..... ; Credit A&H $ ..... ; Disability Income $ .....0 ; Long-term Care $ .....2,055 ; Other Health $ 0

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF South Carolina DURING THE YEAR 2025 NAIC Company Code 63312

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	53,885						0	61,364	0	9,339		70,703
3. Term	180,725						0	0	0	0		0
4. Indexed							0					0
5. Universal	77,840						0	0	0	34,004		34,004
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	312,450	0	0	0	0	0	0	61,364	0	43,343	0	104,707
Group Life												
12. Whole	0						0	0	0	0		0
13. Term							0	0	0	0		0
14. Universal							0	0	0	0		0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	84,495,336						0	15,491,353		32,460,485		47,951,838
21. Indexed	179,119,733						0	26,286,036		130,523,119		156,809,155
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	334,637		0		334,637
25. Other							0					0
26. Total individual annuities	263,615,069	0	0	0	0	0	0	42,112,025	0	162,983,604	0	205,095,629
Group Annuities												
27. Fixed	3,741						0	12,578		351,570		364,148
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout	7,746						0	940,589		0		940,589
32. Other							0					0
33. Total group annuities	11,487	0	0	0	0	0	0	953,167	0	351,570	0	1,304,737
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	123,744 (f)						0	XXX	XXX	XXX	87,101	87,101
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	0 (f)						0	XXX	XXX	XXX	0	0
44. Long-term care (d)	18,015 (f)						0	XXX	XXX	XXX	145,930	145,930
45. Other health (d)	49 (f)						0	XXX	XXX	XXX	49	49
46. Total accident and health	141,808	0	0	0	0	0	0	XXX	XXX	XXX	233,080	233,080
47. Total	264,080,814 (c)	0	0	0	0	0	0	43,126,556	0	163,378,517	233,080	206,738,154

LIFE INSURANCE (STATE PAGE) (Continued)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF South Carolina DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole	63,864	9	61,364	0	0	0	0	9	61,364	10,000	0	0	(20)	(118,770)	90	1,029,175
3. Term	0	0	0	0	0	0	0	0	0	0	0	0	(2)	(72,000)	173	39,029,249
4. Indexed								0	0							
5. Universal	0	0	0	0	0	0	0	0	0	0	0	0	(4)	(318,005)	82	10,784,121
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	63,864	9	61,364	0	0	0	0	9	61,364	10,000	0	0	(26)	(508,775)	345	50,842,545
Group Life															
12. Whole	0	0	0					0	0	0	0	0	(4)	(18,911)	0	0
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	(4)	(18,911)	0	0
Individual Annuities															
20. Fixed	16,742,601	90	11,914,287					90	11,914,287	5,992,059	505	87,840,435	(304)	(30,629,686)	2,624	372,690,232
21. Indexed	26,847,657	162	25,418,161					162	25,418,161	4,475,807	1,047	176,245,516	(923)	(91,666,402)	6,733	1,021,074,401
22. Variable with guarantees								0	0							
23. Variable without guarantees								0	0							
24. Life contingent payout	54,931	5	54,931					5	54,931		7	196,574	(6)	(402,384)	45	1,754,650
25. Other								0	0		31	2,671,441	(35)	(2,944,178)	195	10,094,513
26. Total individual annuities	43,645,189	257	37,387,379	0	0	0	0	257	37,387,379	10,467,865	1,590	266,953,966	(1,268)	(125,642,649)	9,597	1,405,613,795
Group Annuities															
27. Fixed	12,578	4	12,578					4	12,578	602	0	0	(10)	(60,003)	179	4,004,186
28. Indexed								0	0							
29. Variable with guarantees								0	0							
30. Variable without guarantees								0	0							
31. Life contingent payout	2,924	1	2,924					1	2,924		0	0	0	540,548	191	14,219,608
32. Other								0	0		0	0	0	0	0	0
33. Total group annuities	15,502	5	15,502	0	0	0	0	5	15,502	602	0	0	(10)	480,545	370	18,223,794
Accident and Health															
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)	88,222	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			(4)	(57,633)	22	130,149
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
44. Long-term care (d)	160,504	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			(2)	1,397	11	27,854
45. Other health (d)	50	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	(16)	1	49
46. Total accident and health	248,775	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	(6)	(56,252)	34	158,052
47. Total	43,973,330	271	37,464,244	0	0	0	0	271	37,464,244	10,478,468	1,590	266,953,966	(1,314)	(125,746,042)	10,346	1,474,838,186

(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: $ 197,933 Group: $ ..... Total: $ 197,933

(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 $ .....

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ 135,677 ; Vision Only $ ..... ; Dental Only $ ..... ; Federal Employees Health Benefits Plan $ .....
Title XVIII Medicare $ ..... ; Title XIX Medicaid $ ..... ; Credit A&H $ ..... ; Disability Income $ 0 ; Long-term Care $ 28,557 ; Other Health $ 49

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF South Dakota DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 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)	Claims and Benefits Paid: 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	1,200						0	0	0	0		0
3. Term	17,640						0	500,000	0	0		500,000
4. Indexed							0					0
5. Universal	8,436						0	0	0	6		6
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	27,276	0	0	0	0	0	0	500,000	0	6	0	500,006
Group Life												
12. Whole	0						0	0	0	0		0
13. Term							0	0	0	0		0
14. Universal							0	0	0	0		0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	6,065,331						0	1,255,054		2,723,289		3,978,343
21. Indexed	10,197,591						0	1,537,781		10,645,504		12,183,285
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	43,729		0		43,729
25. Other							0					0
26. Total individual annuities	16,262,922	0	0	0	0	0	0	2,836,564	0	13,368,793	0	16,205,357
Group Annuities												
27. Fixed	2,400						0	14,033		220,221		234,254
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout	0						0	604,994		0		604,994
32. Other							0					0
33. Total group annuities	2,400	0	0	0	0	0	0	619,027	0	220,221	0	839,248
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	0 (f)						0	XXX	XXX	XXX	0	0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	0 (f)						0	XXX	XXX	XXX	0	0
44. Long-term care (d)	0 (f)						0	XXX	XXX	XXX	0	0
45. Other health (d)	25 (f)						0	XXX	XXX	XXX	0	0
46. Total accident and health	25	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	16,292,623 (c)	0	0	0	0	0	0	3,955,591	0	13,589,020	0	17,544,611

LIFE INSURANCE (STATE PAGE) (Continued)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF South Dakota DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	13 Incurred During Current Year	Claims Settled During Current Year: Totals Paid 14 Number of Pols/ Certs	Totals Paid 15 Amount	Reduction by Compromise 16 Number of Pols/ Certs	Reduction by Compromise 17 Amount	Amount Rejected 18 Number of Pols/ Certs	Amount Rejected 19 Amount	Total Settled During Current Year 20 Number of Pols/ Certs	Total Settled During Current Year 21 Amount	22 Unpaid December 31, Current Year	Policy Exhibit: Issued During Year 23 Number of Pols/ Certs	Issued During Year 24 Amount	Other Changes to In Force (Net) 25 Number of Pols/ Certs	Other Changes to In Force (Net) 26 Amount	In Force December 31, Current Year (b) 27 Number of Pols/ Certs	In Force December 31, Current Year (b) 28 Amount
Individual Life																
1. Industrial								0	0							
2. Whole	0	0	0	0	0	0	0	0	0	0	0	0	0	0	3	14,244
3. Term	500,000	1	500,000	0	0	0	0	1	500,000	0	0	0	(2)	(601,000)	15	5,100,000
4. Indexed								0	0							
5. Universal	0	0	0	0	0	0	0	0	0	0	0	0	(1)	(75,000)	7	1,005,925
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	500,000	1	500,000	0	0	0	0	1	500,000	0	0	0	(3)	(676,000)	25	6,120,169
Group Life																
12. Whole	0	0	0					0	0	0	0	0	0	0	0	0
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities																
20. Fixed	503,353	6	688,202					6	688,202	4,592	50	5,962,886	(27)	(1,765,793)	277	36,099,785
21. Indexed	1,416,979	13	1,537,781					13	1,537,781	0	67	9,348,035	(74)	(5,578,907)	521	70,684,460
22. Variable with guarantees								0	0							
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0					0	0	0	0	0	(1)	(17,989)	6	394,427
25. Other								0	0		0	0	(6)	(304,452)	28	975,893
26. Total individual annuities	1,920,332	19	2,225,984	0	0	0	0	19	2,225,984	4,592	117	15,310,920	(108)	(7,667,141)	832	108,154,566
Group Annuities																
27. Fixed	11,221	3	11,221					3	11,221	0	0	0	(11)	(187,483)	96	1,418,303
28. Indexed								0	0							
29. Variable with guarantees								0	0							
30. Variable without guarantees								0	0							
31. Life contingent payout	0	0	0					0	0		0	0	(4)	(260,981)	154	7,767,526
32. Other								0	0		0	0	0	(2,708)	1	5,539
33. Total group annuities	11,221	3	11,221	0	0	0	0	3	11,221	0	0	0	(15)	(451,173)	251	9,191,368
Accident and Health																
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
44. Long-term care (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
45. Other health (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	1	25
46. Total accident and health	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	1	25
47. Total	2,431,553	23	2,737,204	0	0	0	0	23	2,737,204	4,592	117	15,310,920	(126)	(8,794,314)	1,109	123,466,128

(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: $ .....0 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 $ .....

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ .....0 ; Vision Only $ ..... ; Dental Only $ ..... ; Federal Employees Health Benefits Plan $ .....
Title XVIII Medicare $ ..... ; Title XIX Medicaid $ ..... ; Credit A&H $ ..... ; Disability Income $ .....0 ; Long-term Care $ .....0 ; Other Health $ 0

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Tennessee DURING THE YEAR 2025 NAIC Company Code 63312

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	22,328						0	48,950	0	0		48,950
3. Term	199,991						0	50,000	0	0		50,000
4. Indexed							0					0
5. Universal	51,114						0	0	0	99,100		99,100
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	273,433	0	0	0	0	0	0	98,950	0	99,100	0	198,050
Group Life												
12. Whole	(426)						0	446,842	5,275	2,279		454,396
13. Term							0	0	0	0		0
14. Universal							0	0	0	0		0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	(426)	0	0	0	0	0	0	446,842	5,275	2,279	0	454,396
Individual Annuities												
20. Fixed	93,242,158						0	18,664,048		43,829,470		62,493,518
21. Indexed	211,423,402						0	25,237,973		173,734,002		198,971,974
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout	93,582						0	784,757		0		784,757
25. Other							0					0
26. Total individual annuities	304,759,142	0	0	0	0	0	0	44,686,777	0	217,563,471	0	262,250,249
Group Annuities												
27. Fixed	30,040						0	319,089		672,616		991,706
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout	0						0	1,755,449		0		1,755,449
32. Other							0					0
33. Total group annuities	30,040	0	0	0	0	0	0	2,074,538	0	672,616	0	2,747,154
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	59,853 (f)						0	XXX	XXX	XXX	59,196	59,196
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	0 (f)						0	XXX	XXX	XXX	0	0
44. Long-term care (d)	120,460 (f)						0	XXX	XXX	XXX	141,561	141,561
45. Other health (d)	0 (f)						0	XXX	XXX	XXX	0	0
46. Total accident and health	180,313	0	0	0	0	0	0	XXX	XXX	XXX	200,757	200,757
47. Total	305,242,502 (c)	0	0	0	0	0	0	47,307,107	5,275	218,337,467	200,757	265,850,606

LIFE INSURANCE (STATE PAGE) (Continued)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Tennessee DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole	50,928	5	38,950	0	0	0	0	5	38,950	11,979	1	100,000	(17)	(159,295)	63	2,547,995
3. Term	50,000	1	50,000	0	0	0	0	1	50,000	0	0	0	(9)	(3,309,000)	181	57,463,900
4. Indexed								0	0							
5. Universal	10,000	1	10,000	0	0	0	0	1	10,000	0	0	0	(7)	(834,285)	58	7,321,244
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	110,928	7	98,950	0	0	0	0	7	98,950	11,979	1	100,000	(33)	(4,302,580)	302	67,333,139
Group Life															
12. Whole	450,602	76	452,117					76	452,117	8,374	0	0	(727)	(3,941,678)	1	0
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	450,602	76	452,117	0	0	0	0	76	452,117	8,374	0	0	(727)	(3,941,678)	1	0
Individual Annuities															
20. Fixed	18,940,048	173	16,987,380					173	16,987,380	4,131,424	525	96,815,640	(584)	(46,822,169)	3,976	473,773,940
21. Indexed	25,188,104	192	25,063,157					192	25,063,157	6,202,170	1,304	213,846,705	(1,308)	(119,385,046)	8,408	1,281,780,792
22. Variable with guarantees								0	0							
23. Variable without guarantees								0	0							
24. Life contingent payout	173,573	7	173,573					7	173,573		12	1,042,297	(13)	(785,996)	81	4,542,371
25. Other								0	0		9	670,462	(26)	(1,626,751)	108	4,160,760
26. Total individual annuities	44,301,725	372	42,224,110	0	0	0	0	372	42,224,110	10,333,594	1,850	312,375,104	(1,931)	(168,619,963)	12,573	1,764,257,863
Group Annuities															
27. Fixed	318,254	23	318,254					23	318,254	4,078	0	0	(38)	(342,203)	687	9,618,871
28. Indexed								0	0							
29. Variable with guarantees								0	0							
30. Variable without guarantees								0	0							
31. Life contingent payout	0	0	0					0	0		0	0	(13)	(947,307)	474	20,820,323
32. Other								0	0		0	0	0	(637)	1	5,029
33. Total group annuities	318,254	23	318,254	0	0	0	0	23	318,254	4,078	0	0	(51)	(1,290,147)	1,162	30,444,223
Accident and Health															
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)	58,939	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			(3)	(9,286)	8	60,464
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
44. Long-term care (d)	176,027	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	14,391	43	157,303
45. Other health (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
46. Total accident and health	234,966	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	(3)	5,105	51	217,767
47. Total	45,416,476	478	43,093,431	0	0	0	0	478	43,093,431	10,358,025	1,851	312,475,104	(2,745)	(178,149,263)	14,089	1,862,252,992

(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: $ .....0 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 $ .....

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ .....60,501 ; Vision Only $ ..... ; Dental Only $ ..... ; Federal Employees Health Benefits Plan $ .....
Title XVIII Medicare $ ..... ; Title XIX Medicaid $ ..... ; Credit A&H $ ..... ; Disability Income $ .....0 ; Long-term Care $ .....150,352 ; Other Health $ 0

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Texas DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 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)	Claims and Benefits Paid: 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	119,919						0	9,791	0	27,911		37,702
3. Term	1,218,045						0	2,522,999	0	0		2,522,999
4. Indexed							0					0
5. Universal	462,442						0	985,027	0	203,433		1,188,460
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	1,800,406	0	0	0	0	0	0	3,517,817	0	231,344	0	3,749,161
Group Life												
12. Whole	0						0	0	0	0		0
13. Term							0	1,058	0	0		1,058
14. Universal							0	0	0	0		0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	1,058	0	0	0	1,058
Individual Annuities												
20. Fixed	182,700,037						0	34,110,290		85,304,888		119,415,178
21. Indexed	204,597,969						0	36,835,717		196,317,500		233,153,217
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout	122,272						0	1,654,165		77,615		1,731,780
25. Other							0					0
26. Total individual annuities	387,420,278	0	0	0	0	0	0	72,600,172	0	281,700,003	0	354,300,175
Group Annuities												
27. Fixed	261,616						0	533,817		4,092,902		4,626,720
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout	20,925						0	2,305,991		7,831		2,313,822
32. Other							0					0
33. Total group annuities	282,541	0	0	0	0	0	0	2,839,808	0	4,100,733	0	6,940,541
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	110,604 (f)						0	XXX	XXX	XXX	40,616	40,616
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	0 (f)						0	XXX	XXX	XXX	0	0
44. Long-term care (d)	9,271 (f)						0	XXX	XXX	XXX	40,552	40,552
45. Other health (d)	0 (f)						0	XXX	XXX	XXX	23	23
46. Total accident and health	119,875	0	0	0	0	0	0	XXX	XXX	XXX	81,191	81,191
47. Total	389,623,100 (c)	0	0	0	0	0	0	78,958,855	0	286,032,081	81,191	365,072,126

LIFE INSURANCE (STATE PAGE) (Continued)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Texas DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole	26,118	4	9,791	0	0	0	0	4	9,791	16,327	1	25,000	(17)	(108,904)	193	2,229,147
3. Term	1,672,999	9	2,522,999	0	0	0	0	9	2,522,999	150,000	0	0	(49)	(13,998,998)	952	218,709,056
4. Indexed								0	0							
5. Universal	1,016,297	13	985,027	0	0	0	0	13	985,027	106,270	0	0	(31)	(3,832,412)	545	79,369,298
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	2,715,414	26	3,517,817	0	0	0	0	26	3,517,817	272,597	1	25,000	(97)	(17,940,314)	1,690	300,307,501
Group Life															
12. Whole	0	0	0					0	0	0	0	0	(25)	(124,295)	0	0
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	(25)	(124,295)	0	0
Individual Annuities															
20. Fixed	28,479,471	249	27,409,807					249	27,409,807	9,894,539	950	192,488,325	(816)	(82,278,462)	7,146	1,020,879,017
21. Indexed	32,733,562	237	35,340,051					237	35,340,051	6,818,857	1,086	211,558,493	(1,374)	(135,537,565)	9,311	1,409,073,690
22. Variable with guarantees								0	0							
23. Variable without guarantees								0	0							
24. Life contingent payout	146,843	6	146,843					6	146,843		18	2,222,678	(16)	(1,060,379)	206	11,584,048
25. Other								0	0		58	4,605,183	(63)	(4,015,531)	382	19,431,951
26. Total individual annuities	61,359,876	492	62,896,700	0	0	0	0	492	62,896,700	16,713,396	2,112	410,874,680	(2,269)	(222,891,936)	17,045	2,460,968,707
Group Annuities															
27. Fixed	510,775	36	533,817					36	533,817	238,742	0	0	(215)	(2,519,077)	3,290	54,885,924
28. Indexed								0	0							
29. Variable with guarantees								0	0							
30. Variable without guarantees								0	0							
31. Life contingent payout	0	0	0					0	0		0	0	(22)	(2,362,812)	613	32,776,507
32. Other								0	0		0	0	0	(11,280)	1	44,829
33. Total group annuities	510,775	36	533,817	0	0	0	0	36	533,817	238,742	0	0	(237)	(4,893,169)	3,904	87,707,260
Accident and Health															
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)	40,476	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			(1)	5,722	15	99,329
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
44. Long-term care (d)	231,231	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			1	3,276	7	10,693
45. Other health (d)	23	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	(47)	1	0
46. Total accident and health	271,730	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	8,951	23	110,022
47. Total	64,857,796	554	66,948,335	0	0	0	0	554	66,948,335	17,224,735	2,113	410,899,680	(2,628)	(245,840,763)	22,662	2,849,093,490

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

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

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: $ 1,593,288 Group: $ ..... Total: $ 1,593,288

(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 $ .....

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ 101,833 ; Vision Only $ ..... ; Dental Only $ ..... ; Federal Employees Health Benefits Plan $ .....
Title XVIII Medicare $ ..... ; Title XIX Medicaid $ ..... ; Credit A&H $ ..... ; Disability Income $ 0 ; Long-term Care $ 11,978 ; Other Health $ 23

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Utah DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 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)	Claims and Benefits Paid: 8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole	7,977						0	0	0	1,475		1,475
3. Term	53,588						0	0	0	0		0
4. Indexed							0					0
5. Universal	9,078						0	100,000	0	11,175		111,175
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	70,643	0	0	0	0	0	0	100,000	0	12,650	0	112,650
Group Life												
12. Whole	0						0	0	0	0		0
13. Term							0	0	0	0		0
14. Universal							0	0	0	0		0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	14,554,438						0	5,466,121		12,336,335		17,802,456
21. Indexed	31,163,500						0	9,996,642		50,437,027		60,433,669
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout	441,000						0	3,001,453		0		3,001,453
25. Other							0					0
26. Total individual annuities	46,158,938	0	0	0	0	0	0	18,464,215	0	62,773,363	0	81,237,578
Group Annuities												
27. Fixed	0						0	0		13,732		13,732
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout	2,195						0	142,610		0		142,610
32. Other							0					0
33. Total group annuities	2,195	0	0	0	0	0	0	142,610	0	13,732	0	156,342
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	41,024 (f)						0	XXX	XXX	XXX	10,359	10,359
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	0 (f)						0	XXX	XXX	XXX	0	0
44. Long-term care (d)	0 (f)						0	XXX	XXX	XXX	0	0
45. Other health (d)	0 (f)						0	XXX	XXX	XXX	0	0
46. Total accident and health	41,024	0	0	0	0	0	0	XXX	XXX	XXX	10,359	10,359
47. Total	46,272,800 (c)	0	0	0	0	0	0	18,706,825	0	62,799,745	10,359	81,516,930

LIFE INSURANCE (STATE PAGE) (Continued)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Utah DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole	0	0	0	0	0	0	0	0	0	0	0	0	(6)	(512,876)	16	129,501
3. Term	0	0	0	0	0	0	0	0	0	0	0	10,000	(3)	(522,000)	54	16,264,000
4. Indexed								0	0							
5. Universal	100,000	1	100,000	0	0	0	0	1	100,000	0	0	0	(2)	(150,000)	8	1,071,961
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	100,000	1	100,000	0	0	0	0	1	100,000	0	0	10,000	(11)	(1,184,876)	78	17,465,462
Group Life															
12. Whole	0	0	0					0	0	0	0	0	(1)	(2,550)	0	0
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	(1)	(2,550)	0	0
Individual Annuities															
20. Fixed	3,837,190	38	3,722,681					38	3,722,681	632,058	94	14,942,724	(82)	(10,155,742)	850	88,328,450
21. Indexed	9,922,603	80	9,634,226					80	9,634,226	1,136,178	185	32,484,457	(417)	(43,823,638)	2,486	314,645,970
22. Variable with guarantees								0	0							
23. Variable without guarantees								0	0							
24. Life contingent payout	50,501	1	50,501					1	50,501		10	1,266,019	(11)	(2,525,611)	98	16,900,841
25. Other								0	0		7	833,554	(25)	(1,463,603)	114	4,186,819
26. Total individual annuities	13,810,294	119	13,407,408	0	0	0	0	119	13,407,408	1,768,235	296	49,526,754	(535)	(57,968,595)	3,548	424,062,080
Group Annuities															
27. Fixed	0	0	0					0	0	0	0	0	(2)	52,131	44	773,925
28. Indexed								0	0							
29. Variable with guarantees								0	0							
30. Variable without guarantees								0	0							
31. Life contingent payout	0	0	0					0	0	0	0	0	(2)	(178,665)	51	2,479,256
32. Other								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	(4)	(126,534)	95	3,253,181
Accident and Health															
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)	11,577	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	2,453	7	41,024
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
44. Long-term care (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
45. Other health (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
46. Total accident and health	11,577	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	2,453	7	41,024
47. Total	13,921,871	120	13,507,408	0	0	0	0	120	13,507,408	1,768,235	296	49,536,754	(551)	(59,280,102)	3,728	444,821,748

(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: $ .....0 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 $ .....

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ ..... 40,916 ; Vision Only $ ..... ; Dental Only $ ..... ; Federal Employees Health Benefits Plan $ .....
Title XVIII Medicare $ ..... ; Title XIX Medicaid $ ..... ; Credit A&H $ ..... ; Disability Income $ .....0 ; Long-term Care $ .....0 ; Other Health $ 0

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Vermont DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 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)	Claims and Benefits Paid: 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	1,469						0	6,250	0	0		6,250
3. Term	8,683						0	4,359	0	0		4,359
4. Indexed							0					0
5. Universal	9,880						0	0	0	16,080		16,080
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	20,032	0	0	0	0	0	0	10,609	0	16,080	0	26,688
Group Life												
12. Whole	0						0	0	0	0		0
13. Term							0	0	0	0		0
14. Universal							0	0	0	0		0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	4,775,859						0	2,552,077		1,752,297		4,304,374
21. Indexed	18,020,060						0	1,121,850		11,580,750		12,702,600
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	161,388		(16,329)		145,059
25. Other							0					0
26. Total individual annuities	22,795,919	0	0	0	0	0	0	3,835,315	0	13,316,718	0	17,152,033
Group Annuities												
27. Fixed	11,076						0	68,833		30,803		99,636
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout	0						0	186,432		0		186,432
32. Other							0					0
33. Total group annuities	11,076	0	0	0	0	0	0	255,265	0	30,803	0	286,068
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	0 (f)						0	XXX	XXX	XXX	0	0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	0 (f)						0	XXX	XXX	XXX	0	0
44. Long-term care (d)	10,447 (f)						0	XXX	XXX	XXX	3,823	3,823
45. Other health (d)	0 (f)						0	XXX	XXX	XXX	0	0
46. Total accident and health	10,447	0	0	0	0	0	0	XXX	XXX	XXX	3,823	3,823
47. Total	22,837,474 (c)	0	0	0	0	0	0	4,101,189	0	13,363,601	3,823	17,468,613

LIFE INSURANCE (STATE PAGE) (Continued)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Vermont DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year								22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life																
1. Industrial								0	0							
2. Whole	10,609	4	10,609	0	0	0	0	4	10,609	0	0	0	(3)	(6,258)	14	107,833
3. Term	0	0	0	0	0	0	0	0	0	0	0	0	(1)	(101,000)	10	2,102,000
4. Indexed								0	0							
5. Universal	0	0	0	0	0	0	0	0	0	0	0	0	(1)	(89,113)	3	1,576,754
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	10,609	4	10,609	0	0	0	0	4	10,609	0	0	0	(5)	(196,371)	27	3,786,587
Group Life																
12. Whole	0	0	0					0	0	0	0	0	(1)	(4,149)	0	0
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	(1)	(4,149)	0	0
Individual Annuities																
20. Fixed	1,936,444	18	1,999,353					18	1,999,353	64,277	36	4,621,270	(30)	(327,995)	409	35,375,865
21. Indexed	1,018,070	17	1,046,850					17	1,046,850	60,334	98	17,402,148	(90)	(4,665,462)	693	92,544,093
22. Variable with guarantees								0	0							
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0					0	0		1	15,461	(1)	(61,279)	31	1,261,648
25. Other								0	0		9	396,430	(7)	(480,345)	49	1,755,565
26. Total individual annuities	2,954,514	35	3,046,202	0	0	0	0	35	3,046,202	124,611	144	22,435,309	(128)	(5,535,081)	1,182	130,937,172
Group Annuities																
27. Fixed	68,833	1	68,833					1	68,833	0	0	0	(1)	(36,421)	92	2,362,845
28. Indexed								0	0							
29. Variable with guarantees								0	0							
30. Variable without guarantees								0	0							
31. Life contingent payout	0	0	0					0	0		0	0	(3)	(240,692)	53	1,712,385
32. Other								0	0		0	0	0	0	0	0
33. Total group annuities	68,833	1	68,833	0	0	0	0	1	68,833	0	0	0	(4)	(277,113)	145	4,075,230
Accident and Health																
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
44. Long-term care (d)	3,074	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			(2)	(4,119)	11	16,248
45. Other health (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
46. Total accident and health	3,074	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	(2)	(4,119)	11	16,248
47. Total	3,037,029	40	3,125,644	0	0	0	0	40	3,125,644	124,611	144	22,435,309	(140)	(6,016,832)	1,365	138,815,236

(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: $ .....0 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 $ .....

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ .....0 ; Vision Only $ ..... ; Dental Only $ ..... ; Federal Employees Health Benefits Plan $ .....
Title XVIII Medicare $ ..... ; Title XIX Medicaid $ ..... ; Credit A&H $ ..... ; Disability Income $ .....0 ; Long-term Care $ ..... 16,470 ; Other Health $ 0

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Virginia DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members 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)	Claims and Benefits Paid 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	57,455						0	38,802	0	10,469		49,271
3. Term	363,161						0	100,000	0	0		100,000
4. Indexed							0					0
5. Universal	233,794						0	400,000	0	41,024		441,024
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	654,410	0	0	0	0	0	0	538,802	0	51,494	0	590,296
Group Life												
12. Whole	0						0	0	0	0		0
13. Term							0	0	0	0		0
14. Universal							0	0	0	0		0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	115,802,715						0	15,313,310		18,358,376		33,671,686
21. Indexed	149,253,698						0	18,359,523		88,738,977		107,098,500
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	380,071		0		380,071
25. Other							0					0
26. Total individual annuities	265,056,413	0	0	0	0	0	0	34,052,904	0	107,097,353	0	141,150,257
Group Annuities												
27. Fixed	11,476						0	145,512		287,515		433,027
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout	(27,432)						0	620,253		0		620,253
32. Other							0					0
33. Total group annuities	(15,956)	0	0	0	0	0	0	765,764	0	287,515	0	1,053,280
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	30,329 (f)						0	XXX	XXX	XXX	7,065	7,065
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	0 (f)						0	XXX	XXX	XXX	0	0
44. Long-term care (d)	151,228 (f)						0	XXX	XXX	XXX	235,240	235,240
45. Other health (d)	0 (f)						0	XXX	XXX	XXX	0	0
46. Total accident and health	181,557	0	0	0	0	0	0	XXX	XXX	XXX	242,305	242,305
47. Total	265,876,424 (c)	0	0	0	0	0	0	35,357,470	0	107,436,362	242,305	143,036,137

LIFE INSURANCE (STATE PAGE) (Continued)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Virginia DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole	42,908	6	38,802	0	0	0	0	6	38,802	10,106	0	0	(19)	(150,912)	117	1,882,103
3. Term	100,000	1	100,000	0	0	0	0	1	100,000	0	0	0	(13)	(2,059,500)	395	101,495,262
4. Indexed								0	0						
5. Universal	250,000	6	400,000	0	0	0	0	6	400,000	0	0	0	(12)	(1,129,433)	257	42,951,191
6. Universal with secondary guarantees								0	0						
7. Variable								0	0						
8. Variable universal								0	0						
9. Credit								0	0						
10. Other								0	0						
11. Total individual life	392,908	13	538,802	0	0	0	0	13	538,802	10,106	0	0	(44)	(3,339,845)	769	146,328,556
Group Life															
12. Whole	0	0	0					0	0	0	0	0	(11)	(59,901)	0	0
13. Term								0	0						
14. Universal								0	0						
15. Variable								0	0						
16. Variable universal								0	0						
17. Credit								0	0						(a)
18. Other								0	0						
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	(11)	(59,901)	0	0
Individual Annuities															
20. Fixed	11,960,495	80	12,008,591					80	12,008,591	1,050,109	704	127,003,446	(260)	(23,088,174)	2,545	353,813,626
21. Indexed	19,993,466	157	17,998,172					157	17,998,172	4,682,200	805	157,693,893	(791)	(63,957,377)	6,136	867,672,880
22. Variable with guarantees								0	0						
23. Variable without guarantees								0	0						
24. Life contingent payout	132,935	3	132,935					3	132,935		7	513,098	(5)	(243,273)	49	2,248,115
25. Other								0	0		28	2,306,319	(35)	(2,728,806)	163	7,722,510
26. Total individual annuities	32,086,896	240	30,139,699	0	0	0	0	240	30,139,699	5,732,309	1,544	287,516,757	(1,091)	(90,017,630)	8,893	1,231,457,130
Group Annuities															
27. Fixed	108,551	6	145,512					6	145,512	1,381	0	0	(18)	(285,723)	363	5,729,412
28. Indexed								0	0						
29. Variable with guarantees								0	0						
30. Variable without guarantees								0	0						
31. Life contingent payout	0	0	0					0	0		0	0	(11)	(468,105)	195	6,875,534
32. Other								0	0		0	0	0	0	0	0
33. Total group annuities	108,551	6	145,512	0	0	0	0	6	145,512	1,381	0	0	(29)	(753,828)	558	12,604,946
Accident and Health															
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)	7,280	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			(1)	(3,339)	5	30,330
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
44. Long-term care (d)	46,141	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			(4)	(29,125)	87	175,071
45. Other health (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
46. Total accident and health	53,421	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	(5)	(32,464)	92	205,401
47. Total	32,641,776	259	30,824,012	0	0	0	0	259	30,824,012	5,743,796	1,544	287,516,757	(1,180)	(94,203,668)	10,312	1,390,596,033

(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: $ .....0 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 $ .....

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ .....30,282 ; Vision Only $ ..... ; Dental Only $ ..... ; Federal Employees Health Benefits Plan $ .....
Title XVIII Medicare $ ..... ; Title XIX Medicaid $ ..... ; Credit A&H $ ..... ; Disability Income $ .....0 ; Long-term Care $ .....192,235 ; Other Health $ 0

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Washington DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 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)	Claims and Benefits Paid: 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	10,141						0	41,247	0	0		41,247
3. Term	232,318						0	150,000	0	0		150,000
4. Indexed							0					0
5. Universal	57,561						0	0	0	26,282		26,282
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	300,020	0	0	0	0	0	0	191,247	0	26,282	0	217,529
Group Life												
12. Whole	0						0	0	0	0		0
13. Term							0	0	0	0		0
14. Universal							0	0	0	0		0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	73,622,565						0	10,490,981		22,790,809		33,281,789
21. Indexed	99,427,384						0	14,790,219		97,570,529		112,360,748
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout	20,048,883						0	23,536,426		0		23,536,426
25. Other							0					0
26. Total individual annuities	193,098,832	0	0	0	0	0	0	48,817,626	0	120,361,338	0	169,178,963
Group Annuities												
27. Fixed	45,915						0	318,903		1,522,584		1,841,487
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout	0						0	849,207		0		849,207
32. Other							0					0
33. Total group annuities	45,915	0	0	0	0	0	0	1,168,110	0	1,522,584	0	2,690,694
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	0 (f)						0	XXX	XXX	XXX	0	0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	0 (f)						0	XXX	XXX	XXX	0	0
44. Long-term care (d)	177,427 (f)						0	XXX	XXX	XXX	337,391	337,391
45. Other health (d)	0 (f)						0	XXX	XXX	XXX	0	0
46. Total accident and health	177,427	0	0	0	0	0	0	XXX	XXX	XXX	337,391	337,391
47. Total	193,622,194 (c)	0	0	0	0	0	0	50,176,983	0	121,910,204	337,391	172,424,577

LIFE INSURANCE (STATE PAGE) (Continued)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Washington DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole	40,213	13	41,247	0	0	0	0	13	41,247	0	0	0	(116)	(269,859)	43	832,782
3. Term	150,000	1	150,000	0	0	0	0	1	150,000	0	0	0	(9)	(1,962,000)	119	29,236,500
4. Indexed								0	0							
5. Universal	0	0	0	0	0	0	0	0	0	0	0	0	0	(610,851)	70	11,710,727
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	190,213	14	191,247	0	0	0	0	14	191,247	0	0	0	(125)	(2,842,710)	232	41,780,009
Group Life															
12. Whole	0	0	0					0	0	0	0	0	(2)	(9,341)	0	0
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	(2)	(9,341)	0	0
Individual Annuities															
20. Fixed	5,809,229	64	5,964,481					64	5,964,481	1,618,456	346	77,173,610	(223)	(15,985,911)	2,384	289,322,590
21. Indexed	16,455,956	129	14,380,556					129	14,380,556	5,763,914	493	100,193,018	(773)	(67,826,963)	4,760	725,540,548
22. Variable with guarantees								0	0							
23. Variable without guarantees								0	0							
24. Life contingent payout	513,949	5	513,949					5	513,949		48	21,565,458	(18)	(11,541,608)	371	138,104,639
25. Other								0	0		37	2,748,023	(43)	(3,284,540)	289	12,634,308
26. Total individual annuities	22,779,134	198	20,858,986	0	0	0	0	198	20,858,986	7,382,369	924	201,680,109	(1,057)	(98,639,023)	7,804	1,165,602,085
Group Annuities															
27. Fixed	316,457	12	318,903					12	318,903	24,133	0	0	(59)	(846,765)	1,048	22,670,734
28. Indexed								0	0							
29. Variable with guarantees								0	0							
30. Variable without guarantees								0	0							
31. Life contingent payout	0	0	0					0	0		0	0	3	60,514	265	11,403,176
32. Other								0	0		0	0	0	0	0	0
33. Total group annuities	316,457	12	318,903	0	0	0	0	12	318,903	24,133	0	0	(56)	(786,251)	1,313	34,073,910
Accident and Health															
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	7	0	0
44. Long-term care (d)	1,039,411	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	15,986	60	228,417
45. Other health (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
46. Total accident and health	1,039,411	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	15,993	60	228,417
47. Total	24,325,215	224	21,369,137	0	0	0	0	224	21,369,137	7,406,502	924	201,680,109	(1,240)	(102,261,332)	9,409	1,241,684,421

(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: $ 626,526 Group: $ ..... Total: $ 626,526

(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 $ .....

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ 0 ; Vision Only $ ..... ; Dental Only $ ..... ; Federal Employees Health Benefits Plan $ .....
Title XVIII Medicare $ ..... ; Title XIX Medicaid $ ..... ; Credit A&H $ ..... ; Disability Income $ 0 ; Long-term Care $ 216,629 ; Other Health $ 0

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF West Virginia DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 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)	Claims and Benefits Paid: 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	8,543						0	15,000	0	0		15,000
3. Term	31,884						0	0	0	0		0
4. Indexed							0					0
5. Universal	32,696						0	1,200,000	0	0		1,200,000
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	73,123	0	0	0	0	0	0	1,215,000	0	0	0	1,215,000
Group Life												
12. Whole	0						0	0	0	0		0
13. Term							0	0	0	0		0
14. Universal							0	0	0	0		0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	31,717,862						0	2,994,925		7,516,222		10,511,147
21. Indexed	34,807,304						0	4,579,214		29,670,276		34,249,490
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	28,312		0		28,312
25. Other							0					0
26. Total individual annuities	66,525,166	0	0	0	0	0	0	7,602,450	0	37,186,498	0	44,788,948
Group Annuities												
27. Fixed	0						0	0		49,603		49,603
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout	0						0	185,188		0		185,188
32. Other							0					0
33. Total group annuities	0	0	0	0	0	0	0	185,188	0	49,603	0	234,791
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	6,299 (f)						0	XXX	XXX	XXX	432	432
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	0 (f)						0	XXX	XXX	XXX	0	0
44. Long-term care (d)	0 (f)						0	XXX	XXX	XXX	0	0
45. Other health (d)	42 (f)						0	XXX	XXX	XXX	42	42
46. Total accident and health	6,341	0	0	0	0	0	0	XXX	XXX	XXX	474	474
47. Total	66,604,630 (c)	0	0	0	0	0	0	9,002,638	0	37,236,101	474	46,239,213

LIFE INSURANCE (STATE PAGE) (Continued)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF West Virginia DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year								22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life																
1. Industrial								0	0							
2. Whole	15,000	2	15,000	0	0	0	0	2	15,000	0	0	0	(4)	(16,830)	11	182,817
3. Term	0	0	0	0	0	0	0	0	0	0	0	0	1	98,000	19	4,474,000
4. Indexed								0	0							
5. Universal	1,200,000	1	1,200,000	0	0	0	0	1	1,200,000	0	0	0	(2)	(1,233,804)	14	2,571,737
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	1,215,000	3	1,215,000	0	0	0	0	3	1,215,000	0	0	0	(5)	(1,152,634)	44	7,228,554
Group Life																
12. Whole	0	0	0					0	0	0	0	0	0	0	0	0
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities																
20. Fixed	2,704,198	25	2,730,205					25	2,730,205	178,750	189	30,791,903	(74)	(5,816,998)	732	103,676,246
21. Indexed	4,517,281	32	4,579,214					32	4,579,214	600,718	210	34,380,427	(284)	(23,852,884)	1,549	196,094,147
22. Variable with guarantees								0	0							
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0					0	0		3	149,128	(1)	(22,218)	10	265,880
25. Other								0	0		7	213,807	(4)	(226,532)	21	889,701
26. Total individual annuities	7,221,479	57	7,309,418	0	0	0	0	57	7,309,418	779,468	409	65,535,264	(363)	(29,918,633)	2,312	300,925,973
Group Annuities																
27. Fixed	0	0	0					0	0	0	0	0	(1)	(36,650)	17	376,615
28. Indexed								0	0							
29. Variable with guarantees								0	0							
30. Variable without guarantees								0	0							
31. Life contingent payout	0	0	0					0	0		0	0	1	31,099	47	2,044,319
32. Other								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	(5,551)	64	2,420,934
Accident and Health																
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)	580	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	165	1	6,299
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
44. Long-term care (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
45. Other health (d)	42	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	1	42
46. Total accident and health	622	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	165	2	6,341
47. Total	8,437,101	60	8,524,418	0	0	0	0	60	8,524,418	779,468	409	65,535,264	(368)	(31,076,653)	2,422	310,581,802

(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: $ .....0 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 $ .....

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ .....6,298 ; Vision Only $ ..... ; Dental Only $ ..... ; Federal Employees Health Benefits Plan $ .....
Title XVIII Medicare $ ..... ; Title XIX Medicaid $ ..... ; Credit A&H $ ..... ; Disability Income $ .....0 ; Long-term Care $ .....0 ; Other Health $ 42

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Wisconsin DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 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)	Claims and Benefits Paid: 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	38,042						0	47,661	0	7,917		55,579
3. Term	112,869						0	350,000	0	0		350,000
4. Indexed							0					0
5. Universal	37,610						0	50,000	0	0		50,000
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	188,521	0	0	0	0	0	0	447,661	0	7,917	0	455,579
Group Life												
12. Whole	0						0	0	0	0		0
13. Term							0	0	0	0		0
14. Universal							0	0	0	0		0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	80,179,896						0	10,267,642		25,746,678		36,014,319
21. Indexed	86,074,078						0	10,264,669		92,424,464		102,689,134
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	305,665		0		305,665
25. Other							0					0
26. Total individual annuities	166,253,974	0	0	0	0	0	0	20,837,976	0	118,171,142	0	139,009,118
Group Annuities												
27. Fixed	0						0	8,115		60,220		68,335
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout	0						0	3,760,935		0		3,760,935
32. Other							0					0
33. Total group annuities	0	0	0	0	0	0	0	3,769,050	0	60,220	0	3,829,270
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	32,685 (f)						0	XXX	XXX	XXX	44,349	44,349
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	0 (f)						0	XXX	XXX	XXX	0	0
44. Long-term care (d)	208,686 (f)						0	XXX	XXX	XXX	57,098	57,098
45. Other health (d)	68 (f)						0	XXX	XXX	XXX	68	68
46. Total accident and health	241,439	0	0	0	0	0	0	XXX	XXX	XXX	101,515	101,515
47. Total	166,683,934 (c)	0	0	0	0	0	0	25,054,687	0	118,239,279	101,515	143,395,481

LIFE INSURANCE (STATE PAGE) (Continued)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Wisconsin DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole	47,661	7	47,661	0	0	0	0	7	47,661	0	0	0	(10)	(73,000)	56	900,242
3. Term	250,000	3	350,000	0	0	0	0	3	350,000	0	0	0	(11)	(1,712,000)	116	29,423,000
4. Indexed								0	0							
5. Universal	50,000	1	50,000	0	0	0	0	1	50,000	0	0	0	1	260,848	26	3,717,521
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	347,661	11	447,661	0	0	0	0	11	447,661	0	0	0	(20)	(1,524,152)	198	34,040,763
Group Life															
12. Whole	0	0	0					0	0	0	0	0	0	0	0	0
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities															
20. Fixed	9,382,949	55	7,345,859					55	7,345,859	2,647,334	563	84,434,332	(259)	(23,187,259)	2,554	345,451,132
21. Indexed	10,476,787	108	9,864,745					108	9,864,745	1,888,246	585	84,200,143	(794)	(60,633,459)	4,707	615,805,734
22. Variable with guarantees								0	0							
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0					0	0		6	231,198	(2)	(220,967)	56	1,740,490
25. Other								0	0		25	1,812,014	(28)	(2,514,500)	134	6,418,207
26. Total individual annuities	19,859,736	163	17,210,604	0	0	0	0	163	17,210,604	4,535,579	1,179	170,677,687	(1,083)	(86,556,185)	7,451	969,415,564
Group Annuities															
27. Fixed	2,369	0	2,369					0	2,369	0	0	0	(3)	(85,701)	51	1,324,129
28. Indexed								0	0							
29. Variable with guarantees								0	0							
30. Variable without guarantees								0	0							
31. Life contingent payout	0	0	0					0	0	0	0	0	(32)	(3,072,902)	776	44,882,681
32. Other								0	0		0	0	0	(5,332)	2	14,368
33. Total group annuities	2,369	0	2,369	0	0	0	0	0	2,369	0	0	0	(35)	(3,163,935)	829	46,221,178
Accident and Health															
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)	43,878	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			(2)	(12,262)	5	33,406
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
44. Long-term care (d)	(179,659)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			(5)	4,784	154	222,812
45. Other health (d)	68	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	1	68
46. Total accident and health	(135,713)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	(7)	(7,478)	160	256,286
47. Total	20,074,054	174	17,660,634	0	0	0	0	174	17,660,634	4,535,579	1,179	170,677,687	(1,145)	(91,251,749)	8,638	1,049,933,790

(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: $ 89,665 Group: $ ..... Total: $ 89,665

(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 $ .....

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ 36,105 ; Vision Only $ ..... ; Dental Only $ ..... ; Federal Employees Health Benefits Plan $ .....
Title XVIII Medicare $ ..... ; Title XIX Medicaid $ ..... ; Credit A&H $ ..... ; Disability Income $ 0 ; Long-term Care $ 214,535 ; Other Health $ 68

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Wyoming DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 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)	Claims and Benefits Paid: 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	42						0	0	0	0		0
3. Term	15,374						0	0	0	0		0
4. Indexed							0					0
5. Universal	5,228						0	0	0	0		0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	20,644	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole	0						0	0	0	0		0
13. Term							0	0	0	0		0
14. Universal							0	0	0	0		0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	1,155,686						0	922,155		506,008		1,428,163
21. Indexed	3,439,177						0	545,031		4,546,332		5,091,363
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	40,140		0		40,140
25. Other							0					0
26. Total individual annuities	4,594,863	0	0	0	0	0	0	1,507,326	0	5,052,341	0	6,559,666
Group Annuities												
27. Fixed	0						0	0		0		0
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout	0						0	15,613		0		15,613
32. Other							0					0
33. Total group annuities	0	0	0	0	0	0	0	15,613	0	0	0	15,613
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	0 (f)						0	XXX	XXX	XXX	0	0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	0 (f)						0	XXX	XXX	XXX	0	0
44. Long-term care (d)	0 (f)						0	XXX	XXX	XXX	0	0
45. Other health (d)	0 (f)						0	XXX	XXX	XXX	0	0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	4,615,507 (c)	0	0	0	0	0	0	1,522,939	0	5,052,341	0	6,575,280

LIFE INSURANCE (STATE PAGE) (Continued)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Wyoming DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole	36	0	0	0	0	0	0	0	0	36	0	0	1	36	1	36
3. Term	0	0	0	0	0	0	0	0	0	0	0	0	(1)	(193,000)	14	2,353,000
4. Indexed								0	0							
5. Universal	100,000	0	0	0	0	0	0	0	0	100,000	0	0	0	357	4	491,463
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	100,036	0	0	0	0	0	0	0	0	100,036	0	0	0	(192,607)	19	2,844,499
Group Life															
12. Whole	0	0	0					0	0	0	0	0	(1)	(3,055)	0	0
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	(1)	(3,055)	0	0
Individual Annuities															
20. Fixed	822,610	5	822,610					5	822,610	0	7	835,769	(5)	(179,014)	109	9,768,713
21. Indexed	509,582	6	489,409					6	489,409	20,173	16	2,511,013	(22)	(505,911)	222	33,205,662
22. Variable with guarantees								0	0							
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0					0	0		0	0	(2)	(34,678)	9	345,746
25. Other								0	0		5	313,245	(4)	(58,103)	10	365,881
26. Total individual annuities	1,332,191	11	1,312,019	0	0	0	0	11	1,312,019	20,173	28	3,660,028	(33)	(777,706)	350	43,686,002
Group Annuities															
27. Fixed	0	0	0					0	0	0	0	0	(1)	93	7	95,123
28. Indexed								0	0							
29. Variable with guarantees								0	0							
30. Variable without guarantees								0	0							
31. Life contingent payout	0	0	0					0	0		0	0	0	(5,712)	5	143,164
32. Other								0	0		0	0	0	0	0	0
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0	(1)	(5,620)	12	238,286
Accident and Health															
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
44. Long-term care (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
45. Other health (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
46. Total accident and health	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	1,432,228	11	1,312,019	0	0	0	0	11	1,312,019	120,209	28	3,660,028	(35)	(978,988)	381	46,768,787

(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: $ .....0 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 $ .....

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ .....0 ; Vision Only $ ..... ; Dental Only $ ..... ; Federal Employees Health Benefits Plan $ .....
Title XVIII Medicare $ ..... ; Title XIX Medicaid $ ..... ; Credit A&H $ ..... ; Disability Income $ .....0 ; Long-term Care $ .....0 ; Other Health $ 0

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF American Samoa DURING THE YEAR 2025 NAIC Company Code 63312

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	0	0	0		0
3. Term	0						0	0	0	0		0
4. Indexed							0					0
5. Universal	0						0	0	0	0		0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole	0						0	0	0	0		0
13. Term							0	0	0	0		0
14. Universal							0	0	0	0		0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	0						0	0		0		0
21. Indexed	0						0	0		0		0
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	0		0		0
25. Other							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
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout	0						0	0		0		0
32. Other							0					0
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	0 (f)						0	XXX	XXX	XXX	0	0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	0 (f)						0	XXX	XXX	XXX	0	0
44. Long-term care (d)	0 (f)						0	XXX	XXX	XXX	0	0
45. Other health (d)	0 (f)						0	XXX	XXX	XXX	0	0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	0 (c)	0	0	0	0	0	0	0	0	0	0	0

LIFE INSURANCE (STATE PAGE) (Continued)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF American Samoa DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole	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	0
4. Indexed								0	0						
5. Universal	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
6. Universal with secondary guarantees								0	0						
7. Variable								0	0						
8. Variable universal								0	0						
9. Credit								0	0						
10. Other								0	0						
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life															
12. Whole	0	0	0					0	0	0	0	0	0	0	0
13. Term								0	0						
14. Universal								0	0						
15. Variable								0	0						
16. Variable universal								0	0						
17. Credit								0	0						(a)
18. Other								0	0						
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities															
20. Fixed	0	0	0					0	0	0	0	0	0	0	0
21. Indexed	0	0	0					0	0	0	0	0	0	0	0
22. Variable with guarantees								0	0						
23. Variable without guarantees								0	0						
24. Life contingent payout	0	0	0					0	0	0	0	0	0	0	0
25. Other								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	0	0	0
28. Indexed								0	0						
29. Variable with guarantees								0	0						
30. Variable without guarantees								0	0						
31. Life contingent payout	0	0	0					0	0	0	0	0	0	0	0
32. Other								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					
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
36. Medicare supplement (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
44. Long-term care (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
45. Other health (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
46. Total accident and health	0	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: $ .....0 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 $ .....

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ .....0 ; Vision Only $ ..... ; Dental Only $ ..... ; Federal Employees Health Benefits Plan $ .....
Title XVIII Medicare $ ..... ; Title XIX Medicaid $ ..... ; Credit A&H $ ..... ; Disability Income $ .....0 ; Long-term Care $ .....0 ; Other Health $ 0

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Guam DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members 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)	Claims and Benefits Paid 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	0	0	0		0
3. Term	19,433						0	0	0	0		0
4. Indexed							0					0
5. Universal	48,130						0	0	0	8,303		8,303
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	67,563	0	0	0	0	0	0	0	0	8,303	0	8,303
Group Life												
12. Whole	0						0	0	0	0		0
13. Term							0	0	0	0		0
14. Universal							0	0	0	0		0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	0						0	0		0		0
21. Indexed	0						0	0		0		0
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	0		0		0
25. Other							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
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout	0						0	1,369		0		1,369
32. Other							0					0
33. Total group annuities	0	0	0	0	0	0	0	1,369	0	0	0	1,369
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	0 (f)						0	XXX	XXX	XXX	0	0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	0 (f)						0	XXX	XXX	XXX	0	0
44. Long-term care (d)	0 (f)						0	XXX	XXX	XXX	0	0
45. Other health (d)	0 (f)						0	XXX	XXX	XXX	0	0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	67,563 (c)	0	0	0	0	0	0	1,369	0	8,303	0	9,672

LIFE INSURANCE (STATE PAGE) (Continued)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Guam DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole	0	0	0	0	0	0	0	0	0	0	0	0	0	0	100,000
3. Term	0	0	0	0	0	0	0	0	0	0	0	0	0	15	4,540,000
4. Indexed								0	0						
5. Universal	108,251	0	0	0	0	0	0	0	0	108,251	0	10,000	(2)	(312,771)	66	10,953,720
6. Universal with secondary guarantees								0	0						
7. Variable								0	0						
8. Variable universal								0	0						
9. Credit								0	0						
10. Other								0	0						
11. Total individual life	108,251	0	0	0	0	0	0	0	0	108,251	0	10,000	(2)	(312,771)	82	15,593,720
Group Life															
12. Whole	0	0	0					0	0	0	0	0	0	0	0
13. Term								0	0						
14. Universal								0	0						
15. Variable								0	0						
16. Variable universal								0	0						
17. Credit								0	0						(a)
18. Other								0	0						
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities															
20. Fixed	0	0	0					0	0	0	0	0	(1)	(25,746)	1	36,912
21. Indexed	0	0	0					0	0	0	0	0	0	0	0
22. Variable with guarantees								0	0						
23. Variable without guarantees								0	0						
24. Life contingent payout	0	0	0					0	0	0	0	0	0	0	0
25. Other								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)	(25,746)	1	36,912
Group Annuities															
27. Fixed	0	0	0					0	0	0	0	0	0	1,082	1	28,142
28. Indexed								0	0						
29. Variable with guarantees								0	0						
30. Variable without guarantees								0	0						
31. Life contingent payout	0	0	0					0	0	0	0	0	0	(698)	1	12,062
32. Other								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	384	2	40,203
Accident and Health															
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
44. Long-term care (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
45. Other health (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
46. Total accident and health	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	108,251	0	0	0	0	0	0	0	0	108,251	0	10,000	(3)	(338,133)	85	15,670,835

(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: $ .....0 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 $ .....

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ .....0 ; Vision Only $ ..... ; Dental Only $ ..... ; Federal Employees Health Benefits Plan $ .....
Title XVIII Medicare $ ..... ; Title XIX Medicaid $ ..... ; Credit A&H $ ..... ; Disability Income $ .....0 ; Long-term Care $ .....0 ; Other Health $ 0

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Puerto Rico DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 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)	Claims and Benefits Paid: 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	362						0	0	0	4,330		4,330
3. Term	0						0	0	0	0		0
4. Indexed							0					0
5. Universal	0						0	0	0	0		0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	362	0	0	0	0	0	0	0	0	4,330	0	4,330
Group Life												
12. Whole	0						0	0	0	0		0
13. Term							0	0	0	0		0
14. Universal							0	0	0	0		0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	959,188						0	42,366		8,254		50,620
21. Indexed	1,457,618						0	0		122,923		122,923
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	0		0		0
25. Other							0					0
26. Total individual annuities	2,416,806	0	0	0	0	0	0	42,366	0	131,177	0	173,543
Group Annuities												
27. Fixed	0						0	0		0		0
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout	0						0	145,498		0		145,498
32. Other							0					0
33. Total group annuities	0	0	0	0	0	0	0	145,498	0	0	0	145,498
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	0 (f)						0	XXX	XXX	XXX	0	0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	0 (f)						0	XXX	XXX	XXX	0	0
44. Long-term care (d)	0 (f)						0	XXX	XXX	XXX	0	0
45. Other health (d)	0 (f)						0	XXX	XXX	XXX	0	0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	2,417,168 (c)	0	0	0	0	0	0	187,864	0	135,507	0	323,371

LIFE INSURANCE (STATE PAGE) (Continued)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Puerto Rico DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole	0	0	0	0	0	0	0	0	0	0	0	0	(1)	(5,000)	2	13,000
3. Term	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4. Indexed								0	0							
5. Universal	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	(1)	(5,000)	2	13,000
Group Life															
12. Whole	0	0	0					0	0	0	0	0	0	0	0	0
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities															
20. Fixed	25,036	1	25,036					1	25,036	0	9	982,111	1	365,600	20	3,022,744
21. Indexed	0	0	0					0	0	0	19	1,443,474	0	179,633	31	2,656,066
22. Variable with guarantees								0	0							
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0					0	0	0	0	0	0	0	0	0
25. Other								0	0		0	0	1	5,748	1	5,748
26. Total individual annuities	25,036	1	25,036	0	0	0	0	1	25,036	0	28	2,425,585	2	550,981	52	5,684,558
Group Annuities															
27. Fixed	0	0	0					0	0	0	0	0	0	46,331	6	65,753
28. Indexed								0	0							
29. Variable with guarantees								0	0							
30. Variable without guarantees								0	0							
31. Life contingent payout	0	0	0					0	0	0	0	0	(1)	(97,435)	49	1,862,805
32. Other								0	0		0	0	0	0	0	0
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0	(1)	(51,103)	55	1,928,557
Accident and Health															
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
44. Long-term care (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
45. Other health (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
46. Total accident and health	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	25,036	1	25,036	0	0	0	0	1	25,036	0	28	2,425,585	0	494,878	109	7,626,115

(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: $ .....0 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 $ .....

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ .....0 ; Vision Only $ ..... ; Dental Only $ ..... ; Federal Employees Health Benefits Plan $ .....
Title XVIII Medicare $ ..... ; Title XIX Medicaid $ ..... ; Credit A&H $ ..... ; Disability Income $ .....0 ; Long-term Care $ .....0 ; Other Health $ 0

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF U.S. Virgin Islands DURING THE YEAR 2025 NAIC Company Code 63312

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	0	0	0		0
3. Term	1,269						0	0	0	0		0
4. Indexed							0					0
5. Universal	0						0	0	0	0		0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	1,269	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole	0						0	0	0	0		0
13. Term							0	0	0	0		0
14. Universal							0	0	0	0		0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	250,000						0	387		40,699		41,086
21. Indexed	0						0	0		8,152		8,152
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	0		0		0
25. Other							0					0
26. Total individual annuities	250,000	0	0	0	0	0	0	387	0	48,851	0	49,237
Group Annuities												
27. Fixed	0						0	0		0		0
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout	0						0	2,712		0		2,712
32. Other							0					0
33. Total group annuities	0	0	0	0	0	0	0	2,712	0	0	0	2,712
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	0 (f)						0	XXX	XXX	XXX	0	0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	0 (f)						0	XXX	XXX	XXX	0	0
44. Long-term care (d)	0 (f)						0	XXX	XXX	XXX	0	0
45. Other health (d)	0 (f)						0	XXX	XXX	XXX	0	0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	251,269 (c)	0	0	0	0	0	0	3,098	0	48,851	0	51,949

LIFE INSURANCE (STATE PAGE) (Continued)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF U.S. Virgin Islands DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole	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	3	1,350,000
4. Indexed								0	0						
5. Universal	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
6. Universal with secondary guarantees								0	0						
7. Variable								0	0						
8. Variable universal								0	0						
9. Credit								0	0						
10. Other								0	0						
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	3	1,350,000
Group Life															
12. Whole	0	0	0					0	0	0	0	0	0	0	0
13. Term								0	0						
14. Universal								0	0						
15. Variable								0	0						
16. Variable universal								0	0						
17. Credit								0	0						(a)
18. Other								0	0						
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities															
20. Fixed	0	0	0					0	0	0	0	0	(24,107)	12	366,866
21. Indexed	0	0	0					0	0	0	0	0	8,368	4	650,701
22. Variable with guarantees								0	0						
23. Variable without guarantees								0	0						
24. Life contingent payout	0	0	0					0	0	0	0	0	0	0	0
25. Other								0	0	0	0	0	0	0	0
26. Total individual annuities	0	0	0	0	0	0	0	0	0	0	0	0	(15,739)	16	1,017,566
Group Annuities															
27. Fixed	0	0	0					0	0	0	0	0	2,017	3	64,887
28. Indexed								0	0						
29. Variable with guarantees								0	0						
30. Variable without guarantees								0	0						
31. Life contingent payout	0	0	0					0	0	0	0	0	(1,313)	1	41,425
32. Other								0	0	0	0	0	0	0	0
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0	703	4	106,312
Accident and Health															
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
36. Medicare supplement (d)	0	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					
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
43. Disability income (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0
44. Long-term care (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0
45. Other health (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0
46. Total accident and health	0	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	(15,036)	23	2,473,878

(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: $ .....0 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 $ .....

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ .....0 ; Vision Only $ ..... ; Dental Only $ ..... ; Federal Employees Health Benefits Plan $ .....
Title XVIII Medicare $ ..... ; Title XIX Medicaid $ ..... ; Credit A&H $ ..... ; Disability Income $ .....0 ; Long-term Care $ .....0 ; Other Health $ 0

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Northern Mariana Islands DURING THE YEAR 2025 NAIC Company Code 63312

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	0	0	0		0
3. Term	0						0	0	0	0		0
4. Indexed							0					0
5. Universal	0						0	0	0	0		0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole	0						0	0	0	0		0
13. Term							0	0	0	0		0
14. Universal							0	0	0	0		0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	0						0	0		0		0
21. Indexed	0						0	0		0		0
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	0		0		0
25. Other							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
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout	0						0	0		0		0
32. Other							0					0
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	0 (f)						0	XXX	XXX	XXX	0	0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	0 (f)						0	XXX	XXX	XXX	0	0
44. Long-term care (d)	0 (f)						0	XXX	XXX	XXX	0	0
45. Other health (d)	0 (f)						0	XXX	XXX	XXX	0	0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	0 (c)	0	0	0	0	0	0	0	0	0	0	0

LIFE INSURANCE (STATE PAGE) (Continued)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Northern Mariana Islands DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole	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	0
4. Indexed								0	0						
5. Universal	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
6. Universal with secondary guarantees								0	0						
7. Variable								0	0						
8. Variable universal								0	0						
9. Credit								0	0						
10. Other								0	0						
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life															
12. Whole	0	0	0					0	0	0	0	0	0	0	0
13. Term								0	0						
14. Universal								0	0						
15. Variable								0	0						
16. Variable universal								0	0						
17. Credit								0	0						(a)
18. Other								0	0						
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities															
20. Fixed	0	0	0					0	0	0	0	0	0	0	0
21. Indexed	0	0	0					0	0	0	0	0	0	0	0
22. Variable with guarantees								0	0						
23. Variable without guarantees								0	0						
24. Life contingent payout	0	0	0					0	0	0	0	0	0	0	0
25. Other								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	0	0	0
28. Indexed								0	0						
29. Variable with guarantees								0	0						
30. Variable without guarantees								0	0						
31. Life contingent payout	0	0	0					0	0	0	0	0	0	0	0
32. Other								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					
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
36. Medicare supplement (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
44. Long-term care (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
45. Other health (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
46. Total accident and health	0	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: $ .....0 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 $ .....

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ .....0 ; Vision Only $ ..... ; Dental Only $ ..... ; Federal Employees Health Benefits Plan $ .....
Title XVIII Medicare $ ..... ; Title XIX Medicaid $ ..... ; Credit A&H $ ..... ; Disability Income $ .....0 ; Long-term Care $ .....0 ; Other Health $ 0

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Canada DURING THE YEAR 2025 NAIC Company Code 63312

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	0	0	0		0
3. Term	0						0	0	0	0		0
4. Indexed							0					0
5. Universal	0						0	0	0	0		0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole	0						0	0	0	0		0
13. Term							0	0	0	0		0
14. Universal							0	0	0	0		0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	0						0	0		0		0
21. Indexed	0						0	0		0		0
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	0		0		0
25. Other							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
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout	0						0	0		0		0
32. Other							0					0
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	0 (f)						0	XXX	XXX	XXX	0	0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	0 (f)						0	XXX	XXX	XXX	0	0
44. Long-term care (d)	0 (f)						0	XXX	XXX	XXX	0	0
45. Other health (d)	0 (f)						0	XXX	XXX	XXX	0	0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	0 (c)	0	0	0	0	0	0	0	0	0	0	0

LIFE INSURANCE (STATE PAGE) (Continued)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Canada DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole	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	0
4. Indexed								0	0						
5. Universal	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
6. Universal with secondary guarantees								0	0						
7. Variable								0	0						
8. Variable universal								0	0						
9. Credit								0	0						
10. Other								0	0						
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life															
12. Whole	0	0	0					0	0	0	0	0	0	0	0
13. Term								0	0						
14. Universal								0	0						
15. Variable								0	0						
16. Variable universal								0	0						
17. Credit								0	0						(a)
18. Other								0	0						
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities															
20. Fixed	0	0	0					0	0	0	0	1	215,378	1	215,378
21. Indexed	0	0	0					0	0	0	0	0	0	0	0
22. Variable with guarantees								0	0						
23. Variable without guarantees								0	0						
24. Life contingent payout	0	0	0					0	0	0	0	0	0	0	0
25. Other								0	0	0	0	0	0	0	0
26. Total individual annuities	0	0	0	0	0	0	0	0	0	0	0	1	215,378	1	215,378
Group Annuities															
27. Fixed	0	0	0					0	0	0	0	0	0	0	0
28. Indexed								0	0						
29. Variable with guarantees								0	0						
30. Variable without guarantees								0	0						
31. Life contingent payout	0	0	0					0	0	0	0	0	0	0	0
32. Other								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					
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
36. Medicare supplement (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
44. Long-term care (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
45. Other health (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
46. Total accident and health	0	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	215,378	1	215,378

(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: $ .....0 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 $ .....

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ .....0 ; Vision Only $ ..... ; Dental Only $ ..... ; Federal Employees Health Benefits Plan $ .....
Title XVIII Medicare $ ..... ; Title XIX Medicaid $ ..... ; Credit A&H $ ..... ; Disability Income $ .....0 ; Long-term Care $ .....0 ; Other Health $ 0

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Other Aliens DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 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)	Claims and Benefits Paid: 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	0	0	0	0	0	0	0	69	0	0	0	69
3. Term	22,730	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	9,797	0	0	0	0	0	0	379,314	0	486	0	379,799
6. Universal with secondary guarantees	0	0	0	0	0	0	0	0	0	0	0	0
7. Variable	0	0	0	0	0	0	0	0	0	0	0	0
8. Variable universal	0	0	0	0	0	0	0	0	0	0	0	0
9. Credit	0	0	0	0	0	0	0	0	0	0	0	0
10. Other	0	0	0	0	0	0	0	0	0	0	0	0
11. Total individual life	32,527	0	0	0	0	0	0	379,383	0	486	0	379,868
Group Life												
12. Whole	0	0	0	0	0	0	0	0	0	0	0	0
13. Term	0	0	0	0	0	0	0	0	0	0	0	0
14. Universal	0	0	0	0	0	0	0	0	0	0	0	0
15. Variable	0	0	0	0	0	0	0	0	0	0	0	0
16. Variable universal	0	0	0	0	0	0	0	0	0	0	0	0
17. Credit	0	0	0	0	0	0	0	0	0	0	0	0
18. Other	0	0	0	0	0	0	0	0	0	0	0	0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	239,636	0	0	0	0	0	0	1,402,608	0	774,150	0	2,176,758
21. Indexed	0	0	0	0	0	0	0	891,277	0	1,100,751	0	1,992,028
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	17,167	0	0	0	17,167
25. Other	0	0	0	0	0	0	0	0	0	0	0	0
26. Total individual annuities	239,636	0	0	0	0	0	0	2,311,052	0	1,874,902	0	4,185,953
Group Annuities												
27. Fixed	0	0	0	0	0	0	0	3,247	0	1,182	0	4,429
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	130,355	0	0	0	130,355
32. Other	0	0	0	0	0	0	0	0	0	0	0	0
33. Total group annuities	0	0	0	0	0	0	0	133,602	0	1,182	0	134,784
Accident and Health												
34. Comprehensive individual (d)	0 (f)	0	0	0	0	0	0	XXX	XXX	XXX	0	0
35. Comprehensive group (d)	0 (f)	0	0	0	0	0	0	XXX	XXX	XXX	0	0
36. Medicare supplement (d)	0 (f)	0	0	0	0	0	0	XXX	XXX	XXX	(2,571)	(2,571)
37. Vision only (d)	0 (f)	0	0	0	0	0	0	XXX	XXX	XXX	0	0
38. Dental only (d)	0 (f)	0	0	0	0	0	0	XXX	XXX	XXX	0	0
39. Federal employees health benefits plan (d)	0 (f)	0	0	0	0	0	0	XXX	XXX	XXX	0	0
40. Title XVIII Medicare (d)	0 (e,f)	0	0	0	0	0	0	XXX	XXX	XXX	0	0
41. Title XIX Medicaid (d)	0 (f)	0	0	0	0	0	0	XXX	XXX	XXX	0	0
42. Credit A&H	0 (f)	0	0	0	0	0	0	XXX	XXX	XXX	0	0
43. Disability income (d)	0 (f)	0	0	0	0	0	0	XXX	XXX	XXX	0	0
44. Long-term care (d)	0 (f)	0	0	0	0	0	0	XXX	XXX	XXX	0	0
45. Other health (d)	0 (f)	0	0	0	0	0	0	XXX	XXX	XXX	0	0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	(2,571)	(2,571)
47. Total	272,163 (c)	0	0	0	0	0	0	2,824,036	0	1,876,569	(2,571)	4,698,035

LIFE INSURANCE (STATE PAGE) (Continued)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Other Aliens DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year								22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life																
1. Industrial	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2. Whole	69	1	69	0	0	0	0	1	69	0	0	0	(2)	(1,023)	0	0
3. Term	0	0	0	0	0	0	0	0	0	0	0	0	(3)	(451,000)	9	3,160,000
4. Indexed	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5. Universal	278,314	2	379,314	0	0	0	0	2	379,314	0	0	0	0	(98,549)	16	2,495,049
6. Universal with secondary guarantees	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
7. Variable	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
8. Variable universal	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
9. Credit	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Other	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
11. Total individual life	278,382	3	379,382	0	0	0	0	3	379,382	0	0	0	(5)	(550,572)	25	5,655,049
Group Life																
12. Whole	0	0	0	0	0	0	0	0	0	0	0	0	0	0	4	4,053
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	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	4	4,053
Individual Annuities																
20. Fixed	507,191	11	1,057,781	0	0	0	0	11	1,057,781	591,136	0	0	(827)	(122,410,147)	110	6,877,657
21. Indexed	(1,419,232)	6	888,876	0	0	0	0	6	888,876	90,352	0	0	(1,761)	(259,736,249)	363	15,936,468
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	(22)	(910,580)	2	172,013
25. Other	0	0	0	0	0	0	0	0	0	0	0	0	(127)	(8,419,628)	24	1,351,927
26. Total individual annuities	(912,041)	17	1,946,657	0	0	0	0	17	1,946,657	681,488	0	0	(2,737)	(391,476,604)	499	24,338,065
Group Annuities																
27. Fixed	3,247	0	3,247	0	0	0	0	0	3,247	2,535	0	0	(59)	(3,081,930)	35	620,891
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	(71)	(4,364,618)	28	2,422,522
32. Other	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
33. Total group annuities	3,247	0	3,247	0	0	0	0	0	3,247	2,535	0	0	(130)	(7,446,549)	63	3,043,413
Accident and Health																
34. Comprehensive individual (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
35. Comprehensive group (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
36. Medicare supplement (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
37. Vision only (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
38. Dental only (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
39. Federal employees health benefits plan (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
40. Title XVIII Medicare (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
41. Title XIX Medicaid (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
42. Credit A&H	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
43. Disability income (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
44. Long-term care (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
45. Other health (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
46. Total accident and health	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	(630,412)	20	2,329,287	0	0	0	0	20	2,329,287	684,023	0	0	(2,872)	(399,473,725)	591	33,040,580

(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

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ 0 ; Comprehensive Group $ 0 ; Medicare Supplement $ 0 ; Vision Only $ 0 ; Dental Only $ 0 ; Federal Employees Health Benefits Plan $ 0
Title XVIII Medicare $ 0 ; Title XIX Medicaid $ 0 ; Credit A&H $ 0 ; Disability Income $ 0 ; Long-term Care $ 0 ; Other Health $ 0

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Grand Total DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 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)	Claims and Benefits Paid: 8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial	0	0	0	0	0	0	0	0	0	0	0	0
2. Whole	1,424,087	0	0	0	0	0	0	2,549,432	21,364	408,269	0	2,979,065
3. Term	10,704,926	0	0	0	0	0	0	14,279,218	0	96,442	0	14,375,660
4. Indexed	0	0	0	0	0	0	0	0	0	0	0	0
5. Universal	5,941,661	0	0	0	0	0	0	11,345,986	6,632	2,371,953	0	13,724,570
6. Universal with secondary guarantees	0	0	0	0	0	0	0	0	0	0	0	0
7. Variable	0	0	0	0	0	0	0	0	0	0	0	0
8. Variable universal	0	0	0	0	0	0	0	0	0	0	0	0
9. Credit	0	0	0	0	0	0	0	0	0	0	0	0
10. Other	0	0	0	0	0	0	0	0	0	0	0	0
11. Total individual life	18,070,674	0	0	0	0	0	0	28,174,635	27,996	2,876,664	0	31,079,295
Group Life												
12. Whole	(1,720)	0	0	0	0	0	0	1,093,062	9,358	11,788	0	1,114,208
13. Term	0	0	0	0	0	0	0	3,191	0	0	0	3,191
14. Universal	0	0	0	0	0	0	0	0	0	0	0	0
15. Variable	0	0	0	0	0	0	0	0	0	0	0	0
16. Variable universal	0	0	0	0	0	0	0	0	0	0	0	0
17. Credit	0	0	0	0	0	0	0	0	0	0	0	0
18. Other	0	0	0	0	0	0	0	0	0	0	0	0
19. Total group life	(1,720)	0	0	0	0	0	0	1,096,253	9,358	11,788	0	1,117,399
Individual Annuities												
20. Fixed	4,173,898,252	0	0	0	0	0	0	607,497,720	0	1,548,102,326	0	2,155,600,046
21. Indexed	5,380,453,652	0	0	0	0	0	0	687,723,341	0	4,643,053,209	0	5,330,776,550
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	42,190,525	0	0	0	0	0	0	57,681,800	0	354,569	0	58,036,369
25. Other	0	0	0	0	0	0	0	0	0	0	0	0
26. Total individual annuities	9,596,542,429	0	0	0	0	0	0	1,352,902,860	0	6,191,510,105	0	7,544,412,965
Group Annuities												
27. Fixed	4,093,239	0	0	0	0	0	0	6,611,751	0	57,141,296	0	63,753,047
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	368,861	0	0	0	0	0	0	63,499,501	0	1,042,128	0	64,541,629
32. Other	0	0	0	0	0	0	0	0	0	0	0	0
33. Total group annuities	4,462,100	0	0	0	0	0	0	70,111,252	0	58,183,425	0	128,294,676
Accident and Health												
34. Comprehensive individual (d)	0 (f)	0	0	0	0	0	0	XXX	XXX	XXX	0	0
35. Comprehensive group (d)	0 (f)	0	0	0	0	0	0	XXX	XXX	XXX	0	0
36. Medicare supplement (d)	1,346,038 (f)	0	0	0	0	0	0	XXX	XXX	XXX	886,431	886,431
37. Vision only (d)	0 (f)	0	0	0	0	0	0	XXX	XXX	XXX	0	0
38. Dental only (d)	0 (f)	0	0	0	0	0	0	XXX	XXX	XXX	0	0
39. Federal employees health benefits plan (d)	0 (f)	0	0	0	0	0	0	XXX	XXX	XXX	0	0
40. Title XVIII Medicare (d)	0 (e,f)	0	0	0	0	0	0	XXX	XXX	XXX	0	0
41. Title XIX Medicaid (d)	0 (f)	0	0	0	0	0	0	XXX	XXX	XXX	0	0
42. Credit A&H	0 (f)	0	0	0	0	0	0	XXX	XXX	XXX	0	0
43. Disability income (d)	64 (f)	0	0	0	0	0	0	XXX	XXX	XXX	6,630	6,630
44. Long-term care (d)	2,585,895 (f)	0	0	0	0	0	0	XXX	XXX	XXX	3,568,335	3,568,335
45. Other health (d)	1,908 (f)	0	0	0	0	0	0	XXX	XXX	XXX	1,254	1,254
46. Total accident and health	3,933,905	0	0	0	0	0	0	XXX	XXX	XXX	4,462,650	4,462,650
47. Total	9,623,007,388 (c)	0	0	0	0	0	0	1,452,285,001	37,354	6,252,581,981	4,462,650	7,709,366,986

LIFE INSURANCE (STATE PAGE) (Continued)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Grand Total DURING THE YEAR 2025 NAIC Company Code 63312

Line of Business	13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits: Claims Settled During Current Year: Totals Paid 14 Number of Pols/ Certs	Totals Paid 15 Amount	Reduction by Compromise 16 Number of Pols/ Certs	Reduction by Compromise 17 Amount	Amount Rejected 18 Number of Pols/ Certs	Amount Rejected 19 Amount	Total Settled During Current Year 20 Number of Pols/ Certs	Total Settled During Current Year 21 Amount	22 Unpaid December 31, Current Year	Policy Exhibit: Issued During Year 23 Number of Pols/ Certs	Issued During Year 24 Amount	Other Changes to In Force (Net) 25 Number of Pols/ Certs	Other Changes to In Force (Net) 26 Amount	In Force December 31, Current Year (b) 27 Number of Pols/ Certs	In Force December 31, Current Year (b) 28 Amount
Individual Life																
1. Industrial	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2. Whole	2,555,376	424	2,538,932	0	0	0	0	424	2,538,932	183,489	10	1,150,000	(512)	(6,548,964)	5,955	59,741,633
3. Term	10,934,273	74	13,789,273	0	0	0	0	74	13,789,273	945,000	0	90,000	(406)	(96,921,136)	9,166	2,349,084,384
4. Indexed	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5. Universal	11,196,322	106	11,877,618	0	0	0	0	106	11,877,618	1,391,521	0	105,000	(300)	(37,978,641)	6,307	936,288,542
6. Universal with secondary guarantees	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
7. Variable	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
8. Variable universal	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
9. Credit	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Other	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
11. Total individual life	24,685,971	604	28,205,822	0	0	0	0	604	28,205,822	2,520,010	10	1,345,000	(1,218)	(141,448,740)	21,428	3,345,114,559
Group Life																
12. Whole	1,068,771	204	1,102,421	0	0	0	0	204	1,102,421	8,374	0	0	(197)	(1,117,707)	1,800	9,049,493
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
19. Total group life	1,068,771	204	1,102,421	0	0	0	0	204	1,102,421	8,374	0	0	(197)	(1,117,707)	1,800	9,049,493
Individual Annuities																
20. Fixed	487,909,704	4,410	468,952,965	0	0	0	0	4,410	468,952,965	109,460,853	23,283	4,214,110,963	(16,688)	(1,443,108,053)	150,930	18,887,057,095
21. Indexed	667,560,813	5,379	667,931,315	0	0	0	0	5,379	667,931,315	154,512,770	30,466	5,326,479,679	(36,897)	(3,332,210,717)	235,020	33,637,029,554
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	5,885,222	144	5,885,222	0	0	0	0	144	5,885,222	0	453	71,150,688	(360)	(33,961,436)	4,241	361,403,020
25. Other	0	0	0	0	0	0	0	0	0	0	1,305	91,417,895	(1,725)	(115,814,621)	8,629	380,143,722
26. Total individual annuities	1,161,355,740	9,933	1,142,769,503	0	0	0	0	9,933	1,142,769,503	263,973,623	55,507	9,703,159,225	(55,670)	(4,925,094,827)	398,820	53,265,633,391
Group Annuities																
27. Fixed	6,636,998	271	6,547,779	0	0	0	0	271	6,547,779	2,485,044	0	0	(1,757)	(35,943,614)	25,982	722,034,838
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	3,932	2	3,932	0	0	0	0	2	3,932	0	0	0	(589)	(47,702,146)	17,060	801,609,659
32. Other	0	0	0	0	0	0	0	0	0	0	0	0	(5)	(59,069)	30	772,136
33. Total group annuities	6,640,930	273	6,551,711	0	0	0	0	273	6,551,711	2,485,044	0	0	(2,351)	(83,704,830)	43,072	1,524,416,633
Accident and Health																
34. Comprehensive individual (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
35. Comprehensive group (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
36. Medicare supplement (d)	896,840	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	(45)	(234,845)	242	1,346,034
37. Vision only (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
38. Dental only (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
39. Federal employees health benefits plan (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
40. Title XVIII Medicare (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
41. Title XIX Medicaid (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
42. Credit A&H	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
43. Disability income (d)	5,642	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	(3)	(918)	3	64
44. Long-term care (d)	3,714,467	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	(45)	87,586	1,174	2,976,448
45. Other health (d)	1,263	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	(126)	25	1,910
46. Total accident and health	4,618,213	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	(93)	(148,303)	1,444	4,324,456
47. Total	1,198,369,624	11,014	1,178,629,457	0	0	0	0	11,014	1,178,629,457	268,987,051	55,517	9,704,504,225	(59,529)	(5,151,514,406)	466,564	58,148,538,532

(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: $ 9,240,987 Group: $ 0 Total: $ 9,240,987

(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

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ 0 ; Comprehensive Group $ 0 ; Medicare Supplement $ 1,367,119 ; Vision Only $ 0 ; Dental Only $ 0 ; Federal Employees Health Benefits Plan $ 0
Title XVIII Medicare $ 0 ; Title XIX Medicaid $ 0 ; Credit A&H $ 0 ; Disability Income $ 193 ; Long-term Care $ 2,923,477 ; Other Health $ 1,254

FORM FOR CALCULATING THE INTEREST MAINTENANCE RESERVE

INTEREST MAINTENANCE RESERVE

		1 Amount
1.	Reserve as of December 31, Prior Year	(358,347,434)
2.	Current year's realized pre-tax capital gains/(losses) of $ 7,055,307 transferred into the reserve net of taxes of $ (5,168,533)	12,223,840
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)	(346,123,594)
5.	Current year's amortization released to Summary of Operations (Amortization, Line 1, Column 4)	(40,946,687)
6.	Reserve as of December 31, current year (Line 4 minus Line 5)	(305,176,907)

AMORTIZATION

Year of Amortization	1 Reserve as of December 31, Prior Year	2 Current Year's Realized Capital Gains/(Losses) Transferred into the Reserve Net of Taxes	3 Adjustment for Current Year's Liability Gains/(Losses) Released From the Reserve	4 Balance Before Reduction for Current Year's Amortization (Cols. 1 + 2 + 3)
1. 2025	(45,747,302)	4,800,615	0	(40,946,687)
2. 2026	(45,297,478)	3,987,978	0	(41,309,500)
3. 2027	(46,143,587)	2,758,246	0	(43,385,341)
4. 2028	(41,679,884)	2,451,549	0	(39,228,334)
5. 2029	(33,206,344)	2,134,495	0	(31,071,849)
6. 2030	(25,478,793)	1,789,530	0	(23,689,263)
7. 2031	(19,597,770)	1,291,129	0	(18,306,640)
8. 2032	(13,356,388)	718,978	0	(12,637,410)
9. 2033	(7,124,175)	92,382	0	(7,031,794)
10. 2034	(4,025,402)	(569,508)	0	(4,594,910)
11. 2035	(3,906,281)	(1,307,185)	0	(5,213,466)
12. 2036	(4,001,810)	(1,552,609)	0	(5,554,419)
13. 2037	(4,204,322)	(1,335,052)	0	(5,539,374)
14. 2038	(4,068,067)	(1,100,842)	0	(5,168,909)
15. 2039	(4,192,796)	(862,123)	0	(5,054,919)
16. 2040	(4,191,757)	(594,612)	0	(4,786,369)
17. 2041	(4,384,093)	(406,909)	0	(4,791,002)
18. 2042	(4,378,820)	(312,845)	0	(4,691,665)
19. 2043	(4,589,273)	(211,152)	0	(4,800,425)
20. 2044	(4,632,318)	(103,822)	0	(4,736,140)
21. 2045	(4,687,354)	11,138	0	(4,676,215)
22. 2046	(4,859,426)	70,845	0	(4,788,581)
23. 2047	(5,208,308)	71,918	0	(5,136,391)
24. 2048	(5,344,767)	70,734	0	(5,274,033)
25. 2049	(4,931,112)	71,542	0	(4,859,570)
26. 2050	(3,912,392)	72,086	0	(3,840,307)
27. 2051	(2,867,162)	65,454	0	(2,801,708)
28. 2052	(1,822,223)	51,912	0	(1,770,312)
29. 2053	(521,776)	38,370	0	(483,406)
30. 2054	13,746	23,699	0	37,445
31. 2055 and Later		7,900	0	7,900
32. Total (Lines 1 to 31)	(358,347,434)	12,223,840	0	(346,123,594)

ASSET VALUATION RESERVE

	Default Component			Equity Component			
	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)	7 Total Amount (Cols. 3 + 6)
1. Reserve as of December 31, prior year	305,850,586	44,196,557	350,047,143	56,842,626	170,097,414	226,940,040	576,987,184
2. Realized capital gains/(losses) net of taxes - General Account	(80,148,558)	(6,017,794)	(86,166,352)	27,403,967	(10,303,245)	17,100,722	(69,065,630)
3. Realized capital gains/(losses) net of taxes - Separate Accounts			0			0	0
4. Unrealized capital gains/(losses) net of deferred taxes - General Account	55,041,613	9,139,987	64,181,600	(25,997,569)	26,825,039	827,470	65,009,070
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	108,581,645	13,921,195	122,502,841	0	2,562,913	2,562,913	125,065,754
8. Accumulated balances (Lines 1 through 5 - 6 + 7)	389,325,286	61,239,946	450,565,232	58,249,024	189,182,121	247,431,145	697,996,377
9. Maximum reserve	512,634,533	48,818,256	561,452,789	40,883,920	455,530,244	496,414,164	1,057,866,953
10. Reserve objective	315,620,311	36,945,560	352,565,872	40,762,753	452,366,771	493,129,524	845,695,396
11. 20% of (Line 10 - Line 8)	(14,740,995)	(4,858,877)	(19,599,872)	(3,497,254)	52,636,930	49,139,676	29,539,804
12. Balance before transfers (Lines 8 + 11)	374,584,291	56,381,069	430,965,360	54,751,770	241,819,051	296,570,821	727,536,181
13. Transfers	7,562,812	(7,562,812)	0	(13,867,850)	13,867,850	0	0
14. Voluntary contribution			0			0	0
15. Adjustment down to maximum/up to zero			0			0	0
16. Reserve as of December 31, current year (Lines 12 + 13 + 14 + 15)	382,147,103	48,818,257	430,965,360	40,883,920	255,686,901	296,570,821	727,536,181

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

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution 5 Factor	Basic Contribution 6 Amount (Cols.4 x 5)	Reserve Objective 7 Factor	Reserve Objective 8 Amount (Cols. 4 x 7)	Maximum Reserve 9 Factor	Maximum Reserve 10 Amount (Cols. 4 x 9)
		LONG-TERM BONDS										
1.		Exempt obligations	151,131,248	XXX	XXX	151,131,248	0.0000	0	0.0000	0	0.0000	0
2.1	1	NAIC Designation Category 1.A	5,937,529,692	XXX	XXX	5,937,529,692	0.0002	1,187,506	0.0007	4,156,271	0.0013	7,718,789
2.2	1	NAIC Designation Category 1.B	1,279,722,435	XXX	XXX	1,279,722,435	0.0004	511,889	0.0011	1,407,695	0.0023	2,943,362
2.3	1	NAIC Designation Category 1.C	3,499,395,852	XXX	XXX	3,499,395,852	0.0006	2,099,638	0.0018	6,298,913	0.0035	12,247,885
2.4	1	NAIC Designation Category 1.D	1,474,993,741	XXX	XXX	1,474,993,741	0.0007	1,032,496	0.0022	3,244,986	0.0044	6,489,972
2.5	1	NAIC Designation Category 1.E	1,821,319,885	XXX	XXX	1,821,319,885	0.0009	1,639,188	0.0027	4,917,564	0.0055	10,017,259
2.6	1	NAIC Designation Category 1.F	5,161,232,438	XXX	XXX	5,161,232,438	0.0011	5,677,356	0.0034	17,548,190	0.0068	35,096,381
2.7	1	NAIC Designation Category 1.G	5,258,341,582	XXX	XXX	5,258,341,582	0.0014	7,361,678	0.0042	22,085,035	0.0085	44,695,903
2.8		Subtotal NAIC 1 (2.1+2.2+2.3+2.4+2.5+2.6+2.7)	24,432,535,625	XXX	XXX	24,432,535,625	XXX	19,509,750	XXX	59,658,653	XXX	119,209,552
3.1	2	NAIC Designation Category 2.A	4,127,718,596	XXX	XXX	4,127,718,596	0.0021	8,668,209	0.0063	26,004,627	0.0105	43,341,045
3.2	2	NAIC Designation Category 2.B	6,711,989,377	XXX	XXX	6,711,989,377	0.0025	16,779,973	0.0076	51,011,119	0.0127	85,242,265
3.3	2	NAIC Designation Category 2.C	3,079,383,417	XXX	XXX	3,079,383,417	0.0036	11,085,780	0.0108	33,257,341	0.0180	55,428,902
3.4		Subtotal NAIC 2 (3.1+3.2+3.3)	13,919,091,390	XXX	XXX	13,919,091,390	XXX	36,533,963	XXX	110,273,087	XXX	184,012,212
4.1	3	NAIC Designation Category 3.A	366,012,634	XXX	XXX	366,012,634	0.0069	2,525,487	0.0183	6,698,031	0.0262	9,589,531
4.2	3	NAIC Designation Category 3.B	230,683,316	XXX	XXX	230,683,316	0.0099	2,283,765	0.0264	6,090,040	0.0377	8,696,761
4.3	3	NAIC Designation Category 3.C	319,898,496	XXX	XXX	319,898,496	0.0131	4,190,670	0.0350	11,196,447	0.0500	15,994,925
4.4		Subtotal NAIC 3 (4.1+4.2+4.3)	916,594,445	XXX	XXX	916,594,445	XXX	8,999,922	XXX	23,984,518	XXX	34,281,217
5.1	4	NAIC Designation Category 4.A	135,313,513	XXX	XXX	135,313,513	0.0184	2,489,769	0.0430	5,818,481	0.0615	8,321,781
5.2	4	NAIC Designation Category 4.B	93,666,508	XXX	XXX	93,666,508	0.0238	2,229,263	0.0555	5,198,491	0.0793	7,427,754
5.3	4	NAIC Designation Category 4.C	233,088,158	XXX	XXX	233,088,158	0.0310	7,225,733	0.0724	16,875,583	0.1034	24,101,316
5.4		Subtotal NAIC 4 (5.1+5.2+5.3)	462,068,180	XXX	XXX	462,068,180	XXX	11,944,764	XXX	27,892,555	XXX	39,850,851
6.1	5	NAIC Designation Category 5.A	86,584,442	XXX	XXX	86,584,442	0.0472	4,086,786	0.0846	7,325,044	0.1410	12,208,406
6.2	5	NAIC Designation Category 5.B	260,168,197	XXX	XXX	260,168,197	0.0663	17,249,151	0.1188	30,907,982	0.1980	51,513,303
6.3	5	NAIC Designation Category 5.C	47,997,959	XXX	XXX	47,997,959	0.0836	4,012,629	0.1498	7,190,094	0.2496	11,980,290
6.4		Subtotal NAIC 5 (6.1+6.2+6.3)	394,750,598	XXX	XXX	394,750,598	XXX	25,348,566	XXX	45,423,120	XXX	75,702,000
7.	6	NAIC 6	115,338,752	XXX	XXX	115,338,752	0.0000	0	0.2370	27,335,284	0.2370	27,335,284
8.		Intentionally left blank	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
9.		Total long-term bonds (1+2.8+3.4+4.4+5.4+6.4+7+8)	40,391,510,238	XXX	XXX	40,391,510,238	XXX	102,336,966	XXX	294,567,217	XXX	480,391,115
		PREFERRED STOCKS										
10.	1	Highest quality	60,451,345	XXX	XXX	60,451,345	0.0005	30,226	0.0016	96,722	0.0033	199,489
11.	2	High quality	739,952,382	XXX	XXX	739,952,382	0.0021	1,553,900	0.0064	4,735,695	0.0106	7,843,495
12.	3	Medium quality	185,029,691	XXX	XXX	185,029,691	0.0099	1,831,794	0.0263	4,866,281	0.0376	6,957,116
13.	4	Low quality	1,585,620	XXX	XXX	1,585,620	0.0245	38,848	0.0572	90,697	0.0817	129,545
14.	5	Lower quality	21,625,754	XXX	XXX	21,625,754	0.0630	1,362,422	0.1128	2,439,385	0.1880	4,065,642
15.	6	In or near default	18,393,922	XXX	XXX	18,393,922	0.0000	0	0.2370	4,359,360	0.2370	4,359,360
16.		Affiliated life with AVR	0	XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
17.		Total preferred stocks (Sum of Lines 10 through 16)	1,027,038,714	XXX	XXX	1,027,038,714	XXX	4,817,190	XXX	16,588,140	XXX	23,554,647

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 5 Factor	Basic Contribution 6 Amount (Cols.4 x 5)	Reserve Objective 7 Factor	Reserve Objective 8 Amount (Cols. 4 x 7)	Maximum Reserve 9 Factor	Maximum Reserve 10 Amount (Cols. 4 x 9)
		SHORT-TERM BONDS										
18.		Exempt obligations		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
19.1	1	NAIC Designation Category 1.A		XXX	XXX	0	0.0002	0	0.0007	0	0.0013	0
19.2	1	NAIC Designation Category 1.B		XXX	XXX	0	0.0004	0	0.0011	0	0.0023	0
19.3	1	NAIC Designation Category 1.C	40,000,000	XXX	XXX	40,000,000	0.0006	24,000	0.0018	72,000	0.0035	140,000
19.4	1	NAIC Designation Category 1.D	43,000,000	XXX	XXX	43,000,000	0.0007	30,100	0.0022	94,600	0.0044	189,200
19.5	1	NAIC Designation Category 1.E	10,000,000	XXX	XXX	10,000,000	0.0009	9,000	0.0027	27,000	0.0055	55,000
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)	93,000,000	XXX	XXX	93,000,000	XXX	63,100	XXX	193,600	XXX	384,200
20.1	2	NAIC Designation Category 2.A	199,833,280	XXX	XXX	199,833,280	0.0021	419,650	0.0063	1,258,950	0.0105	2,098,249
20.2	2	NAIC Designation Category 2.B	483,694	XXX	XXX	483,694	0.0025	1,209	0.0076	3,676	0.0127	6,143
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)	200,316,974	XXX	XXX	200,316,974	XXX	420,859	XXX	1,262,626	XXX	2,104,392
21.1	3	NAIC Designation Category 3.A		XXX	XXX	0	0.0069	0	0.0183	0	0.0262	0
21.2	3	NAIC Designation Category 3.B		XXX	XXX	0	0.0099	0	0.0264	0	0.0377	0
21.3	3	NAIC Designation Category 3.C		XXX	XXX	0	0.0131	0	0.0350	0	0.0500	0
21.4		Subtotal NAIC 3 (21.1+21.2+21.3)	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
22.1	4	NAIC Designation Category 4.A		XXX	XXX	0	0.0184	0	0.0430	0	0.0615	0
22.2	4	NAIC Designation Category 4.B		XXX	XXX	0	0.0238	0	0.0555	0	0.0793	0
22.3	4	NAIC Designation Category 4.C		XXX	XXX	0	0.0310	0	0.0724	0	0.1034	0
22.4		Subtotal NAIC 4 (22.1+22.2+22.3)	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
23.1	5	NAIC Designation Category 5.A		XXX	XXX	0	0.0472	0	0.0846	0	0.1410	0
23.2	5	NAIC Designation Category 5.B	113,206	XXX	XXX	113,206	0.0663	7,506	0.1188	13,449	0.1980	22,415
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)	113,206	XXX	XXX	113,206	XXX	7,506	XXX	13,449	XXX	22,415
24.	6	NAIC 6	0	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)	293,430,180	XXX	XXX	293,430,180	XXX	491,465	XXX	1,469,675	XXX	2,511,007
		DERIVATIVE INSTRUMENTS										
26.		Exchange traded	490,196,841	XXX	XXX	490,196,841	0.0005	245,098	0.0016	784,315	0.0033	1,617,650
27.	1	Highest quality	6,193,328	XXX	XXX	6,193,328	0.0005	3,097	0.0016	9,909	0.0033	20,438
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	496,390,169	XXX	XXX	496,390,169	XXX	248,195	XXX	794,224	XXX	1,638,088
34.		Total (Lines 9 + 17 + 25 + 33)	42,208,369,301	XXX	XXX	42,208,369,301	XXX	107,893,815	XXX	313,419,256	XXX	508,094,857

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

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution		Reserve Objective		Maximum Reserve	
							5 Factor	6 Amount (Cols.4 x 5)	7 Factor	8 Amount (Cols. 4 x 7)	9 Factor	10 Amount (Cols. 4 x 9)
		MORTGAGE LOANS										
		In Good Standing:										
35.		Farm mortgages - CM1 - highest quality	0		XXX	0	0.0011	0	0.0057	0	0.0074	0
36.		Farm mortgages - CM2 - high quality	0		XXX	0	0.0040	0	0.0114	0	0.0149	0
37.		Farm mortgages - CM3 - medium quality	0		XXX	0	0.0069	0	0.0200	0	0.0257	0
38.		Farm mortgages - CM4 - low Medium quality	0		XXX	0	0.0120	0	0.0343	0	0.0428	0
39.		Farm mortgages - CM5 - low quality	0		XXX	0	0.0183	0	0.0486	0	0.0628	0
40.		Residential mortgages - insured or guaranteed	340,765,217		XXX	340,765,217	0.0003	102,230	0.0007	238,536	0.0011	374,842
41.		Residential mortgages - all other	3,989,080,104		XXX	3,989,080,104	0.0015	5,983,620	0.0034	13,562,872	0.0046	18,349,768
42.		Commercial mortgages - insured or guaranteed	0		XXX	0	0.0003	0	0.0007	0	0.0011	0
43.		Commercial mortgages - all other - CM1 - highest quality	274,880,140		XXX	274,880,140	0.0011	302,368	0.0057	1,566,817	0.0074	2,034,113
44.		Commercial mortgages - all other - CM2 - high quality	1,325,325,616		XXX	1,325,325,616	0.0040	5,301,302	0.0114	15,108,712	0.0149	19,747,352
45.		Commercial mortgages - all other - CM3 - medium quality	323,431,180		XXX	323,431,180	0.0069	2,231,675	0.0200	6,468,624	0.0257	8,312,181
46.		Commercial mortgages - all other - CM4 - low medium quality	0		XXX	0	0.0120	0	0.0343	0	0.0428	0
47.		Commercial mortgages - all other - CM5 - low quality	0		XXX	0	0.0183	0	0.0486	0	0.0628	0
		Overdue, Not in Process:										
48.		Farm mortgages	0		XXX	0	0.0480	0	0.0868	0	0.1371	0
49.		Residential mortgages - insured or guaranteed	0		XXX	0	0.0006	0	0.0014	0	0.0023	0
50.		Residential mortgages - all other	0		XXX	0	0.0029	0	0.0066	0	0.0103	0
51.		Commercial mortgages - insured or guaranteed	0		XXX	0	0.0006	0	0.0014	0	0.0023	0
52.		Commercial mortgages - all other	0		XXX	0	0.0480	0	0.0868	0	0.1371	0
		In Process of Foreclosure:										
53.		Farm mortgages	0		XXX	0	0.0000	0	0.1942	0	0.1942	0
54.		Residential mortgages - insured or guaranteed	0		XXX	0	0.0000	0	0.0046	0	0.0046	0
55.		Residential mortgages - all other	0		XXX	0	0.0000	0	0.0149	0	0.0149	0
56.		Commercial mortgages - insured or guaranteed	0		XXX	0	0.0000	0	0.0046	0	0.0046	0
57.		Commercial mortgages - all other	0		XXX	0	0.0000	0	0.1942	0	0.1942	0
58.		Total Schedule B mortgages (Sum of Lines 35 through 57)	6,253,482,257	0	XXX	6,253,482,257	XXX	13,921,195	XXX	36,945,560	XXX	48,818,256

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

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution 5 Factor	Basic Contribution 6 Amount (Cols.4 x 5)	Reserve Objective 7 Factor	Reserve Objective 8 Amount (Cols. 4 x 7)	Maximum Reserve 9 Factor	Maximum Reserve 10 Amount (Cols. 4 x 9)
		COMMON STOCK										
1.		Unaffiliated - public	154,756,218	XXX	XXX	154,756,218	0.0000	0	0.1779 (a)	27,531,131	0.1779 (a)	27,531,131
2.		Unaffiliated - private	65,922,179	XXX	XXX	65,922,179	0.0000	0	0.1945	12,821,864	0.1945	12,821,864
3.		Federal Home Loan Bank	33,657,400	XXX	XXX	33,657,400	0.0000	0	0.0061	205,310	0.0097	326,477
4.		Affiliated - life with AVR	267,835,445	XXX	XXX	267,835,445	0.0000	0	0.0000	0	0.0000	0
		Affiliated - Investment Subsidiary:										
5.		Fixed income - exempt obligations				0	XXX		XXX		XXX	
6.		Fixed income - highest quality				0	XXX		XXX		XXX	
7.		Fixed income - high quality				0	XXX		XXX		XXX	
8.		Fixed income - medium quality				0	XXX		XXX		XXX	
9.		Fixed income - low quality				0	XXX		XXX		XXX	
10.		Fixed income - lower quality				0	XXX		XXX		XXX	
11.		Fixed income - in or near default				0	XXX		XXX		XXX	
12.		Unaffiliated common stock - public				0	0.0000	0	0.1580 (a)	0	0.1580 (a)	0
13.		Unaffiliated common stock - private				0	0.0000	0	0.1945	0	0.1945	0
14.		Real estate				0	(b)	0	(b)	0	(b)	0
15.		Affiliated - certain other (See SVO Purposes and Procedures Manual)		XXX	XXX	0	0.0000	0	0.1580	0	0.1580	0
16.		Affiliated - all other	1,051,147	XXX	XXX	1,051,147	0.0000	0	0.1945	204,448	0.1945	204,448
17.		Total common stock (Sum of Lines 1 through 16)	523,222,389	0	0	523,222,389	XXX	0	XXX	40,762,753	XXX	40,883,920
		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	0	XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
23.	1	Highest quality	35,955,108	XXX	XXX	35,955,108	0.0005	17,978	0.0016	57,528	0.0033	118,652
24.	2	High quality	23,706,436	XXX	XXX	23,706,436	0.0021	49,784	0.0064	151,721	0.0106	251,288
25.	3	Medium quality	4,853,145	XXX	XXX	4,853,145	0.0099	48,046	0.0263	127,638	0.0376	182,478
26.	4	Low quality	12,887,308	XXX	XXX	12,887,308	0.0245	315,739	0.0572	737,154	0.0817	1,052,893
27.	5	Lower quality	3,680,640	XXX	XXX	3,680,640	0.0630	231,880	0.1128	415,176	0.1880	691,960
28.	6	In or near default	62,899,235	XXX	XXX	62,899,235	0.0000	0	0.2370	14,907,119	0.2370	14,907,119
29.		Total with bond characteristics (Sum of Lines 22 through 28)	143,981,872	XXX	XXX	143,981,872	XXX	663,427	XXX	16,396,336	XXX	17,204,390

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

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution 5 Factor	Basic Contribution 6 Amount (Cols.4 x 5)	Reserve Objective 7 Factor	Reserve Objective 8 Amount (Cols. 4 x 7)	Maximum Reserve 9 Factor	Maximum Reserve 10 Amount (Cols. 4 x 9)
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF PREFERRED STOCKS										
30.	1	Highest quality		XXX	XXX	0	0.0005	0	0.0016	0	0.0033	0
31.	2	High quality		XXX	XXX	0	0.0021	0	0.0064	0	0.0106	0
32.	3	Medium quality		XXX	XXX	0	0.0099	0	0.0263	0	0.0376	0
33.	4	Low quality		XXX	XXX	0	0.0245	0	0.0572	0	0.0817	0
34.	5	Lower quality		XXX	XXX	0	0.0630	0	0.1128	0	0.1880	0
35.	6	In or near default		XXX	XXX	0	0.0000	0	0.2370	0	0.2370	0
36.		Affiliated life with AVR		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
37.		Total with preferred stock characteristics (Sum of Lines 30 through 36)	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF MORTGAGE LOANS										
		In Good Standing Affiliated:										
38.		Mortgages - CM1 - highest quality	1,399,373		XXX	1,399,373	0.0011	1,539	0.0057	7,976	0.0074	10,355
39.		Mortgages - CM2 - high quality	135,416,085		XXX	135,416,085	0.0040	541,664	0.0114	1,543,743	0.0149	2,017,700
40.		Mortgages - CM3 - medium quality	105,256,345		XXX	105,256,345	0.0069	726,269	0.0200	2,105,127	0.0257	2,705,088
41.		Mortgages - CM4 - low medium quality	1,201,732		XXX	1,201,732	0.0120	14,421	0.0343	41,219	0.0428	51,434
42.		Mortgages - CM5 - low quality	0		XXX	0	0.0183	0	0.0486	0	0.0628	0
43.		Residential Mortgages - insured or guaranteed	0		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)	243,273,535	0	XXX	243,273,535	XXX	1,283,893	XXX	3,698,066	XXX	4,784,577
57.		Unaffiliated - in good standing with covenants			XXX	0	(c)	0	(c)	0	(c)	0
58.		Unaffiliated - in good standing defeased with government securities			XXX	0	0.0011	0	0.0057	0	0.0074	0
59.		Unaffiliated - in good standing primarily senior	4,557,109		XXX	4,557,109	0.0040	18,228	0.0114	51,951	0.0149	67,901
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)	4,557,109	0	XXX	4,557,109	XXX	18,228	XXX	51,951	XXX	67,901
64.		Total with mortgage loan characteristics (Lines 56 + 63)	247,830,644	0	XXX	247,830,644	XXX	1,302,122	XXX	3,750,017	XXX	4,852,478

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

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution 5 Factor	Basic Contribution 6 Amount (Cols.4 x 5)	Reserve Objective 7 Factor	Reserve Objective 8 Amount (Cols. 4 x 7)	Maximum Reserve 9 Factor	Maximum Reserve 10 Amount (Cols. 4 x 9)
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF COMMON STOCK										
65.		Unaffiliated public		XXX	XXX	0	0.0000	0	0.1580 (a)	0	0.1580 (a)	0
66.		Unaffiliated private	747,555,295	XXX	XXX	747,555,295	0.0000	0	0.1945	145,399,505	0.1945	145,399,505
67.		Affiliated life with AVR	0	XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
68.		Affiliated certain other (See SVO Purposes & Procedures Manual)	0	XXX	XXX	0	0.0000	0	0.1580	0	0.1580	0
69.		Affiliated other - all other	1,242,798,704	XXX	XXX	1,242,798,704	0.0000	0	0.1945	241,724,348	0.1945	241,724,348
70.		Total with common stock characteristics (Sum of Lines 65 through 69)	1,990,353,999	XXX	XXX	1,990,353,999	XXX	0	XXX	387,123,853	XXX	387,123,853
		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	148,980,988	0	91,447,251	240,428,239	0.0000	0	0.0912	21,927,055	0.0912	21,927,055
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)	148,980,988	0	91,447,251	240,428,239	XXX	0	XXX	21,927,055	XXX	21,927,055
		INVESTMENTS IN TAX CREDIT STRUCTURES										
75.		Yield guaranteed state tax credit investments	0			0	0.0003	0	0.0006	0	0.0010	0
76.		Qualifying federal tax credit investments	0			0	0.0063	0	0.0120	0	0.0190	0
77.		Qualifying state tax credit investments	0			0	0.0063	0	0.0120	0	0.0190	0
78.		Other tax credit investments	0			0	0.0273	0	0.0600	0	0.0975	0
79.		Total tax credit investments (Sum of Lines 75 through 78)	0	0	0	0	XXX	0	XXX	0	XXX	0
		RESIDUAL TRANCHES OR INTERESTS										
80.		Bonds - unaffiliated	19,204,615	XXX	XXX	19,204,615	0.0000	0	0.1580	3,034,329	0.1580	3,034,329
81.		Bonds - affiliated	1,642,389	XXX	XXX	1,642,389	0.0000	0	0.1580	259,497	0.1580	259,497
82.		Common stock - unaffiliated	0	XXX	XXX	0	0.0000	0	0.1580	0	0.1580	0
83.		Common stock - affiliated	0	XXX	XXX	0	0.0000	0	0.1580	0	0.1580	0
84.		Preferred stock - unaffiliated	0	XXX	XXX	0	0.0000	0	0.1580	0	0.1580	0
85.		Preferred stock - affiliated	0	XXX	XXX	0	0.0000	0	0.1580	0	0.1580	0
86.		Real estate - unaffiliated	0			0	0.0000	0	0.1580	0	0.1580	0
87.		Real estate - affiliated	0			0	0.0000	0	0.1580	0	0.1580	0
88.		Mortgage loans - unaffiliated	0	XXX	XXX	0	0.0000	0	0.1580	0	0.1580	0
89.		Mortgage loans - affiliated	0	XXX	XXX	0	0.0000	0	0.1580	0	0.1580	0
90.		Other - unaffiliated	0	XXX	XXX	0	0.0000	0	0.1580	0	0.1580	0
91.		Other - affiliated	0	XXX	XXX	0	0.0000	0	0.1580	0	0.1580	0
92.		Total residual tranches or interests (Sum of Lines 80 through 91)	20,847,003	0	0	20,847,003	XXX	0	XXX	3,293,827	XXX	3,293,827
		SURPLUS NOTES AND CAPITAL NOTES										
93.	1	Highest quality	205,815,169	XXX	XXX	205,815,169	0.0005	102,908	0.0016	329,304	0.0033	679,190
94.	2	High quality	187,815,265	XXX	XXX	187,815,265	0.0021	394,412	0.0064	1,202,018	0.0106	1,990,842
95.	3	Medium quality	10,000,000	XXX	XXX	10,000,000	0.0099	99,000	0.0263	263,000	0.0376	376,000
96.	4	Low quality	0	XXX	XXX	0	0.0245	0	0.0572	0	0.0817	0
97.	5	Lower quality	16,590	XXX	XXX	16,590	0.0630	1,045	0.1128	1,871	0.1880	3,119
98.	6	In or near default	0	XXX	XXX	0	0.0000	0	0.2370	0	0.2370	0
99.		Total surplus notes and capital notes (Sum of Lines 93 through 98)	403,647,025	XXX	XXX	403,647,025	XXX	597,365	XXX	1,796,193	XXX	3,049,151
		ALL OTHER INVESTMENTS										
100.		NAIC 1 working capital finance investments		XXX		0	0.0000	0	0.0042	0	0.0042	0
101.		NAIC 2 working capital finance investments		XXX		0	0.0000	0	0.0137	0	0.0137	0
102.		Other invested assets - Schedule BA	114,427,149	XXX		114,427,149	0.0000	0	0.1580	18,079,490	0.1580	18,079,490
103.		Other short-term invested assets - Schedule DA		XXX		0	0.0000	0	0.1580	0	0.1580	0
104.		Total all other (Sum of Lines 100 through 103)	114,427,149	XXX	0	114,427,149	XXX	0	XXX	18,079,490	XXX	18,079,490
105.		Total other invested assets - Schedules BA & DA (Sum of Lines 29, 37, 64, 70, 74, 79, 92, 99 and 104)	3,070,068,680	0	91,447,251	3,161,515,931	XXX	2,562,913	XXX	452,366,771	XXX	455,530,244

(a) Times the company's weighted average portfolio beta (Minimum .1215, Maximum .2431).
(b) Determined using the same factors and breakdowns used for directly owned real estate.
(c) This will be the factor associated with the risk category determined in the company generated worksheet.

Asset Valuation Reserve - Replications (Synthetic) Assets

N O N E

Schedule F - Claims

N O N E

SCHEDULE H - 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	2,738,991	XXX		XXX		XXX		XXX		XXX		XXX		XXX
2.	Premiums earned	2,765,846	XXX		XXX		XXX		XXX		XXX		XXX		XXX
3.	Incurred claims	5,510,664	199.2	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)	5,510,664	199.2	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
6.	Increase in contract reserves	880,428	31.8	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
7.	Commissions (a)	515,641	18.6		0.0		0.0		0.0		0.0		0.0		0.0
8.	Other general insurance expenses	0	0.0		0.0		0.0		0.0		0.0		0.0		0.0
9.	Taxes, licenses and fees	0	0.0		0.0		0.0		0.0		0.0		0.0		0.0
10.	Total other expenses incurred	515,641	18.6	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	0.0
12.	Gain from underwriting before dividends or refunds	(4,140,887)	(149.7)	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	(4,140,887)	(149.7)	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		XXX	2,738,991	XXX		XXX
2.	Premiums earned		XXX		XXX		XXX		XXX	2,765,846	XXX		XXX
3.	Incurred claims	0	0.0	0	0.0	0	0.0	0	0.0	5,510,664	199.2	0	0.0
4.	Cost containment expenses		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	0	0.0	5,510,664	199.2	0	0.0
6.	Increase in contract reserves	0	0.0	0	0.0	0	0.0	0	0.0	880,428	31.8	0	0.0
7.	Commissions (a)		0.0		0.0		0.0		0.0	515,641	18.6		0.0
8.	Other general insurance expenses		0.0		0.0		0.0		0.0		0.0		0.0
9.	Taxes, licenses and fees		0.0		0.0		0.0		0.0		0.0		0.0
10.	Total other expenses incurred	0	0.0	0	0.0	0	0.0	0	0.0	515,641	18.6	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
12.	Gain from underwriting before dividends or refunds	0	0.0	0	0.0	0	0.0	0	0.0	(4,140,887)	(149.7)	0	0.0
13.	Dividends or refunds		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	0	0.0	(4,140,887)	(149.7)	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
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."

SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT (Continued)

PART 2. - RESERVES AND LIABILITIES

	1 Total	2 Comprehensive (Hospital and Medical) Individual	3 Comprehensive (Hospital and Medical) Group	4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefits Plan	8 Medicare Title XVIII	9 Medicaid Title XIX	10 Credit A&H	11 Disability Income	12 Long-Term Care	13 Other Health
A. Premium Reserves:													
1. Unearned premiums	645,652											645,652	
2. Advance premiums	9,290											9,290	
3. Reserve for rate credits	0												
4. Total premium reserves, current year	654,942	0	0	0	0	0	0	0	0	0	0	654,942	0
5. Total premium reserves, prior year	698,223	0	0	0	0	0	0	0	0	0	0	698,223	0
6. Increase in total premium reserves	(43,281)	0	0	0	0	0	0	0	0	0	0	(43,281)	0
B. Contract Reserves:													
1. Additional reserves (a)	39,036,289											39,036,289	
2. Reserve for future contingent benefits	0												
3. Total contract reserves, current year	39,036,289	0	0	0	0	0	0	0	0	0	0	39,036,289	0
4. Total contract reserves, prior year.	38,155,861	0	0	0	0	0	0	0	0	0	0	38,155,861	0
5. Increase in contract reserves	880,428	0	0	0	0	0	0	0	0	0	0	880,428	0
C. Claim Reserves and Liabilities:													
1. Total current year	16,286,049	0	0	0	0	0	0	0	0	0	0	16,286,049	0
2. Total prior year	16,155,563	0	0	0	0	0	0	0	0	0	0	16,155,563	0
3. Increase	130,486	0	0	0	0	0	0	0	0	0	0	130,486	0

PART 3. - TEST OF PRIOR YEAR'S CLAIM RESERVES AND LIABILITIES

	1 Total	2 Comprehensive (Hospital and Medical) Individual	3 Comprehensive (Hospital and Medical) Group	4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefits Plan	8 Medicare Title XVIII	9 Medicaid Title XIX	10 Credit A&H	11 Disability Income	12 Long-Term Care	13 Other Health
1. Claims paid during the year:													
1.1 On claims incurred prior to current year	4,891,818											4,891,818	
1.2 On claims incurred during current year	488,360											488,360	
2. Claim reserves and liabilities, December 31, current year:													
2.1 On claims incurred prior to current year	12,936,316											12,936,316	
2.2 On claims incurred during current year	3,349,733											3,349,733	
3. Test:													
3.1 Lines 1.1 and 2.1	17,828,134	0	0	0	0	0	0	0	0	0	0	17,828,134	0
3.2 Claim reserves and liabilities, December 31, prior year	16,155,563	0	0	0	0	0	0	0	0	0	0	16,155,563	0
3.3 Line 3.1 minus Line 3.2	1,672,571	0	0	0	0	0	0	0	0	0	0	1,672,571	0

PART 4. - REINSURANCE

	1 Total	2 Comprehensive (Hospital and Medical) Individual	3 Comprehensive (Hospital and Medical) Group	4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefits Plan	8 Medicare Title XVIII	9 Medicaid Title XIX	10 Credit A&H	11 Disability Income	12 Long-Term Care	13 Other Health
A. Reinsurance Assumed:													
1. Premiums written	2,726,406											2,726,406	
2. Premiums earned	2,765,846											2,765,846	
3. Incurred claims	5,510,662											5,510,662	
4. Commissions	515,641											515,641	
B. Reinsurance Ceded:													
1. Premiums written	4,289,587			1,345,135							606	2,941,890	1,956
2. Premiums earned	4,293,375			1,367,119							823	2,923,477	1,956
3. Incurred claims	4,618,215			896,840							5,642	3,714,466	1,267
4. Commissions	124,078			5,676								118,364	38

(a) Includes $ ..... 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			896,840							5,642	3,714,467	1,267	4,618,216
2. Beginning claim reserves and liabilities			150,506							42,015	9,922,295	485	10,115,301
3. Ending claim reserves and liabilities			160,915							41,027	10,068,428	498	10,270,868
4. Claims paid	0	0	886,431	0	0	0	0	0	0	6,630	3,568,334	1,254	4,462,649
B. Assumed Reinsurance:													
1. Incurred claims											5,510,662		5,510,662
2. Beginning claim reserves and liabilities											16,155,563		16,155,563
3. Ending claim reserves and liabilities											16,286,049		16,286,049
4. Claims paid	0	0	0	0	0	0	0	0	0	0	5,380,176	0	5,380,176
C. Ceded Reinsurance:													
1. Incurred claims			896,840							5,642	3,714,466	1,267	4,618,215
2. Beginning claim reserves and liabilities			150,506							42,015	9,922,295	485	10,115,301
3. Ending claim reserves and liabilities			160,915							41,027	10,068,428	498	10,270,868
4. Claims paid	0	0	886,431	0	0	0	0	0	0	6,630	3,568,333	1,254	4,462,648
D. Net:													
1. Incurred claims	0	0	0	0	0	0	0	0	0	0	5,510,663	0	5,510,663
2. Beginning claim reserves and liabilities	0	0	0	0	0	0	0	0	0	0	16,155,563	0	16,155,563
3. Ending claim reserves and liabilities	0	0	0	0	0	0	0	0	0	0	16,286,049	0	16,286,049
4. Claims paid	0	0	0	0	0	0	0	0	0	0	5,380,177	0	5,380,177
E. Net Incurred Claims and Cost Containment Expenses:													
1. Incurred claims and cost containment expenses	0	0	0	0	0	0	0	0	0	0	5,510,664	0	5,510,664
2. Beginning reserves and liabilities											16,155,563		16,155,563
3. Ending reserves and liabilities											16,286,049		16,286,049
4. Paid claims and cost containment expenses	0	0	0	0	0	0	0	0	0	0	5,380,178	0	5,380,178

SCHEDULE S - PART 1 - SECTION 1

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

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Reinsured	5 Domiciliary Jurisdiction	6 Type of Reinsurance Assumed	7 Type of Business Assumed	8 Amount of In Force at End of Year	9 Reserve	10 Premiums	11 Reinsurance Payable on Paid and Unpaid Losses	12 Modified Coinsurance Reserve	13 Funds Withheld Under Coinsurance
0399999. Total General Account - U.S. affiliates							0	0	0	0	0	0
0699999. Total General Account - non-U.S. affiliates							0	0	0	0	0	0
0799999. Total General Account - affiliates							0	0	0	0	0	0
71404	47-0463747	10/31/2015	Continental General Insurance Company	TX	CO/I	FA		405,066				
71404	47-0463747	10/31/2015	Continental General Insurance Company	TX	CO/I	OL	1,568,161	800,805	85,941	38,741		
71404	47-0463747	10/31/2015	Continental General Insurance Company	TX	CO/G	FA		992,834	12,960			
65722	63-0343428	08/31/2012	Loyal American Life Insurance Company	OH	CO/I	FA		45,375,042	75,300	789,380		
65722	63-0343428	08/31/2012	Loyal American Life Insurance Company	OH	CO/I	OL	189,133,462	85,190,826	1,787,435	1,982,731		
61727	34-0970995	08/31/2012	Cigna National Health Insurance Company	OH	CO/I	FA		3,100,118	21,775	38,226		
61727	34-0970995	08/31/2012	Cigna National Health Insurance Company	OH	CO/I	OL	6,198,300	935,371	160,289	7,816		
67903	23-1335885	08/31/2012	Provident American Life & Health Insurance Company	OH	CO/I	OL	3,146,996	1,647,940	234,974	33,445		
88366	59-2760189	08/31/2012	American Retirement Life Insurance Company	OH	CO/I	OL	894,926	652,202		3,000		
65722	63-0343428	01/01/2007	Loyal American Life Insurance Company	OH	CO/I	IA		7,684,047	1,046			
62200	95-2496321	06/30/2011	Accordia Life and Annuity Company	IA	CO/I	FA		2,192,381				
62200	95-2496321	06/30/2011	Accordia Life and Annuity Company	IA	CO/I	OL	2,247,670	1,783,752		64,042		
0899999. General Account - U.S. non-affiliates							203,189,515	150,760,384	2,379,720	2,957,381	0	0
1099999. Total General Account - non-affiliates							203,189,515	150,760,384	2,379,720	2,957,381	0	0
1199999. Total General Account							203,189,515	150,760,384	2,379,720	2,957,381	0	0
1499999. Total Separate Accounts - U.S. affiliates							0	0	0	0	0	0
1799999. Total Separate Accounts - non-U.S. affiliates							0	0	0	0	0	0
1899999. Total Separate Accounts - affiliates							0	0	0	0	0	0
2199999. Total Separate Accounts - non-affiliates							0	0	0	0	0	0
2299999. Total Separate Accounts							0	0	0	0	0	0
2399999. Total U.S. (Sum of 0399999, 0899999, 1499999 and 1999999)							203,189,515	150,760,384	2,379,720	2,957,381	0	0
2499999. Total non-U.S. (Sum of 0699999, 0999999, 1799999 and 2099999)							0	0	0	0	0	0
9999999 - Totals							203,189,515	150,760,384	2,379,720	2,957,381	0	0

SCHEDULE S - PART 1 - SECTION 2

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

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Reinsured	5 Domiciliary Jurisdiction	6 Type of Reinsurance Assumed	7 Type of Business Assumed	8 Premiums	9 Unearned Premiums	10 Reserve Liability Other Than for Unearned Premiums	11 Reinsurance Payable on Paid and Unpaid Losses	12 Modified Coinsurance Reserve	13 Funds Withheld Under Coinsurance
0399999. Total - U.S. affiliates							0	0	0	0	0	0
0699999. Total - non-U.S. affiliates							0	0	0	0	0	0
0799999. Total - affiliates							0	0	0	0	0	0
71404	47-0463747	10/31/2015	Continental General Insurance Company	TX	QA/I	LTC	2,715,890	644,489	54,580,740	521,986		
71404	47-0463747	10/31/2015	Continental General Insurance Company	TX	QA/G	LTC	10,516	1,163	219,396	216		
0899999. U.S. non-affiliates							2,726,406	645,652	54,800,136	522,202	0	0
1099999. Total - non-affiliates							2,726,406	645,652	54,800,136	522,202	0	0
1199999. Total U.S. (Sum of 0399999 and 0899999)							2,726,406	645,652	54,800,136	522,202	0	0
1299999. Total non-U.S. (Sum of 0699999 and 0999999)							0	0	0	0	0	0
9999999 - Totals							2,726,406	645,652	54,800,136	522,202	0	0

SCHEDULE S - PART 2

Reinsurance Recoverable on Paid and Unpaid Losses 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 Paid Losses	7 Unpaid Losses
0399999. Total life and annuity - U.S. affiliates					0	0
00000	RJ-3191494	02/01/2022	Martello Re Limited	BMU		56,481,779
0599999. Life and annuity - non-U.S. affiliates - other					0	56,481,779
0699999. Total life and annuity - non-U.S. affiliates					0	56,481,779
0799999. Total life and annuity - affiliates					0	56,481,779
68713	84-0499703	01/01/1998	Security Life of Denver Insurance Company	CO	50,000	
68713	84-0499703	01/01/2003	Security Life of Denver Insurance Company	CO		50,000
68713	84-0499703	01/01/2000	Security Life of Denver Insurance Company	CO	59,850	909,850
68713	84-0499703	01/01/1998	Security Life of Denver Insurance Company	CO	72,722	12,017
68713	84-0499703	01/01/2003	Security Life of Denver Insurance Company	CO	5,320	2,422
68713	84-0499703	01/01/2003	Security Life of Denver Insurance Company	CO	437,500	
68276	48-1024691	01/01/1998	Employers Reassurance Corporation	KS		12,017
88340	59-2859797	12/31/2002	Hannover Life Resssurance Company of America	FL	437,500	
88340	59-2859797	12/31/2002	Hannover Life Resssurance Company of America	FL		12,016
82627	06-0839705	04/01/2023	Swiss Re Life and Health of America	MO	234,500	30,150
82627	06-0839705	04/01/2023	Swiss Re Life and Health of America	MO	437,500	
82627	06-0839705	04/01/2023	Swiss Re Life & Health America Inc	MO	2,680	1,220
82627	06-0839705	01/01/1998	Swiss Re Life & Health America Inc	MO		12,017
93572	43-1235868	01/01/1998	RGA Reinsurance Company	MO	50,000	50,000
93572	43-1235868	01/01/1998	RGA Reinsurance Company	MO	437,500	
86231	39-0989781	01/01/2003	Transamerica Life Insurance Company	IA	200,000	200,000
65722	63-0343428	08/31/2012	Loyal American Life Insurance Company	OH	13,000	
88340	59-2859797	08/31/2012	Hannover Life Reassurance Company of America	FL		1,467,310
82627	06-0839705	01/01/1973	Swiss Re Life and Health of America	MO	37,500	37,500
82627	06-0839705	01/01/1973	Swiss Re Life and Health of America	MO	50,000	
88099	75-1608507	01/01/1982	Optimum Re Insurance Company	TX	50,000	
64688	75-6020048	01/01/1982	SCOR Global Life Americas Reinsurance Company	DE	4,359	
67989	46-0260270	09/01/1996	American Memorial Life Insurance Company	IA	180,220	59,695
84824	04-6145677	05/07/2020	Commonwealth Annuity and Life Insurance Company	MA		12,904,783
84824	04-6145677	10/01/2020	Commonwealth Annuity and Life Insurance Company	MA		19,525,298
0899999. Life and annuity - U.S. non-affiliates					2,760,151	35,286,295
1099999. Total life and annuity - non-affiliates					2,760,151	35,286,295
1199999. Total life and annuity					2,760,151	91,768,074
1499999. Total accident and health - U.S. affiliates					0	0
1799999. Total accident and health - non-U.S. affiliates					0	0
1899999. Total accident and health - affiliates					0	0
65722	63-0343428	08/31/2012	Loyal American Life Insurance Company	OH		162,389
71404	47-0463747	10/31/2015	Continental General Insurance Company	TX		916,062
1999999. Accident and health - U.S. non-affiliates					0	1,078,451
2199999. Total accident and health - non-affiliates					0	1,078,451
2299999. Total accident and health					0	1,078,451
2399999. Total U.S. (Sum of 0399999, 0899999, 1499999 and 1999999)					2,760,151	36,364,746
2499999. Total non-U.S. (Sum of 0699999, 0999999, 1799999 and 2099999)					0	56,481,779
9999999 Totals - Life, Annuity and Accident and Health					2,760,151	92,846,525

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	2	3	4	5	6	7	8	Reserve Credit Taken		11	Outstanding Surplus Relief		14	15
								9	10		12	13		
NAIC Company Code	ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Type of Business Ceded	Amount in Force at End of Year	Current Year	Prior Year	Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
0399999. Total General Account - authorized U.S. affiliates							0	0	0	0	0	0	0	0
0699999. Total General Account - authorized non-U.S. affiliates							0	0	0	0	0	0	0	0
0799999. Total General Account - authorized affiliates							0	0	0	0	0	0	0	0
68276	48-1024691	01/01/1998	Employers Reassurance Corporation	KS	CO/I	OL	28,593,427	99,478	93,509	201,053				
86258	13-2572994	07/01/1999	General Re Life Corporation	CT	CO/I	OL		19,364	20,854	4,900				
86258	13-2572994	10/01/2003	General Re Life Corporation	CT	YRT/I	OL	150,180	458	407	8,143				
88340	59-2859797	01/01/1998	Hannover Life Reassurance Company of America	FL	CO/I	OL	43,917,354	454,973	438,433	178,416				
88340	59-2859797	01/01/2000	Hannover Life Reassurance Company of America	FL	CO/I	XXXL	650,000	18,047	16,362					
88340	59-2859797	12/31/2002	Hannover Life Reassurance Company of America	FL	CO/I	OL	481,782,380	51,593,915	52,833,233	3,128,684				
88340	59-2859797	10/01/2003	Hannover Life Reassurance Company of America	FL	YRT/I	OL	22,109,600	24,168	22,678	203,970				
88099	75-1608507	11/09/2004	Optimum Re Insurance Company	TX	YRT/I	OL	881,031	1,247	1,130	10,439				
93572	43-1235868	01/01/1998	RGA Reinsurance Company	MO	CO/I	OL	36,182,452	1,691,009	1,711,984	141,671				
93572	43-1235868	01/01/2003	RGA Reinsurance Company	MO	CO/I	XXXL	30,512,689	1,575,479	1,658,406	62,976				
93572	43-1235868	10/01/2003	RGA Reinsurance Company	MO	YRT/I	OL	1,730,229	5,115	4,784	34,669				
68713	84-0499703	01/01/1998	Security Life of Denver Insurance Company	CO	YRT/I	OL	34,505,192	39,232	51,218	608,757				
68713	84-0499703	01/01/1999	Security Life of Denver Insurance Company	CO	CO/I	OL	48,765,850	1,165,835	1,139,776	238,681				
68713	84-0499703	04/01/1999	Security Life of Denver Insurance Company	CO	CO/I	OL	385,000	4,955	5,809	14,988				
68713	84-0499703	01/01/2000	Security Life of Denver Insurance Company	CO	CO/I	XXXL	572,553,370	32,976,984	35,189,915	2,164,627				
68713	84-0499703	01/01/2003	Security Life of Denver Insurance Company	CO	CO/I	XXXL	33,467,532	1,605,914	1,688,895	117,467				
82627	06-0839705	01/01/1998	Swiss Re Life & Health America Inc	MO	CO/I	OL	30,282,452	333,524	322,740	133,161				
82627	06-0839705	01/01/1998	Swiss Re Life & Health America Inc	MO	YRT/I	OL	14,895,296	19,008	17,842	138,843				
82627	06-0839705	04/01/2023	Swiss Re Life & Health America Inc	MO	CO/I	OL	286,487,300	16,308,687	17,407,079	1,088,378				
82627	06-0839705	04/01/2023	Swiss Re Life & Health America Inc	MO	CO/I	OL	2,124,704	12,919	14,321	30,436				
82627	06-0839705	04/01/2023	Swiss Re Life & Health America Inc	MO	CO/I	OL	1,090,349	13,984	14,005	22,780				
86231	39-0989781	01/01/2003	Transamerica Life Insurance Company	IA	CO/I	XXXL	122,749,088	6,304,801	6,633,624	251,978				
64688	75-6020048	10/01/2003	SCOR Global Life Americas Reinsurance Company	DE	YRT/I	OL	683,734	1,810	4,937	31,573				
84824	04-6145677	05/07/2020	Commonwealth Annuity and Life Insurance Company	MA	CO/I	IA		1,878,201,618	2,063,304,941	2,924,373				
84824	04-6145677	10/01/2020	Commonwealth Annuity and Life Insurance Company	MA	CO/I	IA		1,908,919,796	2,713,762,355	2,456,449				
66346	58-0828824	01/01/2006	Munich American Reassurance Company	GA	CO/I	OL				20,230				
88340	59-2859797	08/31/2012	Hannover Life Reassurance Company of America	FL	CO/I	OL	44,311,689	70,647,841	73,510,437	1,336,824				
88099	75-1608507	01/01/1982	Optimum Re Insurance Company	TX	YRT/I	OL			1,514	1,909				
82627	06-0839705	01/01/1961	Swiss Re Life & Health America Inc.	MO	OTH/I	OL				7				
82627	06-0839705	01/01/1961	Swiss Re Life & Health America Inc.	MO	YRT/I	OL	25,000	1,820	1,691	1,440				
82627	06-0839705	01/01/1979	Swiss Re Life & Health America Inc.	MO	CO/I	OL	5,397,020	214,898	222,091	28,968				
82627	06-0839705	01/01/1979	Swiss Re Life & Health America Inc.	MO	OTH/I	OL		23,421	24,714					
64688	75-6020048	01/01/1982	SCOR Global Life Americas Reinsurance Company	DE	MCO/I	OL	898,000	11	11	6,150			456,866	
67989	46-0260270	09/01/1996	American Memorial Life Insurance Company	IA	CO/I	FA		1,695,215	1,895,835					
67989	46-0260270	09/01/1996	American Memorial Life Insurance Company	IA	CO/G	FA		1,350,818	1,434,965					
67989	46-0260270	09/01/1996	American Memorial Life Insurance Company	IA	CO/I	OL	8,071,042	6,186,534	6,788,822					
67989	46-0260270	09/01/1996	American Memorial Life Insurance Company	IA	CO/G	OL	8,112,041	6,243,183	6,971,533	(383)				
0899999. General Account - authorized U.S. non-affiliates							1,861,314,001	3,987,756,061	4,987,210,850	15,592,557	0	0	456,866	0
1099999. Total General Account - authorized non-affiliates							1,861,314,001	3,987,756,061	4,987,210,850	15,592,557	0	0	456,866	0
1199999. Total General Account authorized							1,861,314,001	3,987,756,061	4,987,210,850	15,592,557	0	0	456,866	0
1499999. Total General Account - unauthorized U.S. affiliates							0	0	0	0	0	0	0	0
1799999. Total General Account - unauthorized non-U.S. affiliates							0	0	0	0	0	0	0	0
1899999. Total General Account - unauthorized affiliates							0	0	0	0	0	0	0	0
2199999. Total General Account - unauthorized non-affiliates							0	0	0	0	0	0	0	0
2299999. Total General Account unauthorized							0	0	0	0	0	0	0	0
2599999. Total General Account - certified U.S. affiliates							0	0	0	0	0	0	0	0
2899999. Total General Account - certified non-U.S. affiliates							0	0	0	0	0	0	0	0
2999999. Total General Account - certified affiliates							0	0	0	0	0	0	0	0
3299999. Total General Account - certified non-affiliates							0	0	0	0	0	0	0	0
3399999. Total General Account certified							0	0	0	0	0	0	0	0
3699999. Total General Account - reciprocal jurisdiction U.S. affiliates							0	0	0	0	0	0	0	0
00000	RJ-3191494	02/01/2022	Martello Re Limited	BMU	COFW/I	FA		1,720,182,498	1,999,541,034	20,423,961	32,651,302			1,696,414,923

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	2	3	4	5	6	7	8	Reserve Credit Taken		11	Outstanding Surplus Relief		14	15
								9	10		12	13		
NAIC Company Code	ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Type of Business Ceded	Amount in Force at End of Year	Current Year	Prior Year	Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
00000	RJ-3191494	02/01/2022	Martello Re Limited	BMU	COFW/I	IA		3,929,827,831	5,259,332,076	1,614,580				3,875,529,826
00000	RJ-3191494	02/01/2022	Martello Re Limited	BMU	COFW/I	OA		123,709,847	128,896,650					122,000,562
3899999. General Account - reciprocal jurisdiction non-U.S. affiliates - other							0	5,773,720,176	7,387,769,760	22,038,541	32,651,302	0	0	5,693,945,311
3999999. Total General Account - reciprocal jurisdiction non-U.S. affiliates							0	5,773,720,176	7,387,769,760	22,038,541	32,651,302	0	0	5,693,945,311
4099999. Total General Account - reciprocal jurisdiction affiliates							0	5,773,720,176	7,387,769,760	22,038,541	32,651,302	0	0	5,693,945,311
4399999. Total General Account - reciprocal jurisdiction non-affiliates							0	0	0	0	0	0	0	0
4499999. Total General Account reciprocal jurisdiction							0	5,773,720,176	7,387,769,760	22,038,541	32,651,302	0	0	5,693,945,311
4599999. Total General Account authorized, unauthorized, reciprocal jurisdiction and certified							1,861,314,001	9,761,476,237	12,374,980,610	37,631,098	32,651,302	0	456,866	5,693,945,311
4899999. Total Separate Accounts - authorized U.S. affiliates							0	0	0	0	0	0	0	0
5199999. Total Separate Accounts - authorized non-U.S. affiliates							0	0	0	0	0	0	0	0
5299999. Total Separate Accounts - authorized affiliates							0	0	0	0	0	0	0	0
5599999. Total Separate Accounts - authorized non-affiliates							0	0	0	0	0	0	0	0
5699999. Total Separate Accounts authorized							0	0	0	0	0	0	0	0
5999999. Total Separate Accounts - unauthorized U.S. affiliates							0	0	0	0	0	0	0	0
6299999. Total Separate Accounts - unauthorized non-U.S. affiliates							0	0	0	0	0	0	0	0
6399999. Total Separate Accounts - unauthorized affiliates							0	0	0	0	0	0	0	0
6699999. Total Separate Accounts - unauthorized non-affiliates							0	0	0	0	0	0	0	0
6799999. Total Separate Accounts unauthorized							0	0	0	0	0	0	0	0
7099999. Total Separate Accounts - certified U.S. affiliates							0	0	0	0	0	0	0	0
7399999. Total Separate Accounts - certified non-U.S. affiliates							0	0	0	0	0	0	0	0
7499999. Total Separate Accounts - certified affiliates							0	0	0	0	0	0	0	0
7799999. Total Separate Accounts - certified non-affiliates							0	0	0	0	0	0	0	0
7899999. Total Separate Accounts certified							0	0	0	0	0	0	0	0
8199999. Total Separate Accounts - reciprocal jurisdiction U.S. affiliates							0	0	0	0	0	0	0	0
8499999. Total Separate Accounts - reciprocal jurisdiction non-U.S. affiliates							0	0	0	0	0	0	0	0
8599999. Total Separate Accounts - reciprocal jurisdiction affiliates							0	0	0	0	0	0	0	0
8899999. Total Separate Accounts - reciprocal jurisdiction non-affiliates							0	0	0	0	0	0	0	0
8999999. Total Separate Accounts reciprocal jurisdiction							0	0	0	0	0	0	0	0
9099999. Total Separate Accounts authorized, unauthorized, reciprocal jurisdiction and certified							0	0	0	0	0	0	0	0
9199999. Total U.S. (Sum of 0399999, 0899999, 1499999, 1999999, 2599999, 3099999, 3699999, 4199999, 4899999, 5399999, 5999999, 6499999, 7099999, 7599999, 8199999 and 8699999)							1,861,314,001	3,987,756,061	4,987,210,850	15,592,557	0	0	456,866	0
9299999. Total non-U.S. (Sum of 0699999, 0999999, 1799999, 2099999, 2899999, 3199999, 3999999, 4299999, 5199999, 5499999, 6299999, 6599999, 7399999, 7699999, 8499999 and 8799999)							0	5,773,720,176	7,387,769,760	22,038,541	32,651,302	0	0	5,693,945,311
9999999 - Totals							1,861,314,001	9,761,476,237	12,374,980,610	37,631,098	32,651,302	0	456,866	5,693,945,311

SCHEDULE S - PART 3 - SECTION 2

Reinsurance Ceded Accident and Health Insurance Listed by Reinsuring Company as of December 31, Current Year

1	2	3	4	5	6	7	8	9	10	Outstanding Surplus Relief		13	14
										11	12		
NAIC Company Code	ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Type of Business Ceded	Premiums	Unearned Premiums (Estimated)	Reserve Credit Taken Other than for Unearned Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
0399999. Total General Account - authorized U.S. affiliates							0	0	0	0	0	0	0
0699999. Total General Account - authorized non-U.S. affiliates							0	0	0	0	0	0	0
0799999. Total General Account - authorized affiliates							0	0	0	0	0	0	0
71404	47-0463747	01/01/2009	Continental General Insurance Company	TX	QA/I	LTC	2,844,524	786,540	50,139,716				
71404	47-0463747	01/01/2009	Continental General Insurance Company	TX	QA/G	LTC	97,366	12,662	5,352,129				
65722	63-0343428	08/31/2012	Loyal American Life Insurance Company	OH	OTH/I	A	702	214	1,779				
65722	63-0343428	08/31/2012	Loyal American Life Insurance Company	OH	OTH/I	LTDI	606	350	40,585				
65722	63-0343428	08/31/2012	Loyal American Life Insurance Company	OH	OTH/I	MS	1,345,135	56,901	1,000,891				
65722	63-0343428	08/31/2012	Loyal American Life Insurance Company	OH	OTH/I	OM	1,254	419	13,530				
0899999. General Account - authorized U.S. non-affiliates							4,289,587	857,086	56,548,630	0	0	0	0
1099999. Total General Account - authorized non-affiliates							4,289,587	857,086	56,548,630	0	0	0	0
1199999. Total General Account authorized							4,289,587	857,086	56,548,630	0	0	0	0
1499999. Total General Account - unauthorized U.S. affiliates							0	0	0	0	0	0	0
1799999. Total General Account - unauthorized non-U.S. affiliates							0	0	0	0	0	0	0
1899999. Total General Account - unauthorized affiliates							0	0	0	0	0	0	0
2199999. Total General Account - unauthorized non-affiliates							0	0	0	0	0	0	0
2299999. Total General Account unauthorized							0	0	0	0	0	0	0
2599999. Total General Account - certified U.S. affiliates							0	0	0	0	0	0	0
2899999. Total General Account - certified non-U.S. affiliates							0	0	0	0	0	0	0
2999999. Total General Account - certified affiliates							0	0	0	0	0	0	0
3299999. Total General Account - certified non-affiliates							0	0	0	0	0	0	0
3399999. Total General Account certified							0	0	0	0	0	0	0
3699999. Total General Account - reciprocal jurisdiction U.S. affiliates							0	0	0	0	0	0	0
3999999. Total General Account - reciprocal jurisdiction non-U.S. affiliates							0	0	0	0	0	0	0
4099999. Total General Account - reciprocal jurisdiction affiliates							0	0	0	0	0	0	0
4399999. Total General Account - reciprocal jurisdiction non-affiliates							0	0	0	0	0	0	0
4499999. Total General Account reciprocal jurisdiction							0	0	0	0	0	0	0
4599999. Total General Account authorized, unauthorized, reciprocal jurisdiction and certified							4,289,587	857,086	56,548,630	0	0	0	0
4899999. Total Separate Accounts - authorized U.S. affiliates							0	0	0	0	0	0	0
5199999. Total Separate Accounts - authorized non-U.S. affiliates							0	0	0	0	0	0	0
5299999. Total Separate Accounts - authorized affiliates							0	0	0	0	0	0	0
5599999. Total Separate Accounts - authorized non-affiliates							0	0	0	0	0	0	0
5699999. Total Separate Accounts authorized							0	0	0	0	0	0	0
5999999. Total Separate Accounts - unauthorized U.S. affiliates							0	0	0	0	0	0	0
6299999. Total Separate Accounts - unauthorized non-U.S. affiliates							0	0	0	0	0	0	0
6399999. Total Separate Accounts - unauthorized affiliates							0	0	0	0	0	0	0
6699999. Total Separate Accounts - unauthorized non-affiliates							0	0	0	0	0	0	0
6799999. Total Separate Accounts unauthorized							0	0	0	0	0	0	0
7099999. Total Separate Accounts - certified U.S. affiliates							0	0	0	0	0	0	0
7399999. Total Separate Accounts - certified non-U.S. affiliates							0	0	0	0	0	0	0
7499999. Total Separate Accounts - certified affiliates							0	0	0	0	0	0	0
7799999. Total Separate Accounts - certified non-affiliates							0	0	0	0	0	0	0
7899999. Total Separate Accounts certified							0	0	0	0	0	0	0
8199999. Total Separate Accounts - reciprocal jurisdiction U.S. affiliates							0	0	0	0	0	0	0
8499999. Total Separate Accounts - reciprocal jurisdiction non-U.S. affiliates							0	0	0	0	0	0	0
8599999. Total Separate Accounts - reciprocal jurisdiction affiliates							0	0	0	0	0	0	0
8899999. Total Separate Accounts - reciprocal jurisdiction non-affiliates							0	0	0	0	0	0	0
8999999. Total Separate Accounts reciprocal jurisdiction							0	0	0	0	0	0	0
9099999. Total Separate Accounts authorized, unauthorized, reciprocal jurisdiction and certified							0	0	0	0	0	0	0
9199999. Total U.S. (Sum of 0399999, 0899999, 1499999, 1999999, 2599999, 3099999, 3699999, 4199999, 4899999, 5399999, 5999999, 6499999, 7099999, 7599999, 8199999 and 8699999)							4,289,587	857,086	56,548,630	0	0	0	0
9299999. Total non-U.S. (Sum of 0699999, 0999999, 1799999, 2099999, 2899999, 3199999, 3999999, 4299999, 5199999, 5499999, 6299999, 6599999, 7399999, 7699999, 8499999 and 8799999)							0	0	0	0	0	0	0
9999999 - Totals							4,289,587	857,086	56,548,630	0	0	0	0

Schedule S - Part 4

N O N E

Schedule S - Part 4 - Bank Footnote

N O N E

Schedule S - Part 5

N O N E

Schedule S - Part 5 - Bank Footnote

N O N E

SCHEDULE S - PART 6

Five Year Exhibit of Reinsurance Ceded Business
($000 Omitted)

		1 2025	2 2024	3 2023	4 2022	5 2021
	A. OPERATIONS ITEMS					
1.	Premiums and annuity considerations for life and accident and health contracts	41,921	547,401	275,619	14,584,804	774,396
2.	Commissions and reinsurance expense allowances	103,408	(49,129)	70,234	496,787	(50,838)
3.	Contract claims	385,081	463,750	538,376	645,173	165,253
4.	Surrender benefits and withdrawals for life contracts	2,713,635	3,666,721	3,722,630	2,268,715	648,827
5.	Dividends to policyholders and refunds to members	144	149	161	176	183
6.	Reserve adjustments on reinsurance ceded	0	0	0	0	0
7.	Increase in aggregate reserve for life and accident and health contracts	2,616,617	2,914,638	3,366,927	11,926,055	186,928
	B. BALANCE SHEET ITEMS					
8.	Premiums and annuity considerations for life and accident and health contracts deferred and uncollected	7	32	11	25	16
9.	Aggregate reserves for life and accident and health contracts	9,818,882	12,433,283	15,225,216	18,719,613	6,687,740
10.	Liability for deposit-type contracts	125,768	129,760	124,863	118,878	256
11.	Contract claims unpaid	92,847	100,864	137,635	164,652	52,308
12.	Amounts recoverable on reinsurance	2,760	671	2,547	1,961	2,745
13.	Experience rating refunds due or unpaid					
14.	Policyholders' dividends and refunds to members (not included in Line 10)					
15.	Commissions and reinsurance expense allowances due					
16.	Unauthorized reinsurance offset	0	0	0	0	0
17.	Offset for reinsurance with certified reinsurers					
	C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)					
18.	Funds deposited by and withheld from (F)	0	0	0	11,246,343	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	1,430,954	0
	D. REINSURANCE WITH CERTIFIED REINSURERS (DEPOSITS BY AND FUNDS WITHHELD FROM)					
22.	Multiple Beneficiary Trust					
23.	Funds deposited by and withheld from (F)					
24.	Letters of credit (L)					
25.	Trust agreements (T)					
26.	Other (O)					

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)	55,981,223,383	36,151,054	56,017,374,437
2.	Reinsurance (Line 16)	143,459,062	(143,459,062)	0
3.	Premiums and considerations (Line 15)	4,183,602	6,871	4,190,473
4.	Net credit for ceded reinsurance	XXX	4,324,651,410	4,324,651,410
5.	All other admitted assets (balance)	1,560,820,578		1,560,820,578
6.	Total assets excluding Separate Accounts (Line 26)	57,689,686,625	4,217,350,273	61,907,036,898
7.	Separate Account assets (Line 27)	1,482,629,171		1,482,629,171
8.	Total assets (Line 28)	59,172,315,796	4,217,350,273	63,389,666,069
	LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
9.	Contract reserves (Lines 1 and 2)	43,179,017,312	9,693,114,072	52,872,131,384
10.	Liability for deposit-type contracts (Line 3)	564,129,198	125,767,882	689,897,080
11.	Claim reserves (Line 4)	183,816,393	92,846,525	276,662,918
12.	Policyholder dividends/member refunds/reserves (Lines 5 through 7)	0		0
13.	Premium & annuity considerations received in advance (Line 8)	129,101	34,438	163,539
14.	Other contract liabilities (Line 9)	1,807,123		1,807,123
15.	Reinsurance in unauthorized companies (Line 24.02 minus inset amount)	0	0	0
16.	Funds held under reinsurance treaties with unauthorized reinsurers (Line 24.03 minus inset amount)	0		0
17.	Reinsurance with certified reinsurers (Line 24.02 inset amount)	0		0
18.	Funds held under reinsurance treaties with certified reinsurers (Line 24.03 inset amount)			0
19.	All other liabilities (balance)	9,376,915,643	(5,694,412,644)	3,682,502,999
20.	Total liabilities excluding Separate Accounts (Line 26)	53,305,814,770	4,217,350,273	57,523,165,043
21.	Separate Account liabilities (Line 27)	1,482,629,171		1,482,629,171
22.	Total liabilities (Line 28)	54,788,443,941	4,217,350,273	59,005,794,214
23.	Capital & surplus (Line 38)	4,383,871,855	XXX	4,383,871,855
24.	Total liabilities, capital & surplus (Line 39)	59,172,315,796	4,217,350,273	63,389,666,069
	NET CREDIT FOR CEDED REINSURANCE			
25.	Contract reserves	9,693,114,072		
26.	Claim reserves	92,846,525		
27.	Policyholder dividends/reserves	0		
28.	Premium & annuity considerations received in advance	34,438		
29.	Liability for deposit-type contracts	125,767,882		
30.	Other contract liabilities	0		
31.	Reinsurance ceded assets	143,459,062		
32.	Other ceded reinsurance recoverables	(36,151,054)		
33.	Total ceded reinsurance recoverables	10,019,070,925		
34.	Premiums and considerations	6,871		
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	5,694,412,644		
40.	Total ceded reinsurance payable/offsets	5,694,419,515		
41.	Total net credit for ceded reinsurance	4,324,651,410		

SCHEDULE S - PART 8

REINSURANCE AGREEMENTS WITH FUNDS WITHHELD AND MODIFIED COINSURANCE AS OF DECEMBER 31, CURRENT YEAR

	Ceded General Account Assets		Ceded Guaranteed Separate Account Assets		Total Ceded Assets		Assumed General Account Assets		Assumed Guaranteed Separate Account Assets		Total Assumed Assets	
	1	2	3	4	5	6	7	8	9	10	11	12
	FWH B/ACV	Modco B/ACV	FWH B/ACV	Modco B/ACV	FWH B/ACV Col 1+3	Modco B/ACV Col 2+4	FWH B/ACV	Modco B/ACV	FWH B/ACV	Modco B/ACV	FWH B/ACV Col 7+9	Modco B/ACV Col 8+10
LONG-TERM BONDS												
1. Exempt obligations					0	0					0	0
2.1 NAIC Designation Category 1.A	908,259,612				908,259,612	0					0	0
2.2 NAIC Designation Category 1.B	192,301,426				192,301,426	0					0	0
2.3 NAIC Designation Category 1.C	349,350,171				349,350,171	0					0	0
2.4 NAIC Designation Category 1.D	151,983,525				151,983,525	0					0	0
2.5 NAIC Designation Category 1.E	313,434,949				313,434,949	0					0	0
2.6 NAIC Designation Category 1.F	694,371,163				694,371,163	0					0	0
2.7 NAIC Designation Category 1.G	456,006,998				456,006,998	0					0	0
2.8 Subtotal NAIC 1 (2.1+2.2+2.3+2.4+2.5+2.6+2.7)	3,065,707,844	0	0	0	3,065,707,844	0	0	0	0	0	0	0
3.1 NAIC Designation Category 2.A	228,750,458				228,750,458	0					0	0
3.2 NAIC Designation Category 2.B	560,987,639				560,987,639	0					0	0
3.3 NAIC Designation Category 2.C	373,455,216				373,455,216	0					0	0
3.4 Subtotal NAIC 2 (3.1+3.2+3.3)	1,163,193,313	0	0	0	1,163,193,313	0	0	0	0	0	0	0
4.1 NAIC Designation Category 3.A	67,195,855				67,195,855	0					0	0
4.2 NAIC Designation Category 3.B	39,450,578				39,450,578	0					0	0
4.3 NAIC Designation Category 3.C	74,440,114				74,440,114	0					0	0
4.4 Subtotal NAIC 3 (4.1+4.2+4.3)	181,086,547	0	0	0	181,086,547	0	0	0	0	0	0	0
5.1 NAIC Designation Category 4.A	5,672,308				5,672,308	0					0	0
5.2 NAIC Designation Category 4.B	16,363,287				16,363,287	0					0	0
5.3 NAIC Designation Category 4.C	14,847,390				14,847,390	0					0	0
5.4 Subtotal NAIC 4 (5.1+5.2+5.3)	36,882,985	0	0	0	36,882,985	0	0	0	0	0	0	0
6.1 NAIC Designation Category 5.A	4,942,996				4,942,996	0					0	0
6.2 NAIC Designation Category 5.B	47,005,111				47,005,111	0					0	0
6.3 NAIC Designation Category 5.C	3,731,054				3,731,054	0					0	0
6.4 Subtotal NAIC 5 (6.1+6.2+6.3)	55,679,161	0	0	0	55,679,161	0	0	0	0	0	0	0
7. NAIC 6	11,642,566				11,642,566	0					0	0
8. Total long-term bonds (Sum of Lines 1+2.8+3.4+4.4+5.4+6.4+7)	4,514,192,416	0	0	0	4,514,192,416	0	0	0	0	0	0	0
PREFERRED STOCKS												
9. Highest quality					0	0					0	0
10. High quality	25,332,903				25,332,903	0					0	0
11. Medium quality					0	0					0	0
12. Low quality					0	0					0	0
13. Lower quality	16,278,395				16,278,395	0					0	0
14. In or near default	3,645,213				3,645,213	0					0	0
15. Affiliated life with AVR					0	0					0	0
16. Total preferred stocks (Sum of Lines 9 through 15)	45,256,511	0	0	0	45,256,511	0	0	0	0	0	0	0

SCHEDULE S - PART 8

REINSURANCE AGREEMENTS WITH FUNDS WITHHELD AND MODIFIED COINSURANCE AS OF DECEMBER 31, CURRENT YEAR

	Ceded General Account Assets		Ceded Guaranteed Separate Account Assets		Total Ceded Assets		Assumed General Account Assets		Assumed Guaranteed Separate Account Assets		Total Assumed Assets	
	1 FWH B/ACV	2 Modco B/ACV	3 FWH B/ACV	4 Modco B/ACV	5 FWH B/ACV Col 1+3	6 Modco B/ACV Col 2+4	7 FWH B/ACV	8 Modco B/ACV	9 FWH B/ACV	10 Modco B/ACV	11 FWH B/ACV Col 7+9	12 Modco B/ACV Col 8+10
SHORT-TERM BONDS												
17. Exempt obligations					0	0					0	0
18.1 NAIC Designation Category 1.A					0	0					0	0
18.2 NAIC Designation Category 1.B					0	0					0	0
18.3 NAIC Designation Category 1.C					0	0					0	0
18.4 NAIC Designation Category 1.D					0	0					0	0
18.5 NAIC Designation Category 1.E					0	0					0	0
18.6 NAIC Designation Category 1.F					0	0					0	0
18.7 NAIC Designation Category 1.G					0	0					0	0
18.8 Subtotal NAIC 1 (18.1+18.2+18.3+18.4+18.5+18.6+18.7)	0	0	0	0	0	0	0	0	0	0	0	0
19.1 NAIC Designation Category 2.A					0	0					0	0
19.2 NAIC Designation Category 2.B					0	0					0	0
19.3 NAIC Designation Category 2.C					0	0					0	0
19.4 Subtotal NAIC 2 (19.1+19.2+19.3)	0	0	0	0	0	0	0	0	0	0	0	0
20.1 NAIC Designation Category 3.A					0	0					0	0
20.2 NAIC Designation Category 3.B					0	0					0	0
20.3 NAIC Designation Category 3.C					0	0					0	0
20.4 Subtotal NAIC 3 (20.1+20.2+20.3)	0	0	0	0	0	0	0	0	0	0	0	0
21.1 NAIC Designation Category 4.A					0	0					0	0
21.2 NAIC Designation Category 4.B					0	0					0	0
21.3 NAIC Designation Category 4.C					0	0					0	0
21.4 Subtotal NAIC 4 (21.1+21.2+21.3)	0	0	0	0	0	0	0	0	0	0	0	0
22.1 NAIC Designation Category 5.A					0	0					0	0
22.2 NAIC Designation Category 5.B					0	0					0	0
22.3 NAIC Designation Category 5.C					0	0					0	0
22.4 Subtotal NAIC 5 (22.1+22.2+22.3)	0	0	0	0	0	0	0	0	0	0	0	0
23. NAIC 6					0	0					0	0
24. Total short-term bonds (17+18.8+19.4+20.4+21.4+22.4+23)	0	0	0	0	0	0	0	0	0	0	0	0
DERIVATIVE INSTRUMENTS												
25. Exchange traded					0	0					0	0
26. Highest quality					0	0					0	0
27. High quality					0	0					0	0
28. Medium quality					0	0					0	0
29. Low quality					0	0					0	0
30. Lower quality					0	0					0	0
31. In or near default					0	0					0	0
32. Total derivative instruments	0	0	0	0	0	0	0	0	0	0	0	0
33. Total (Lines 8+16+24+32)	4,559,448,927	0	0	0	4,559,448,927	0	0	0	0	0	0	0

SCHEDULE S - PART 8

REINSURANCE AGREEMENTS WITH FUNDS WITHHELD AND MODIFIED COINSURANCE AS OF DECEMBER 31, CURRENT YEAR

		Ceded General Account Assets		Ceded Guaranteed Separate Account Assets		Total Ceded Assets		Assumed General Account Assets		Assumed Guaranteed Separate Account Assets		Total Assumed Assets	
		1	2	3	4	5	6	7	8	9	10	11	12
		FWH B/ACV	Modco B/ACV	FWH B/ACV	Modco B/ACV	FWH B/ACV Col 1+3	Modco B/ACV Col 2+4	FWH B/ACV	Modco B/ACV	FWH B/ACV	Modco B/ACV	FWH B/ACV Col 7+9	Modco B/ACV Col 8+10
	MORTGAGE LOANS												
	In Good Standing:												
34.	Farm mortgages - CM1 - highest quality					0	0					0	0
35.	Farm mortgages - CM2 - high quality					0	0					0	0
36.	Farm mortgages - CM3 - medium quality					0	0					0	0
37.	Farm mortgages - CM4 - low medium quality					0	0					0	0
38.	Farm mortgages - CM5 - low quality					0	0					0	0
39.	Residential mortgages - insured or guaranteed	56,184,419				56,184,419	0					0	0
40.	Residential mortgages - all other	141,552,451				141,552,451	0					0	0
41.	Commercial mortgages - insured or guaranteed					0	0					0	0
42.	Commercial mortgages - all other - CM1 - highest quality.					0	0					0	0
43.	Commercial mortgages - all other - CM2 - high quality	223,149,692				223,149,692	0					0	0
44.	Commercial mortgages - all other - CM3 - medium quality	202,473,800				202,473,800	0					0	0
45.	Commercial mortgages - all other - CM4 - low medium quality					0	0					0	0
46.	Commercial mortgages - all other - CM5 - low quality					0	0					0	0
	Overdue, Not in Process:												
47.	Farm mortgages					0	0					0	0
48.	Residential mortgages - insured or guaranteed					0	0					0	0
49.	Residential mortgages - all other					0	0					0	0
50.	Commercial mortgages - insured or guaranteed					0	0					0	0
51.	Commercial mortgages - all other					0	0					0	0
	In Process of Foreclosure:												
52.	Farm mortgages					0	0					0	0
53.	Residential mortgages - insured or guaranteed					0	0					0	0
54.	Residential mortgages - all other					0	0					0	0
55.	Commercial mortgages - insured or guaranteed					0	0					0	0
56.	Commercial mortgages - all other					0	0					0	0
57.	Total Schedule B mortgages (Sum of Lines 34 through 56)	623,360,362	0	0	0	623,360,362	0	0	0	0	0	0	0
	COMMON STOCK												
58.	Unaffiliated public	1,160,424				1,160,424	0					0	0
59.	Unaffiliated private	273,013				273,013	0					0	0
60.	Federal Home Loan Bank					0	0					0	0
61.	Affiliated life with AVR					0	0					0	0
	Affiliated Investment Subsidiary:												
62.	Fixed income exempt obligations					0	0					0	0
63.	Fixed income highest quality					0	0					0	0
64.	Fixed income high quality					0	0					0	0
65.	Fixed income medium quality					0	0					0	0
66.	Fixed income low quality					0	0					0	0
67.	Fixed income lower quality					0	0					0	0
68.	Fixed income in or near default					0	0					0	0
69.	Unaffiliated common stock public					0	0					0	0
70.	Unaffiliated common stock private					0	0					0	0
71.	Real estate					0	0					0	0
72.	Affiliated-certain other (See SVO Purposes & Procedures Manual)					0	0					0	0
73.	Affiliated - all other					0	0					0	0
74.	Total common stock (Sum of Lines 58 through 73)	1,433,437	0	0	0	1,433,437	0	0	0	0	0	0	0

SCHEDULE S - PART 8

REINSURANCE AGREEMENTS WITH FUNDS WITHHELD AND MODIFIED COINSURANCE AS OF DECEMBER 31, CURRENT YEAR

		Ceded General Account Assets		Ceded Guaranteed Separate Account Assets		Total Ceded Assets		Assumed General Account Assets		Assumed Guaranteed Separate Account Assets		Total Assumed Assets	
		1	2	3	4	5	6	7	8	9	10	11	12
		FWH B/ACV	Modco B/ACV	FWH B/ACV	Modco B/ACV	FWH B/ACV Col 1+3	Modco B/ACV Col 2+4	FWH B/ACV	Modco B/ACV	FWH B/ACV	Modco B/ACV	FWH B/ACV Col 7+9	Modco B/ACV Col 8+10
	REAL ESTATE												
75.	Home office property (General Account only)					0	0					0	0
76.	Investment properties					0	0					0	0
77.	Properties acquired in satisfaction of debt					0	0					0	0
78.	Total real estate (Sum of Lines 75 through 77)	0	0	0	0	0	0	0	0	0	0	0	0
	OTHER INVESTED ASSETS INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF BONDS												
79.	Exempt obligations					0	0					0	0
80.	Highest quality	25,021,477				25,021,477	0					0	0
81.	High quality	2,120,929				2,120,929	0					0	0
82.	Medium quality	3,883,377				3,883,377	0					0	0
83.	Low quality	12,887,308				12,887,308	0					0	0
84.	Lower quality	1,379,485				1,379,485	0					0	0
85.	In or near default	29,477,746				29,477,746	0					0	0
86.	Total with bond characteristics (Sum of Lines 79 through 85)	74,770,322	0	0	0	74,770,322	0	0	0	0	0	0	0
	INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF PREFERRED STOCKS												
87.	Highest quality					0	0					0	0
88.	High quality					0	0					0	0
89.	Medium quality					0	0					0	0
90.	Low quality					0	0					0	0
91.	Lower quality					0	0					0	0
92.	In or near default					0	0					0	0
93.	Affiliated life with AVR					0	0					0	0
94.	Total with preferred stock characteristics (Sum of Lines 87 through 93)	0	0	0	0	0	0	0	0	0	0	0	0

SCHEDULE S - PART 8

REINSURANCE AGREEMENTS WITH FUNDS WITHHELD AND MODIFIED COINSURANCE AS OF DECEMBER 31, CURRENT YEAR

	Ceded General Account Assets		Ceded Guaranteed Separate Account Assets		Total Ceded Assets		Assumed General Account Assets		Assumed Guaranteed Separate Account Assets		Total Assumed Assets	
	1 FWH B/ACV	2 Modco B/ACV	3 FWH B/ACV	4 Modco B/ACV	5 FWH B/ACV Col 1+3	6 Modco B/ACV Col 2+4	7 FWH B/ACV	8 Modco B/ACV	9 FWH B/ACV	10 Modco B/ACV	11 FWH B/ACV Col 7+9	12 Modco B/ACV Col 8+10
INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF MORTGAGE LOANS												
In Good Standing Affiliated:												
95. Mortgages - CM1 - highest quality					0	0					0	0
96. Mortgages - CM2 - high quality					0	0					0	0
97. Mortgages - CM3 - medium quality	14,915,703				14,915,703	0					0	0
98. Mortgages - CM4 - low medium quality					0	0					0	0
99. Mortgages - CM5 - low quality					0	0					0	0
100. Residential mortgages - insured or guaranteed					0	0					0	0
101. Residential mortgages - all other					0	0					0	0
102. Commercial mortgages - insured or guaranteed					0	0					0	0
Overdue, Not in Process Affiliated:												
103. Farm mortgages					0	0					0	0
104. Residential mortgages - insured or guaranteed					0	0					0	0
105. Residential mortgages - all other					0	0					0	0
106. Commercial mortgages - insured or guaranteed					0	0					0	0
107. Commercial mortgages - all other					0	0					0	0
In Process of Foreclosure Affiliated:												
108. Farm mortgages					0	0					0	0
109. Residential mortgages - insured or guaranteed					0	0					0	0
110. Residential mortgages - all other					0	0					0	0
111. Commercial mortgages - insured or guaranteed					0	0					0	0
112. Commercial mortgages - all other					0	0					0	0
113. Total affiliated (Sum of Lines 95 through 112)	14,915,703	0	0	0	14,915,703	0	0	0	0	0	0	0
114. Unaffiliated - in good standing with covenants					0	0					0	0
115. Unaffiliated - in good standing defeased with government securities					0	0					0	0
116. Unaffiliated - in good standing primarily senior					0	0					0	0
117. Unaffiliated - in good standing all other					0	0					0	0
118. Unaffiliated - overdue, not in process					0	0					0	0
119. Unaffiliated - in process of foreclosure					0	0					0	0
120. Total unaffiliated (Sum of Lines 114 through 119)	0	0	0	0	0	0	0	0	0	0	0	0
121. Total with mortgage loan characteristics (Lines 113 + 120)	14,915,703	0	0	0	14,915,703	0	0	0	0	0	0	0
INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF COMMON STOCK												
122. Unaffiliated public					0	0					0	0
123. Unaffiliated private	8,484,784				8,484,784	0					0	0
124. Affiliated life with AVR					0	0					0	0
125. Affiliated certain other (See SVO Purposes & Procedures Manual)					0	0					0	0
126. Affiliated other - all other					0	0					0	0
127. Total with common stock characteristics (Sum of Lines 122 through 126)	8,484,784	0	0	0	8,484,784	0	0	0	0	0	0	0

SCHEDULE S - PART 8

REINSURANCE AGREEMENTS WITH FUNDS WITHHELD AND MODIFIED COINSURANCE AS OF DECEMBER 31, CURRENT YEAR

	Ceded General Account Assets		Ceded Guaranteed Separate Account Assets		Total Ceded Assets		Assumed General Account Assets		Assumed Guaranteed Separate Account Assets		Total Assumed Assets	
	1 FWH B/ACV	2 Modco B/ACV	3 FWH B/ACV	4 Modco B/ACV	5 FWH B/ACV Col 1+3	6 Modco B/ACV Col 2+4	7 FWH B/ACV	8 Modco B/ACV	9 FWH B/ACV	10 Modco B/ACV	11 FWH B/ACV Col 7+9	12 Modco B/ACV Col 8+10
INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF REAL ESTATE												
128. Home office property (General Account only)					0	0					0	0
129. Investment properties	3,094,258				3,094,258	0					0	0
130. Properties acquired in satisfaction of debt					0	0					0	0
131. Total with real estate characteristics (Sum of Lines 128 through 130)	3,094,258	0	0	0	3,094,258	0	0	0	0	0	0	0
INVESTMENTS IN TAX CREDIT STRUCTURES												
132. Yield guaranteed state tax credit investments					0	0					0	0
133. Qualifying federal tax credit investments					0	0					0	0
134. Qualifying state tax credit investments					0	0					0	0
135. Other tax credit investments					0	0					0	0
136. Total tax credit investments (Sum of Lines 132 through 135)	0	0	0	0	0	0	0	0	0	0	0	0
RESIDUAL TRANCHES OR INTERESTS												
137. Bonds - unaffiliated	9,714,785				9,714,785	0					0	0
138. Bonds - affiliated					0	0					0	0
139. Common stock - unaffiliated					0	0					0	0
140. Common stock - affiliated					0	0					0	0
141. Preferred stock - unaffiliated					0	0					0	0
142. Preferred stock - affiliated					0	0					0	0
143. Real estate - unaffiliated					0	0					0	0
144. Real estate - affiliated					0	0					0	0
145. Mortgage loans - unaffiliated					0	0					0	0
146. Mortgage loans - affiliated					0	0					0	0
147. Other - unaffiliated					0	0					0	0
148. Other - affiliated					0	0					0	0
149. Total residual tranches or interests (Sum of Lines 137 through 148)	9,714,785	0	0	0	9,714,785	0	0	0	0	0	0	0
SURPLUS NOTES AND CAPITAL NOTES												
150. Highest quality	115,470,955				115,470,955	0					0	0
151. High quality	33,958,711				33,958,711	0					0	0
152. Medium quality					0	0					0	0
153. Low quality					0	0					0	0
154. Lower quality					0	0					0	0
155. In or near default					0	0					0	0
156. Total with bond characteristics (Sum of Lines 150 through 155)	149,429,666	0	0	0	149,429,666	0	0	0	0	0	0	0
ALL OTHER INVESTMENTS												
157. NAIC 1 working capital finance investments					0	0					0	0
158. NAIC 2 working capital finance investments					0	0					0	0
159. Other invested assets - Schedule BA	41,298,239				41,298,239	0					0	0
160. Other short-term invested assets - Schedule DA					0	0					0	0
161. Cash and Cash Equivalents	187,573,312	456,866			187,573,312	456,866					0	0
162. Total all other (Sum of Lines 157 through 161)	228,871,551	456,866	0	0	228,871,551	456,866	0	0	0	0	0	0
163. Total assets excluding non-guaranteed Separate Account assets (Sum of Lines 33, 57, 74, 78, 86, 94, 121, 127, 131, 136, 149, 156 and 162)	5,673,523,795	456,866	0	0	5,673,523,795	456,866	0	0	0	0	0	0
164. Total non-guaranteed Separate Account assets	XXX	XXX	XXX	XXX			XXX	XXX	XXX	XXX		
165. Total assets including non-guaranteed Separate Account assets (Sum of 163 and 164)	XXX	XXX	XXX	XXX	5,673,523,795	456,866	XXX	XXX	XXX	XXX	0	0

SCHEDULE T - PART 2

INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

States, Etc.		Direct Business Only					
		1 Life (Group and Individual)	2 Annuities (Group and Individual)	3 Disability Income (Group and Individual)	4 Long-Term Care (Group and Individual)	5 Deposit-Type Contracts	6 Totals
1. Alabama	AL	128,775	197,758,567		13,795	0	197,901,137
2. Alaska	AK	4,497	3,778,362			0	3,782,859
3. Arizona	AZ	388,844	155,692,176		14,303	64,543	156,159,866
4. Arkansas	AR	130,292	64,430,287		1,348	0	64,561,927
5. California	CA	3,951,087	1,156,447,029	(14)	11,098	361,260	1,160,770,460
6. Colorado	CO	167,072	113,968,565		69,296	327,409	114,532,342
7. Connecticut	CT	268,380	187,553,435	102	2,519	0	187,824,436
8. Delaware	DE	35,352	24,511,896			0	24,547,248
9. District of Columbia	DC	19,900	7,636,723			0	7,656,623
10. Florida	FL	1,411,891	917,602,524		29,569	1,501,135	920,545,119
11. Georgia	GA	609,464	317,842,629		72,273	0	318,524,366
12. Hawaii	HI	191,925	132,332,975			0	132,524,900
13. Idaho	ID	70,739	45,255,250		8,917	0	45,334,906
14. Illinois	IL	496,930	353,627,211		76,737	0	354,200,878
15. Indiana	IN	139,210	190,584,908		3,616	0	190,727,734
16. Iowa	IA	98,759	55,856,703		8,113	0	55,963,575
17. Kansas	KS	79,975	34,297,309		66,687	0	34,443,971
18. Kentucky	KY	126,038	95,736,309			0	95,862,347
19. Louisiana	LA	182,933	168,700,688			225,301	169,108,922
20. Maine	ME	59,239	41,740,381		3,672	0	41,803,292
21. Maryland	MD	419,454	231,292,623		7,033	0	231,719,110
22. Massachusetts	MA	372,877	223,033,608			1,250,054	224,656,539
23. Michigan	MI	220,115	318,720,704			97,142	319,037,961
24. Minnesota	MN	408,794	165,215,065		5,281	0	165,629,140
25. Mississippi	MS	108,398	51,272,896		2,199	14,335	51,397,828
26. Missouri	MO	286,109	409,741,644		120,353	0	410,148,106
27. Montana	MT	5,654	6,015,536			0	6,021,190
28. Nebraska	NE	116,374	42,343,292		61,219	0	42,520,885
29. Nevada	NV	247,413	54,530,955	(168)		0	54,778,200
30. New Hampshire	NH	48,466	63,874,133		51,775	1,328,599	65,302,973
31. New Jersey	NJ	473,018	370,173,144	144	3,303	0	370,649,609
32. New Mexico	NM	203,538	21,930,210			48,867	22,182,615
33. New York	NY	103,609	34,124,207		13,708	0	34,241,524
34. North Carolina	NC	801,672	416,240,029		1,148,893	0	418,190,594
35. North Dakota	ND	42,146	7,699,255			0	7,741,401
36. Ohio	OH	317,875	403,977,740		2,651	196,756	404,495,022
37. Oklahoma	OK	445,493	58,702,842		768	533,653	59,682,756
38. Oregon	OR	91,431	69,957,749		83,588	0	70,132,768
39. Pennsylvania	PA	882,002	558,185,877		6,300	784,521	559,858,700
40. Rhode Island	RI	70,960	88,801,437		1,349	0	88,873,746
41. South Carolina	SC	312,450	263,626,556		18,015	197,933	264,154,954
42. South Dakota	SD	27,276	16,265,322			0	16,292,598
43. Tennessee	TN	273,007	304,789,182		120,460	0	305,182,649
44. Texas	TX	1,800,406	387,702,819		9,271	1,593,288	391,105,784
45. Utah	UT	70,643	46,161,133			0	46,231,776
46. Vermont	VT	20,032	22,806,995		10,447	0	22,837,474
47. Virginia	VA	654,410	265,040,457		151,228	0	265,846,095
48. Washington	WA	300,020	193,144,747		177,427	626,526	194,248,720
49. West Virginia	WV	73,123	66,525,166			0	66,598,289
50. Wisconsin	WI	188,521	166,253,974		208,686	89,665	166,740,846
51. Wyoming	WY	20,644	4,594,863			0	4,615,507
52. American Samoa	AS	0	0			0	0
53. Guam	GU	67,563	0			0	67,563
54. Puerto Rico	PR	362	2,416,806			0	2,417,168
55. U.S. Virgin Islands	VI	1,269	250,000			0	251,269
56. Northern Mariana Islands	MP	0	0			0	0
57. Canada	CAN	0	0			0	0
58. Aggregate other alien	OT	32,527	239,636			0	272,163
59. Total		18,068,954	9,601,004,529	64	2,585,897	9,240,987	9,630,900,431

SCHEDULE Y

PART 1A - DETAILS OF INSURANCE HOLDING COMPANY SYSTEM

1 Group Code	2 Group Name	3 NAIC Company Code	4 ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries Or Affiliates	9 Domiciliary Location	10 Relationship to Reporting Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	13 If Control is Ownership Provide Percentage	14 Ultimate Controlling Entity(ies)/Person(s)	15 Is an SCA Filing Required? (Yes/No)	16 *
0435	Massachusetts Mut Life Ins Co	65935	04-1590850	3848388			Massachusetts Mutual Life Insurance Company (MMLIC)	MA	UIP	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0435	Massachusetts Mut Life Ins Co	93432	06-1041383				C.M. Life Insurance Company	CT	IA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0435	Massachusetts Mut Life Ins Co	70416	43-0581430				MML Bay State Life Insurance Company	CT	IA	C.M. Life Insurance Company	Ownership	100.000	MMLIC		
0000							CML Special Situations Investor LLC	DE	NIA	C.M. Life Insurance Company	Ownership	100.000	MMLIC		
0000							CM Life Mortgage Lending LLC	DE	NIA	C.M. Life Insurance Company	Ownership	100.000	MMLIC		
0000							CML Global Capabilities LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000							MM Global Capabilities I LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000							MassMutual Global Business Services India LLP	IND	NIA	MM Global Capabilities I LLC	Ownership	100.000	MMLIC		
0000							MM Global Capabilities (Netherlands) B.V.	NLD	NIA	MM Global Capabilities I LLC	Ownership	100.000	MMLIC		
0000							MassMutual Global Business Services Romania S.R.L.	ROU	NIA	MM Global Capabilities (Netherlands) B.V.	Ownership	100.000	MMLIC		
0000							MM Global Capabilities II LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000							MM Global Capabilities III LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000							MM/Barings Multifamily TEBS 2020 LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000			04-1590850				Berkshire Way LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000							MML Special Situations Investor LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000			47-5322979				Timberland Forest Holding LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000			47-5322979				Timberland Forest Holding LLC	DE	NIA	C.M. Life Insurance Company	Influence		MMLIC		
0000			47-5322979				Timberland Forest Holding LLC	DE	NIA	Wood Creek Capital Management LLC	Management		MMLIC		
0000							Lyme Adirondack Forest Company, LLC	DE	NIA	Timberland Forest Holding LLC	Ownership	100.000	MMLIC		
0000							Lyme Adirondack Timberlands I, LLC	DE	NIA	Lyme Adirondack Forest Company, LLC	Ownership	100.000	MMLIC		
0000							Lyme Adirondack Timberlands II, LLC	DE	NIA	Lyme Adirondack Forest Company, LLC	Ownership	100.000	MMLIC		
0000							Lyme Adirondack Timber Sales, LLC	DE	NIA	Lyme Adirondack Forest Company, LLC	Ownership	100.000	MMLIC		
0000			04-1590850				Insurance Road LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000			04-1590850				MassMutual Trad Private Equity LLC	DE	NIA	Insurance Road LLC	Ownership	100.000	MMLIC		
0000			04-1590850				MassMutual Intellectual Property LLC	DE	NIA	Insurance Road LLC	Ownership	100.000	MMLIC		
0000							Trad Investments I LLC	DE	NIA	Insurance Road LLC	Ownership	100.000	MMLIC		
0000							EM Opportunities LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000							MassMutual MCAM Insurance Company, Inc.	VT	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000							MassMutual Ventures US IV GP, LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	99.000	MMLIC		
0000							MassMutual Ventures US IV GP, LLC	DE	NIA	Massachusetts Mutual Ascend	Ownership	1.000	MMLIC		
0000							MassMutual Ventures US IV, L.P.	DE	NIA	MassMutual Ventures US IV GP, LLC	Management		MMLIC		
0000							MassMutual Ventures US IV LLC	DE	NIA	MassMutual Ventures US IV, L.P.	Ownership	100.000	MMLIC		
0000							MassMutual Ventures Europe/APAC I GP, LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	50.000	MMLIC		
0000							MassMutual Ventures Europe/APAC I GP, L.P.	CYM	NIA	MassMutual Ventures Europe/APAC I GP, LLC	Management		MMLIC		

SCHEDULE Y

PART 1A - DETAILS OF INSURANCE HOLDING COMPANY SYSTEM

1 Group Code	2 Group Name	3 NAIC Company Code	4 ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries Or Affiliates	9 Domiciliary Location	10 Relationship to Reporting Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	13 If Control is Ownership Provide Percentage	14 Ultimate Controlling Entity(ies)/Person(s)	15 Is an SCA Filing Required? (Yes/No)	16 *
0000							MassMutual Ventures Europe/APAC I L.P.	CYM	NIA	MassMutual Ventures Europe/APAC I GP, L.P.	Management		MMLIC		
0000							MassMutual Ventures Southeast Asia III LLC	DE	NIA	MassMutual Ventures Europe/APAC I L.P.	Ownership	100.000	MMLIC		
0000							MMV Digital I LLC	CYM	NIA	MassMutual Ventures Southeast Asia III LLC	Ownership	100.000	MMLIC		
0000							Counterpointe Sustainable Advisors LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	80.250	MMLIC		
0000							CSA Intermediate Holdco LLC	DE	NIA	Counterpointe Sustainable Advisors LLC	Ownership	100.000	MMLIC		
0000							Counterpointe Trust Services LLC	DE	NIA	CSA Intermediate Holdco LLC	Ownership	100.000	MMLIC		
0000							CP PACE LLC	DE	NIA	CSA Intermediate Holdco LLC	Ownership	100.000	MMLIC		
0000							Counterpointe Titling Trust	DE	NIA	CP PACE LLC	Ownership	100.000	MMLIC		
0000							CSA Employee Services Company LLC	DE	NIA	CSA Intermediate Holdco LLC	Ownership	100.000	MMLIC		
0000							Counterpointe Sustainable Real Estate II LLC	DE	NIA	CSA Intermediate Holdco LLC	Ownership	100.000	MMLIC		
0000							Counterpointe Energy Solutions II LLC	DE	NIA	CSA Intermediate Holdco LLC	Ownership	100.000	MMLIC		
0000							Counterpointe Energy Solutions (CA) II LLC	DE	NIA	Counterpointe Energy Solutions II LLC	Ownership	100.000	MMLIC		
0000							Counterpointe Energy Solutions (FL) II LLC	DE	NIA	Counterpointe Energy Solutions II LLC	Ownership	100.000	MMLIC		
0000							Counterpointe Energy Solutions (IL) LLC	DE	NIA	Counterpointe Energy Solutions II LLC	Ownership	100.000	MMLIC		
0000							Loop-Counterpointe PACE LLC	DE	NIA	Counterpointe Energy Solutions (IL) LLC	Ownership	50.000	MMLIC		
0000							Counterpointe Energy Services LLC	DE	NIA	CSA Intermediate Holdco LLC	Ownership	100.000	MMLIC		
0000							Counterpointe Investment Management LLC	DE	NIA	CSA Intermediate Holdco LLC	Ownership	100.000	MMLIC		
0000							CSA Incentive Holdco LLC	DE	NIA	Counterpointe Sustainable Advisors LLC	Ownership	100.000	MMLIC		
0000			27-0105644				Jefferies Finance LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	50.000	MMLIC		1
0000							JFIN GP Adviser LLC	DE	NIA	Jefferies Finance LLC	Ownership	100.000	MMLIC		
0000							Jefferies MM Lending LLC	DE	NIA	Jefferies Finance LLC	Ownership	100.000	MMLIC		
0000							Jefferies Credit Partners LLC	DE	NIA	Jefferies Finance LLC	Ownership	100.000	MMLIC		
0000							Apex Credit Partners LLC	DE	NIA	Jefferies Credit Partners LLC	Ownership	100.000	MMLIC		
0000							Green SPE LLC	DE	NIA	Apex Credit Partners LLC	Ownership	100.000	MMLIC		
0000							Green SPE 2025 LLC	DE	NIA	Apex Credit Partners LLC	Ownership	100.000	MMLIC		
0000							Apex GP I LLC	DE	NIA	Apex Credit Partners LLC	Ownership	100.000	MMLIC		
0000							Apex Securitized Income Fund LP	DE	NIA	Apex GP I LLC	Ownership	100.000	MMLIC		
0000							Jefferies Credit Management LLC	DE	NIA	Jefferies Credit Partners LLC	Ownership	100.000	MMLIC		
0000							JCM GP I LLC	DE	NIA	Jefferies Credit Management LLC	Ownership	100.000	MMLIC		
0000							JCM H-2 Credit Fund GP LLC	DE	NIA	Jefferies Credit Management LLC	Ownership	100.000	MMLIC		
0000							JCP Direct Lending CLO 2022 LLC	DE	NIA	Jefferies Credit Partners LLC	Ownership	9.900	MMLIC		
0000							Jefferies Direct Lending Europe SCSp SICAV-RAIF	LUX	NIA	Jefferies Credit Partners LLC	Ownership	9.900	MMLIC		
0000							Jefferies Credit Management Holdings LLC	DE	NIA	Jefferies Credit Partners LLC	Ownership	9.900	MMLIC		
0000							JDLF GP (Europe) S.a.r.l	LUX	NIA	Jefferies Credit Partners LLC	Ownership	100.000	MMLIC		
0000							JFAM GP LLC	DE	NIA	Jefferies Credit Partners LLC	Ownership	100.000	MMLIC		
0000							JFAM GP LP	DE	NIA	Jefferies Credit Partners LLC	Ownership	100.000	MMLIC		
0000							Jefferies Direct Lending Fund C LP	DE	NIA	JFAM GP LP	Ownership	100.000	MMLIC		
0000							Jefferies DLF C Holdings LLC	DE	NIA	Jefferies Direct Lending Fund C LLC	Ownership	100.000	MMLIC		
0000							Jefferies Direct Lending Fund C SPE LLC	DE	NIA	Jefferies DLF C Holdings LLC	Ownership	100.000	MMLIC		
0000							JDLF II GP LLC	DE	NIA	Jefferies Credit Partners LLC	Ownership	100.000	MMLIC		
0000							JDLF II GP LP	DE	NIA	JDLF II GP LLC	Ownership	100.000	MMLIC		
0000							Jefferies Direct Lending Fund II C LP	DE	NIA	JDLF II GP LP	Ownership	100.000	MMLIC		
0000							Jefferies DLF 2 C Holdings LLC	DE	NIA	Jefferies Direct Lending Fund II C LP	Ownership	100.000	MMLIC		
0000							Jefferies Direct Lending Fund II C SPE LLC	DE	NIA	Jefferies DLF 2 C Holdings LLC	Ownership	100.000	MMLIC		

SCHEDULE Y

PART 1A - DETAILS OF INSURANCE HOLDING COMPANY SYSTEM

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0000							Jefferies DLF2 C Holdings-2 LLC	DE	NIA	Jefferies Direct Lending Fund II C LP	Ownership	100.000	MMLIC		
0000							Jefferies Direct Lending Fund II C SPE-2 LLC	DE	NIA	Jefferies DLF2 C Holdings-2 LLC	Ownership	100.000	MMLIC		
0000							JDLF III GP LLC	DE	NIA	Jefferies Credit Partners LLC	Ownership	100.000	MMLIC		
0000							JDLF III GP LP	DE	NIA	JDLF III GP LLC	Ownership	100.000	MMLIC		
0000							Jefferies Direct Lending Fund III C LP	DE	NIA	JDLF III GP LP	Ownership	100.000	MMLIC		
0000							Jefferies DLF3 C Holdings LLC	DE	NIA	Jefferies Direct Lending Fund III C LP	Ownership	100.000	MMLIC		
0000							Jefferies Direct Lending Fund III C SPE LLC	DE	NIA	Jefferies DLF3 C Holdings LLC	Ownership	100.000	MMLIC		
0000							JCP Direct Lending CLO 2023-1 LLC	DE	NIA	Jefferies Credit Partners LLC	Ownership	100.000	MMLIC		
0000							JCP Direct Lending CLO 2023 Ltd.	JEY	NIA	JCP Direct Lending CLO 2023 Ltd.	Ownership	100.000	MMLIC		
0000							JCP GP I LLC	DE	NIA	Jefferies Credit Partners LLC	Ownership	100.000	MMLIC		
0000							Jefferies M Super Private Credit Fund GP LLC	DE	NIA	Jefferies Credit Partners LLC	Ownership	100.000	MMLIC		
0000							Jefferies Credit Partners Europe Limited	GBR	NIA	Jefferies Credit Partners LLC	Ownership	100.000	MMLIC		
0000							Jefferies European Direct Lending Fund GP S.à.r.l	LUX	NIA	Jefferies Credit Partners Europe Limited	Ownership	100.000	MMLIC		
0000							JCP Congaree Credit Fund GP LLC	DE	NIA	Jefferies Credit Partners LLC	Ownership	100.000	MMLIC		
0000							JCP Solaris Credit Fund GP LLC	DE	NIA	Jefferies Credit Partners LLC	Ownership	100.000	MMLIC		
0000							Jefferies Credit Partners Structured Solutions Fund GP LLC	DE	NIA	Jefferies Credit Partners LLC	Ownership	100.000	MMLIC		
0000							Jefferies Private Credit BDC Inc.	MD	NIA	Jefferies Finance LLC	Ownership	100.000	MMLIC		
0000							JCP Funding 2024 LLC	DE	NIA	Jefferies Finance LLC	Ownership	100.000	MMLIC		
0000							JFIN Revolver Holdings II LLC	DE	NIA	Jefferies Finance LLC	Ownership	100.000	MMLIC		
0000							JFIN Co-Issuer Corporation	DE	NIA	Jefferies Finance LLC	Ownership	100.000	MMLIC		
0000							JFIN Europe GP, S.a.r.l.	LUX	NIA	Jefferies Finance LLC	Ownership	100.000	MMLIC		
0000							Jefferies Finance Europe, S.L.P.	LUX	NIA	JFIN Europe GP, S.a.r.l.	Ownership	100.000	MMLIC		
0000							Jefferies Finance Europe, SCSp	LUX	NIA	JFIN Europe GP, S.a.r.l.	Ownership	100.000	MMLIC		
0000							Jefferies Finance Business Credit LLC	DE	NIA	Jefferies Finance LLC	Ownership	100.000	MMLIC		
0000							JFIN Business Credit Fund I LLC	DE	NIA	Jefferies Finance Business Credit LLC	Ownership	100.000	MMLIC		
0000							JFIN Funding 2021 LLC	DE	NIA	Jefferies Finance LLC	Ownership	100.000	MMLIC		
0000							JSPCS MM LLC	DE	NIA	Jefferies Finance LLC	Ownership	100.000	MMLIC		
0000							JFIN LC Fund LLC	DE	NIA	Jefferies Finance LLC	Ownership	100.000	MMLIC		
0000							JFIN Revolver CLO 2017 Ltd.	CYM	NIA	Jefferies Finance LLC	Ownership	100.000	MMLIC		
0000							JFIN Revolver CLO 2017-III Ltd.	CYM	NIA	Jefferies Finance LLC	Ownership	100.000	MMLIC		
0000							JFIN Revolver CLO 2018 Ltd.	CYM	NIA	Jefferies Finance LLC	Ownership	100.000	MMLIC		
0000							JFIN Revolver CLO 2019 Ltd.	CYM	NIA	Jefferies Finance LLC	Ownership	100.000	MMLIC		
0000							JFIN Revolver CLO 2019-II Ltd.	CYM	NIA	Jefferies Finance LLC	Ownership	100.000	MMLIC		
0000							JFIN Revolver CLO 2020 Ltd.	CYM	NIA	Jefferies Finance LLC	Ownership	100.000	MMLIC		
0000							JFIN Revolver CLO 2021-II Ltd.	CYM	NIA	Jefferies Finance LLC	Ownership	100.000	MMLIC		
0000							JFIN Revolver CLO 2021-V Ltd.	CYM	NIA	Jefferies Finance LLC	Ownership	100.000	MMLIC		
0000							JFIN Revolver CLO 2022-II Ltd.	CYM	NIA	Jefferies Finance LLC	Ownership	100.000	MMLIC		
0000							JFIN Revolver CLO 2022-III Ltd.	CYM	NIA	Jefferies Finance LLC	Ownership	100.000	MMLIC		
0000							JFIN Revolver CLO 2022-IV Ltd.	CYM	NIA	Jefferies Finance LLC	Ownership	100.000	MMLIC		
0000							JFIN Revolver CLO 2024-I Ltd.	DE	NIA	Jefferies Finance LLC	Ownership	100.000	MMLIC		
0000							JFIN Revolver CLO 2025-I Ltd.	DE	NIA	Jefferies Finance LLC	Ownership	100.000	MMLIC		
0000							JFIN Revolver CLO 2022-IV LLC	CYM	NIA	Jefferies Finance LLC	Ownership	100.000	MMLIC		
0000							JFIN Revolver Fund, L.P.	DE	NIA	Jefferies Finance LLC	Ownership	57.950	MMLIC		
0000							JFIN Revolver Funding 2021 Ltd.	DE	NIA	Jefferies Finance LLC	Ownership	100.000	MMLIC		
0000							JFIN Revolver Funding 2021 III Ltd.	DE	NIA	Jefferies Finance LLC	Ownership	100.000	MMLIC		

SCHEDULE Y

PART 1A - DETAILS OF INSURANCE HOLDING COMPANY SYSTEM

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0000							JFIN Revolver Funding 2021 IV Ltd.	DE	NIA	Jefferies Finance LLC	Ownership	100.000	MMLIC		
0000							JFIN Revolver Funding 2022-I Ltd.	BMU	NIA	Jefferies Finance LLC	Ownership	100.000	MMLIC		
0000							JFIN Revolver SPE1 2022 LLC	DE	NIA	Jefferies Finance LLC	Ownership	100.000	MMLIC		
0000							JFIN Revolver SPE3 2022 LLC	DE	NIA	Jefferies Finance LLC	Ownership	100.000	MMLIC		
0000							JFIN Revolver SPE4 2022 LLC	DE	NIA	Jefferies Finance LLC	Ownership	100.000	MMLIC		
0000							JFIN Revolver SPE4 2022 Ltd.	DE	NIA	Jefferies Finance LLC	Ownership	100.000	MMLIC		
0000							JCP Private Loan Management GP LLC	DE	NIA	Jefferies Finance LLC	Ownership	100.000	MMLIC		
0000							JCP Private Loan Management LP	DE	NIA	JCP Private Loan Management GP LLC	Ownership	100.000	MMLIC		
0000							JF CEI Holdings 1 LLC	DE	NIA	Jefferies Finance LLC	Ownership	100.000	MMLIC		
0000							JF CEI Holdings 2 LLC	DE	NIA	JF CEI Holdings 1 LLC	Ownership	100.000	MMLIC		
0000							Apex Credit CLO 2024-I Ltd.	NY	NIA	Jefferies Finance LLC	Ownership	100.000	MMLIC		
0000							Apex Credit Holdings LLC	DE	NIA	Jefferies Finance LLC	Ownership	100.000	MMLIC		
0000							Custom Ecology Holdco, LLC	DE	NIA	Jefferies Finance LLC	Ownership	100.000	MMLIC		
0000			86-2294635				Glidepath Holdings Inc.	DE	UDP	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0435	Massachusetts Mut Life Ins Co	63312	13-1935920				MassMutual Ascend Life Insurance Company	DE	RE	Glidepath Holdings Inc.	Ownership	100.000	MMLIC		
0435	Massachusetts Mut Life Ins Co	93661	31-1021738				Annuity Investors Life Insurance Company	OH	DS	MassMutual Ascend Life Insurance Company	Ownership	100.000	MMLIC		
0000			31-1395344				MM Ascend Life Investor Services, LLC	OH	NIA	MassMutual Ascend Life Insurance Company	Ownership	100.000	MMLIC		
0000							MM Ascend Mortgage Lending LLC	DE	DS	MassMutual Ascend Life Insurance Company	Ownership	100.000	MMLIC		
0000							MM Vine Street LLC	DE	DS	MassMutual Ascend Life Insurance Company	Ownership	100.000	MMLIC		
0000							Counterpointe Ascend Mortgage Lending LLC	DE	DS	MassMutual Ascend Life Insurance Company	Ownership	100.000	MMLIC		
0000			26-3260520				Manhattan National Holding, LLC	OH	DS	MassMutual Ascend Life Insurance Company	Ownership	100.000	MMLIC		
0435	Massachusetts Mut Life Ins Co	67083	45-0252531				Manhattan National Life Insurance Company	OH	DS	Manhattan National Holding LLC	Ownership	100.000	MMLIC		
0000							MassMutual Mortgage Lending LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000			04-1590850				MM Copper Hill Road LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000							MMV CTF I GP LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000							MassMutual Ventures Climate Technology Fund I LP	DE	NIA	MMV CTF I GP LLC	Management		MMLIC		
0000							MM Direct Private Investments Holding LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000							DPI-ACRES Capital LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000							DPI-ARES Mortgage Lending LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000							MM Investment Holding	CYM	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000							MMIH Bond Holdings LLC	DE	NIA	MM Investment Holding	Ownership	99.610	MMLIC		
0000			26-0073611				MassMutual Asset Finance LLC	DE	NIA	C.M. Life Insurance Company	Ownership	0.400	MMLIC		
0000			26-0073611				MassMutual Asset Finance LLC	DE	NIA	MM Investment Holding	Ownership	99.600	MMLIC		
0000							MMAF Equipment Finance LLC 2019-B	DE	NIA	MassMutual Asset Finance LLC	Ownership	100.000	MMLIC		
0000							MMAF Equipment Finance LLC 2020-A	DE	NIA	MassMutual Asset Finance LLC	Ownership	100.000	MMLIC		
0000							MMAF Equipment Finance LLC 2021-A	DE	NIA	MassMutual Asset Finance LLC	Ownership	100.000	MMLIC		
0000							MMAF Equipment Finance LLC 2022-A	DE	NIA	MassMutual Asset Finance LLC	Ownership	100.000	MMLIC		
0000							MMAF Equipment Finance LLC 2023-A	DE	NIA	MassMutual Asset Finance LLC	Ownership	100.000	MMLIC		
0000							MMAF Equipment Finance LLC 2024-A	DE	NIA	MassMutual Asset Finance LLC	Ownership	100.000	MMLIC		
0000							Barings Equipment Finance LLC 2025-A	DE	NIA	MassMutual Asset Finance LLC	Ownership	100.000	MMLIC		
0000							Barings Equipment Finance LLC 2025-B	DE	NIA	MassMutual Asset Finance LLC	Ownership	100.000	MMLIC		

SCHEDULE Y

PART 1A - DETAILS OF INSURANCE HOLDING COMPANY SYSTEM

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0000			04-2443240				MML Management Corporation	MA	NIA	MM Investment Holding	Ownership	100.000	MMLIC	YES	
0000			04-3548444				MassMutual International Holding MSC, Inc.	MA	NIA	MML Management Corporation	Ownership	100.000	MMLIC		
0000			04-3341767				MassMutual Holding MSC, Inc.	MA	NIA	MML Management Corporation	Ownership	100.000	MMLIC		
0000							MML CM LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000							Flourish Holding Company LLC	DE	NIA	MML CM LLC	Ownership	100.000	MMLIC		
0000							Flourish Insurance Agency LLC	DE	NIA	Flourish Holding Company LLC	Ownership	100.000	MMLIC		
0000							Flourish Digital Assets LLC	DE	NIA	Flourish Holding Company LLC	Ownership	100.000	MMLIC		
0000							SoraFinance, Inc.	DE	NIA	Flourish Holding Company LLC	Ownership	100.000	MMLIC		
0000							Flourish Financial LLC	DE	NIA	Flourish Holding Company LLC	Ownership	100.000	MMLIC		
0000							Flourish Technologies LLC	DE	NIA	Flourish Holding Company LLC	Ownership	100.000	MMLIC		
0000			04-3356880				MML Distributors LLC	MA	NIA	Massachusetts Mutual Life Insurance Company	Ownership	99.000	MMLIC		
0000			04-3356880				MML Distributors LLC	MA	NIA	MassMutual Holding LLC	Ownership	1.000	MMLIC		
0000							MML Investment Advisers, LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000			46-3238013				MML Strategic Distributors, LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000			06-1563535	2881445			MassMutual Private Wealth & Trust, FSB	CT	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC	YES	
0000			04-1590850				MML Private Placement Investment Company I, LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000			04-1590850				MML Private Equity Fund Investor LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000			04-1590850				MML Private Equity Fund Investor LLC	DE	NIA	Baring Asset Management Limited	Management		MMLIC		
0000			04-1590850				MM Private Equity Intercontinental LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000			45-2738137				Pioneers Gate LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000			04-2854319	2392316			MassMutual Holding LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC	YES	
0000			37-1732913				Fern Street LLC	DE	NIA	MassMutual Holding LLC	Ownership	100.000	MMLIC		
0000							Low Carbon Energy Holding	GBR	NIA	MassMutual Holding LLC	Ownership	32.200	MMLIC		
0000							Sleeper Street LLC	DE	NIA	MassMutual Holding LLC	Ownership	100.000	MMLIC		
0000			82-2932156				GASL Holdings LLC	DE	NIA	MassMutual Holding LLC	Ownership	73.030	MMLIC		
0000			82-2932156				GASL Holdings LLC	DE	NIA	Barings LLC	Board		MMLIC		
0000			36-4868350				Barings Asset-Based Income Fund (US) LP	DE	NIA	MassMutual Holding LLC	Ownership/Influence	11.230	MMLIC		
0000			36-4868350				Barings Asset-Based Income Fund (US) LP	DE	NIA	C.M. Life Insurance Company	Ownership/Influence	1.110	MMLIC		
0000			36-4868350				Barings Asset-Based Income Fund (US) LP	DE	NIA	Barings LLC	Management		MMLIC		
0000							Barings Perpetual European Direct Lending Fund	LUX	NIA	Massachusetts Mutual Life Insurance Company	Ownership/Influence	69.000	MMLIC		
0000							Barings Perpetual European Direct Lending Fund	LUX	NIA	Barings LLC	Influence		MMLIC		
0000			88-0916548				Barings Emerging Generation Fund II	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership/Influence	30.522	MMLIC		
0000			88-0916548				Barings Emerging Generation Fund II	DE	NIA	Barings LLC	Influence		MMLIC		
0000			98-1206017				Babson Capital Global Special Situation Credit Fund 2	DE	NIA	MassMutual Holding LLC	Ownership/Influence	24.276	MMLIC		
0000			98-1206017				Babson Capital Global Special Situation Credit Fund 2	DE	NIA	C.M. Life Insurance Company	Ownership	1.594	MMLIC		
0000			98-1206017				Babson Capital Global Special Situation Credit Fund 2	DE	NIA	Barings LLC	Management		MMLIC		

SCHEDULE Y

PART 1A - DETAILS OF INSURANCE HOLDING COMPANY SYSTEM

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0000			82-3867745				Barings Global Real Assets Fund LP	DE	NIA	MassMutual Holding LLC	Ownership/Influence	36.013	MMLIC		
0000			82-3867745				Barings Global Real Assets Fund LP	DE	NIA	C.M. Life Insurance Company	Ownership	7.040	MMLIC		
0000			82-3867745				Barings Global Real Assets Fund LP	DE	NIA	Barings LLC	Management		MMLIC		
0000							Barings Global Special Situations Credit Fund 3	LUX	NIA	MassMutual Holding LLC	Ownership/Influence	15.752	MMLIC		
0000							Barings Global Special Situations Credit Fund 3	LUX	NIA	Barings LLC	Management		MMLIC		
0000			06-1597528				MassMutual Assignment Company	NC	NIA	MassMutual Holding LLC	Ownership	100.000	MMLIC		
0000			04-1590850				MassMutual Capital Partners LLC	DE	NIA	MassMutual Holding LLC	Ownership	100.000	MMLIC		
0000			46-4255307				Marco Hotel LLC	DE	NIA	MassMutual Holding LLC	Ownership	100.000	MMLIC		
0000			45-3623262				HB Naples Golf Owner LLC	DE	NIA	MassMutual Holding LLC	Ownership	100.000	MMLIC		
0000							Intermodal Holding II LLC	DE	NIA	MassMutual Holding LLC	Ownership	100.000	MMLIC		
0000							MassMutual Ventures Holding LLC	DE	NIA	MassMutual Holding LLC	Ownership	100.000	MMLIC		
0000							Crane Venture Partners LLP	GBR	NIA	MassMutual Ventures Holding LLC	Ownership	16.660	MMLIC		
0000							MassMutual Ventures Management LLC	DE	NIA	MassMutual Ventures Holding LLC	Ownership	100.000	MMLIC		
0000							MassMutual Ventures SEA Management Private Limited	DE	NIA	MassMutual Ventures Management LLC	Ownership	100.000	MMLIC		
0000							MMV UK/SEA Limited	GBR	NIA	MassMutual Ventures SEA Management Private Limited	Ownership	100.000	MMLIC		
0000							MassMutual Ventures India Private Limited	IND	NIA	MassMutual Ventures SEA Management Private Limited	Ownership	100.000	MMLIC		
0000							MassMutual Ventures Southeast Asia I LLC	DE	NIA	MassMutual Ventures Holding LLC	Ownership	100.000	MMLIC		
0000							MassMutual Ventures Southeast Asia II LLC	DE	NIA	MassMutual Ventures Holding LLC	Ownership	100.000	MMLIC		
0000							MassMutual Ventures UK LLC	DE	NIA	MassMutual Ventures Holding LLC	Ownership	100.000	MMLIC		
0000			47-1296410				MassMutual Ventures US I LLC	DE	NIA	MassMutual Ventures Holding LLC	Ownership	100.000	MMLIC		
0000							MassMutual Ventures US II LLC	DE	NIA	MassMutual Ventures Holding LLC	Ownership	100.000	MMLIC		
0000							MassMutual Ventures US III LLC	DE	NIA	MassMutual Ventures Holding LLC	Ownership	100.000	MMLIC		
0000							Crane APAC I LP	GBR	NIA	MassMutual Ventures Holding LLC	Ownership	100.000	MMLIC		
0000							MM Catalyst Fund LLC	DE	NIA	MassMutual Holding LLC	Ownership	100.000	MMLIC		
0000							MM Catalyst Fund II LLC	DE	NIA	MassMutual Holding LLC	Ownership	100.000	MMLIC		
0000			04-1590850				MM Rothesay Holdco US LLC	DE	NIA	MassMutual Holding LLC	Ownership	100.000	MMLIC		
0000							Rothesay Limited	GBR	NIA	MM Rothesay Holdco US LLC	Ownership	47.600	MMLIC		
0000							Riverton Home Finance Limited	GBR	NIA	Rothesay Limited	Ownership	100.000	MMLIC		
0000							Rothesay Life Plc	GBR	NIA	Rothesay Limited	Ownership	100.000	MMLIC		
0000							Rothesay MA No.1 Limited	GBR	NIA	Rothesay Life PLC	Ownership	100.000	MMLIC		
0000							Rothesay MA No.3 Limited	GBR	NIA	Rothesay Life PLC	Ownership	100.000	MMLIC		
0000							Rothesay MA No.4 Limited	GBR	NIA	Rothesay Life PLC	Ownership	100.000	MMLIC		
0000							LT Mortgage Financing Limited	GBR	NIA	Rothesay Life PLC	Ownership	100.000	MMLIC		
0000							Rothesay Property Partnership 1 LLP	GBR	NIA	Rothesay Life PLC	Ownership	99.900	MMLIC		
0000							Rothesay Property Partnership 1 LLP	GBR	NIA	Rothesay MA No.4 Limited	Ownership	0.100	MMLIC		
0000							Rothesay Property Company 1 Limited	GBR	NIA	Rothesay Life PLC	Ownership	100.000	MMLIC		
0000							Rothesay Foundation	GBR	NIA	Rothesay Limited	Ownership	100.000	MMLIC		
0000							Rothesay Pensions Management Limited	GBR	NIA	Rothesay Limited	Ownership	100.000	MMLIC		
0000							Rothesay Asset Management UK Limited	GBR	NIA	Rothesay Limited	Ownership	100.000	MMLIC		
0000							Rothesay Asset Management Australia Pty Ltd	AUS	NIA	Rothesay Asset Management UK Limited	Ownership	100.000	MMLIC		
0000							Rothesay Asset Management North America LLC	DE	NIA	Rothesay Asset Management UK Limited	Ownership	100.000	MMLIC		
0000			04-1590850				MML Investors Services, LLC	MA	NIA	MassMutual Holding LLC	Ownership	100.000	MMLIC		
0000			04-1590850				MML Insurance Agency, LLC	MA	NIA	MML Investors Services, LLC	Ownership	100.000	MMLIC		
0000			47-1466022				LifeScore Labs, LLC	MA	NIA	MassMutual Holding LLC	Ownership	100.000	MMLIC		
0000			45-4000072				MM Asset Management Holding LLC	MA	NIA	MassMutual Holding LLC	Ownership	100.000	MMLIC		

SCHEDULE Y

PART 1A - DETAILS OF INSURANCE HOLDING COMPANY SYSTEM

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0000			51-0504477				Barings LLC	MA	NIA	MassMutual Holding LLC	Ownership	100.000	MMLIC		
0000			98-0524271				Baring Asset Management (Asia) Holdings Limited	HKG	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000			98-0457463				Baring Asset Management (Asia) Limited	HKG	NIA	Baring Asset Management (Asia) Holdings Limited	Ownership	100.000	MMLIC		
0000							Baring Asset Management Korea Limited	KOR	NIA	Baring Asset Management (Asia) Limited	Ownership	100.000	MMLIC		
0000							Barings Investment Management (Shanghai) Limited	HKG	NIA	Baring Asset Management (Asia) Limited	Ownership	100.000	MMLIC		
0000							Barings Overseas Investment Fund Management (Shanghai) Limited	HKG	NIA	Barings Investment Management (Shanghai) Limited	Ownership	100.000	MMLIC		
0000			98-0457707				Baring SICE (Taiwan) Limited	TWN	NIA	Baring Asset Management (Asia) Holdings Limited	Ownership	100.000	MMLIC		
0000							Barings Singapore Pte. Ltd.	SGP	NIA	Baring Asset Management (Asia) Holdings Limited	Ownership	100.000	MMLIC		
0000			98-0236449				Barings Japan Limited	JPN	NIA	Baring Asset Management (Asia) Holdings Limited	Ownership	100.000	MMLIC		
0000							Barings Real Estate Investment Japan Limited	JPN	NIA	Barings Japan Limited	Ownership	100.000	MMLIC		
0000							Barings Australia Holding Company Pty Ltd	AUS	NIA	Baring Asset Management (Asia) Holdings Limited	Ownership	100.000	MMLIC		
0000							Barings Australia Pty Ltd	AUS	NIA	Barings Australia Holding Company Pty Ltd	Ownership	100.000	MMLIC		
0000							Barings Australia Real Estate Holdings Pty Ltd	AUS	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000			14-0045656				Barings Australia Real Estate Pty Ltd	AUS	NIA	Barings Australia Real Estate Holdings Pty Ltd	Ownership	100.000	MMLIC		
0000			98-0457456				Barings Australia Property Holdings Pty Ltd	AUS	NIA	Barings Australia Real Estate Pty Ltd	Ownership	100.000	MMLIC		
0000							Barings Australia Asset Management Pty Ltd	AUS	NIA	Barings Australia Property Holdings Pty Ltd	Ownership	100.000	MMLIC		
0000							Barings Australia Property Pty Ltd	AUS	NIA	Barings Australia Property Holdings Pty Ltd	Ownership	100.000	MMLIC		
0000							Barings Australia Structured Finance Holdings Pty Ltd	AUS	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000							Barings Australia Structured Finance Pty Ltd	AUS	NIA	Barings Australia Structured Finance Holdings Pty Ltd	Ownership	100.000	MMLIC		
0000							Gryphon Capital Partners Pty Ltd	AUS	NIA	Barings Australia Structured Finance Pty Ltd	Ownership	100.000	MMLIC		
0000							Gryphon Capital Management Pty Ltd	AUS	NIA	Gryphon Capital Partners Pty Ltd	Ownership	100.000	MMLIC		
0000							Gryphon Capital Investments Pty Ltd	AUS	NIA	Gryphon Capital Partners Pty Ltd	Ownership	100.000	MMLIC		
0000							Barings Real Estate Holdings LLC	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000							Artemis Real Estate Partners, LLC	DE	NIA	Barings Real Estate Holdings LLC	Ownership	100.000	MMLIC		
0000							Artemis Real Estate Advisors, LLC	DE	NIA	Artemis Real Estate Partners, LLC	Ownership	100.000	MMLIC		
0000							Artemis Real Estate Partners Acquisitions I, LLC	DE	NIA	Artemis Real Estate Partners, LLC	Ownership	100.000	MMLIC		
0000			80-0875475				Barings Finance LLC	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000							BCF Europe Funding Limited	IRL	NIA	Barings Finance LLC	Ownership	100.000	MMLIC		
0000							BCF Senior Funding I LLC	DE	NIA	Barings Finance LLC	Ownership	100.000	MMLIC		
0000							BCF Senior Funding I Designated Activity Company	IRL	NIA	Barings Finance LLC	Ownership	100.000	MMLIC		
0000							Barings Real Estate Acquisitions LLC	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000			04-3238351				Barings Securities LLC	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000			98-0437588				Barings Guernsey Limited	GGY	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000							Barings Europe Limited	GBR	NIA	Barings Guernsey Limited	Ownership	100.000	MMLIC		

SCHEDULE Y

PART 1A - DETAILS OF INSURANCE HOLDING COMPANY SYSTEM

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0000							Barings Asset Management Spain SL	ESP	NIA	Barings Europe Limited	Ownership	100.000	MMLIC		
0000							Baring France SAS	FRA	NIA	Barings Europe Limited	Ownership	100.000	MMLIC		
0000							Baring International Fund Managers (Ireland) Limited	IRL	NIA	Barings Europe Limited	Ownership	100.000	MMLIC		
0000							Barings GmbH	DEU	NIA	Barings Europe Limited	Ownership	100.000	MMLIC		
0000							Barings Italy S.r.l.	ITA	NIA	Barings Europe Limited	Ownership	100.000	MMLIC		
0000							Barings Sweden AB	SWE	NIA	Barings Europe Limited	Ownership	100.000	MMLIC		
0000							Barings Netherlands B.V.	NLD	NIA	Barings Europe Limited	Ownership	100.000	MMLIC		
0000			98-0432153				Barings (U.K.) Limited	GBR	NIA	Barings Europe Limited	Ownership	100.000	MMLIC		
0000							Barings Switzerland Sàrl	CHE	NIA	Barings Europe Limited	Ownership	100.000	MMLIC		
0000			98-0241935				Baring Asset Management Limited	GBR	NIA	Barings Europe Limited	Ownership	100.000	MMLIC		
0000							Barings European Direct Lending 1 GP LLP	GBR	NIA	Baring Asset Management Limited	Ownership	100.000	MMLIC		
0000			98-0457328				Baring International Investment Limited	GBR	NIA	Baring Asset Management Limited	Ownership	100.000	MMLIC		
0000			98-0457586				Baring Fund Managers Limited	GBR	NIA	Baring Asset Management Limited	Ownership	100.000	MMLIC		
0000							BCGSS 2 GP LLP	GBR	NIA	Baring Fund Managers Limited	Ownership	100.000	MMLIC		
0000			98-0457578				Baring Investment Services Limited	GBR	NIA	Baring Asset Management Limited	Ownership	100.000	MMLIC		
0000							Barings Core Fund Feeder I GP S.à.r.l.	LUX	NIA	Baring Asset Management Limited	Ownership	100.000	MMLIC		
0000							Barings Investment Fund (LUX) GP S.à. r.l .	LUX	NIA	Baring Asset Management Limited	Ownership	100.000	MMLIC		
0000							Barings BME GP S.à.r.l.	GBR	NIA	Baring Asset Management Limited	Ownership	100.000	MMLIC		
0000							Barings GPC GP S.à. r.l .	LUX	NIA	Baring Asset Management Limited	Ownership	100.000	MMLIC		
0000							Barings European Core Property Fund GP Sàrl	GBR	NIA	Baring Asset Management Limited	Ownership	100.000	MMLIC		
0000							Barings Umbrella Fund (LUX) GP S.à.r.l.	LUX	NIA	Baring Asset Management Limited	Ownership	100.000	MMLIC		
0000							GPLF4(S) GP S.à r. l	LUX	NIA	Baring Asset Management Limited	Ownership	100.000	MMLIC		
0000							PREIF Holdings Limited Partnership	GBR	NIA	Baring Asset Management Limited	Ownership	100.000	MMLIC		
0000							BMC Holdings DE LLC	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000			04-3238351	3456895			Barings Real Estate Advisers Inc.	CA	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000			81-4065378				Remington L & W Holdings LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership/Influence	64.370	MMLIC		
0000			81-4065378				Remington L & W Holdings LLC	DE	NIA	Barings LLC	Influence		MMLIC		
0000							Aland Royalty GP, LLC	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000							Alaska Future Fund GP, LLC	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000							BAI Funds SLP, LLC	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000							BAI GP, LLC	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000							Baring Asset-Based Income Fund (US) GP, LLC	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000							Barings Infiniti Fund Management LLC	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000							Barings Infrastructure CLO Equity Partnership GP LLC	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000							Barings NAPLF IV Rated Feeder, L.P.	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000							Barings New Jersey Emerging Manager Program GP, LLC	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000							Barings Hotel Opportunity Venture I GP, LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000							Baring Investment Series LLC	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000							Barings Emerging Generation Fund GP, LLC	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000							Barings Emerging Generation Fund GP II, LLC	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000							Barings ERS PE Emerging Manager III GP, LLC	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000							Barings FC III LLC	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000			04-1590850				Barings Global Investment Funds (U.S.) Management LLC	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000							Barings CLO Investment Partners GP, LLC	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		

SCHEDULE Y

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0000							Barings Core Property Fund GP LLC	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000							Barings Direct Lending GP Ltd.	CYM	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000							Barings Direct Investments LLC	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000							Barings Diversified Residential Fund GP LLC	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000							Barings Global Energy Infrastructure Advisors, LLC	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000							Barings Centre Street CLO Equity Partnership GP, LLC	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000			88-3792609				Barings Centre Street CLO Equity Partnership LP	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership/Influence	24.500	MMLIC		
0000			88-3792609				Barings Centre Street CLO Equity Partnership LP	DE	NIA	Barings LLC	Management		MMLIC		
0000							Barings Global Real Assets Fund GP, LLC	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000							Barings GPSF LLC	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000							Barings North American Private Loan Fund Management, LLC	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000							Barings North American Private Loan Fund II Management, LLC	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000							Barings North American Private Loan Fund III Management, LLC	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000							Barings North American Private Loan Fund IV (Cayman)-A, L.P.	CYM	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000							Barings North American Private Loan Fund IV Management, LLC	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000							Barings Portfolio Finance IG Issuer I, LLC	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000							Barings Real Asset Special Servicer LLC	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000							Barings Global Special Situations Credit Fund 4 GP (Delaware) LLC	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000							Barings - MM Revolver Fund GP LLC	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000							Barings Real Estate European Value Add Fund II Feeder LLC	CYM	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000							Barings SBIC II GP, LLC	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000							Barings SEM GP LLC	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000							BMT RE Debt Fund GP LLC	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000			84-5063008				Barings Small Business Fund LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	30.650	MMLIC		
0000			84-5063008				Barings Small Business Fund LLC	DE	NIA	Barings LLC	Management		MMLIC		
0000							Barings TYIDF2 Rated Feeder GP LLC	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000							Barings TYIDF2 Rated Feeder, L.P.	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000							Barings Active Passive Equity Direct EAFE LLC	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000							BCLF GP LLC	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000							BDAE Private Fund GP	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000							BDAE Private Fund, LP	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000			98-0536233				Benton Street Advisors, Inc.	CYM	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000							BHOVI Incentive LLC	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000							BIG Real Estate Incentive I LLC	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000							BIG Real Estate Incentive II LLC	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000							BRECS VII GP LLC	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000							BREDIF GP LLC	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000							CPF Springing Member, LLC	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		

SCHEDULE Y

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0000							CREA-MA Reorganization Trust	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000							CREF X GP LLC	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000			04-1590850				Great Lakes III GP, LLC	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000							Lake Jackson LLC	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000							Martello Re GP LLC	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000							Barings Emerging Markets Blended Fund I GP, LLC	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000							Barings EPLF4 Rated Feeder GP LLC	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000			41-2280126				Mezzco III LLC	DE	NIA	Barings LLC	Ownership	99.300	MMLIC		
0000			80-0920285				Mezzco IV LLC	DE	NIA	Barings LLC	Ownership	99.300	MMLIC		
0000							Mezzco Australia II LLC	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000							RECSA-NY GP LLC	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000							Terrapin Middle Market Infrastructure Fund, L.P.	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000			98-1624360				Barings CLO 2022-I	CYM	NIA	Barings LLC	Influence		MMLIC		
0000							Barings CLO 2022-II	CYM	NIA	Barings LLC	Influence		MMLIC		
0000							Amherst Long Term Holdings, LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	24.500	MMLIC		
0000							Enroll Confidently, Inc.	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	22.400	MMLIC		
0000							Imbiba Growth LLP	GBR	NIA	Massachusetts Mutual Life Insurance Company	Ownership	20.000	MMLIC		
0000							Yunfeng Financial Group Limited	HKG	NIA	Massachusetts Mutual Life Insurance Company	Ownership	23.650	MMLIC		
0000			27-3576835				MassMutual External Benefits Group LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000							Stillings Street LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000							Eclipse Business Capital LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	7.000	MMLIC		
0000							Port 51 Lending Holdings LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	90.200	MMLIC		
0000							Port 51 Lending LLC	DE	NIA	Port 51 Lending Holdings LLC	Ownership	100.000	MMLIC		
0000							Port 51 Commercial LLC	DE	NIA	Port 51 Lending Holdings LLC	Ownership	100.000	MMLIC		
0000							Counterpointe MM Mortgage Lending LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000							LNL MM, LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	71.250	MMLIC		
0000							CapSec LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000							LNL MM 2, LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	85.500	MMLIC		
0000			04-1590850				100 w. 3rd Street LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000			82-2432216				300 South Tryon Hotel LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000			04-1590850				300 South Tryon LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000							Almack Mezzanine Fund II Unleveraged LP	GBR	NIA	Massachusetts Mutual Life Insurance Company	Ownership/Influence	72.900	MMLIC		

SCHEDULE Y

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0000							Barings Affordable Housing Mortgage Fund I LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	99.666	MMLIC		
0000							Barings Affordable Housing Mortgage Fund I LLC	DE	NIA	Barings LLC	Management		MMLIC		
0000			61-1902329				Barings Affordable Housing Mortgage Fund II LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000			61-1902329				Barings Affordable Housing Mortgage Fund II LLC	DE	NIA	Barings LLC	Management		MMLIC		
0000			85-3036663				Barings Affordable Housing Mortgage Fund III LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000			85-3036663				Barings Affordable Housing Mortgage Fund III LLC	DE	NIA	Barings LLC	Management		MMLIC		
0000							Barings Capital Solutions Perpetual Fund (CA), L.P.	CYM	NIA	Massachusetts Mutual Life Insurance Company	Ownership	39.020	MMLIC		
0000							Barings Construction Lending Fund LP	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	53.720	MMLIC		
0000							Barings Construction Lending Fund LP	DE	NIA	Massachusetts Mutual Ascend	Management		MMLIC		
0000							12-18 West 55th Street Predevelopment, LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	90.200	MMLIC		
0000							21 West 86th LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	96.240	MMLIC		
0000							Barings Diversified Residential Fund LP	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000							Barings Emerging Generation Fund II LP	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	39.380	MMLIC		
0000							Barings Emerging Generation Fund III GP, LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000			84-3784245				Barings Emerging Generation Fund, LP	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	31.155	MMLIC		
0000			84-3784245				Barings Emerging Generation Fund, LP	DE	NIA	Barings LLC	Management		MMLIC		
0000							Barings Emerging Markets Corporate Bond Fund	IRL	NIA	Massachusetts Mutual Life Insurance Company	Influence		MMLIC		
0000							Barings Emerging Markets Corporate Bond Fund	IRL	NIA	Barings LLC	Ownership	58.052	MMLIC		
0000							Barings Hotel Opportunity Venture I LP	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership/Influence	65.000	MMLIC		
0000							Barings Hotel Opportunity Venture I LP	DE	NIA	Barings LLC	Management		MMLIC		
0000							Barings Miller Investment Trust	AUS	NIA	MassMutual Ascend Life Insurance Company	Influence		MMLIC		
0000							Barings Miller Investment Trust	AUS	NIA	Massachusetts Mutual Life Insurance Company	Ownership	70.661	MMLIC		
0000			85-3449260				Barings Real Estate Debt Income Fund LP	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership/Influence	30.563	MMLIC		
0000			85-3449260				Barings Real Estate Debt Income Fund LP	DE	NIA	C.M. Life Insurance Company	Influence		MMLIC		
0000			85-3449260				Barings Real Estate Debt Income Fund LP	DE	NIA	Barings LLC	Management		MMLIC		
0000							Barings Real Estate European Value Add I SCSp	GBR	NIA	Massachusetts Mutual Life Insurance Company	Ownership/Influence	44.031	MMLIC		
0000							Barings Real Estate European Value Add I SCSp	GBR	NIA	C.M. Life Insurance Company	Ownership	4.892	MMLIC		
0000							Barings Real Estate European Value Add I SCSp	GBR	NIA	Barings LLC	Management		MMLIC		
0000			04-1590850				Barings Real Estate European Value Add Fund 3 SCSp	LUX	NIA	Massachusetts Mutual Life Insurance Company	Ownership	97.678	MMLIC		

SCHEDULE Y

PART 1A - DETAILS OF INSURANCE HOLDING COMPANY SYSTEM

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0000			04-1590850				Barings Real Estate European Value Add Fund 3 SCSp	LUX	NIA	C.M. Life Insurance Company	Influence		MMLIC		
0000			04-1590850				Barings Real Estate European Value Add Fund 3 SCSp	LUX	NIA	Barings LLC	Management		MMLIC		
0000							Barings Small Business Fund, L.P.	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	33.600	MMLIC		
0000			04-1590850				Barings Storage Operations Trust	AUS	NIA	Massachusetts Mutual Life Insurance Company	Ownership	87.760	MMLIC		
0000			04-1590850				Barings Storage Operations Trust	AUS	NIA	Massachusetts Mutual Ascend	Ownership	7.740	MMLIC		
0000							Barings U.S. Core Bond Fund	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000							Barings U.S. High Yield Fund	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	30.090	MMLIC		
0000							Barings-MM Revolver Fund LP	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership/Influence	86.000	MMLIC		
0000							Barings-MM Revolver Fund LP	DE	NIA	MM Ascend	Ownership/Influence	14.000	MMLIC		
0000			04-1590850				Barings Australia Storage Trust	AUS	NIA	Massachusetts Mutual Life Insurance Company	Ownership	87.760	MMLIC		
0000			04-1590850				Barings Australia Storage Trust	AUS	NIA	Massachusetts Mutual Ascend	Ownership	7.740	MMLIC		
0000							Beauty Brands Acquisition LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	32.630	MMLIC		
0000							Beauty Brands Acquisition Intermediate LLC	DE	NIA	Beauty Brands Acquisition LLC	Ownership	100.000	MMLIC		
0000							Forma Brands, LLC	DE	NIA	Beauty Brands Acquisition Intermediate LLC	Ownership	100.000	MMLIC		
0000			45-2632610				Cornerstone Permanent Mortgage Fund LLC	MA	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000			45-2632610				Cornerstone Permanent Mortgage Fund LLC	MA	NIA	Barings LLC	Management		MMLIC		
0000							CREA Ridge Apartments, LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000							Euro Real Estate Holdings Herleshausen LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	47.500	MMLIC		
0000							London Office JV Holdings LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000							MALIC Australia BSOT LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000							Riverwalk MM Member, LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000			83-0560183				Aland Royalty Holdings LP	DE	NIA	MassMutual Holding LLC	Ownership/Influence	26.856	MMLIC		
0000			83-0560183				Aland Royalty Holdings LP	DE	NIA	Barings LLC	Management		MMLIC		
0000			81-2244465				Chassis Acquisition Holding LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership/Influence	46.460	MMLIC		
0000			81-4258759				CRA Aircraft Holding LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership/Influence	14.803	MMLIC		
0000			81-4258759				CRA Aircraft Holding LLC	DE	NIA	Barings LLC	Influence		MMLIC		
0000							EIP Holdings I, LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership/Influence	29.000	MMLIC		
0000			46-0687392				Validus Holding Company LLC	DE	NIA	Barings LLC	Ownership	40.440	MMLIC		
0000							SBNP SIA III LLC	DE	NIA	Barings LLC	Ownership	100.000	MMLIC		
0000							MM Speedway El Paso Member LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	86.950	MMLIC		
0000							MM Speedway El Paso Member LLC	DE	NIA	Massachusetts Mutual Ascend	Ownership	13.050	MMLIC		

SCHEDULE Y

PART 1A - DETAILS OF INSURANCE HOLDING COMPANY SYSTEM

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0000			04-1590850				MM Speedway El Paso Member II LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	78.250	MMLIC		
0000			04-1590850				MM Speedway El Paso Member II LLC	DE	NIA	Massachusetts Mutual Ascend	Ownership	11.740	MMLIC		
0000							Barings European Real Estate Debt Income Fund	LUX	NIA	Massachusetts Mutual Life Insurance Company	Ownership/Influence	39.137	MMLIC		
0000							Barings European Real Estate Debt Income Fund	LUX	NIA	Barings LLC	Influence		MMLIC		
0000			37-1506417				Babson Capital Loan Strategies Fund, L.P.	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership/Influence	58.306	MMLIC		
0000			37-1506417				Babson Capital Loan Strategies Fund, L.P.	DE	NIA	C.M. Life Insurance Company	Ownership	2.794	MMLIC		
0000			37-1506417				Babson Capital Loan Strategies Fund, L.P.	DE	NIA	Barings LLC	Management		MMLIC		
0000							Barings US High Yield Bond Fund	IRL	NIA	Barings LLC	Management		MMLIC		
0000							Barings US High Yield Fund	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	19.030	MMLIC		
0000							Barings US High Yield Fund	DE	NIA	C.M. Life Insurance Company	Ownership	2.810	MMLIC		
0000							Barings US High Yield Fund	DE	NIA	Barings LLC	Influence		MMLIC		
0000							Babson CLO Ltd. 2015-I	CYM	NIA	Barings LLC	Influence		MMLIC		2
0000			98-1473665				Barings CLO 2019-II	CYM	NIA	Barings LLC	Influence		MMLIC		
0000							Barings CLO 2019-III	CYM	NIA	Barings LLC	Influence		MMLIC		
0000							Barings CLO 2019-IV	CYM	NIA	Barings LLC	Influence		MMLIC		
0000							Barings CLO 2020-I	CYM	NIA	Barings LLC	Influence		MMLIC		
0000							Barings CLO 2020-III	CYM	NIA	Barings LLC	Influence		MMLIC		
0000							Barings CLO 2020-IV	CYM	NIA	Barings LLC	Influence		MMLIC		
0000							Barings CLO 2021-I	CYM	NIA	Barings LLC	Influence		MMLIC		
0000							Barings CLO 2021-II	CYM	NIA	Barings LLC	Influence		MMLIC		
0000							Barings CLO 2021-III	CYM	NIA	Barings LLC	Influence		MMLIC		
0000							Barings CLO 2024-II	CYM	NIA	Barings LLC	Influence		MMLIC		
0000							Babson Euro CLO 2015-I BV	NLD	NIA	Barings LLC	Influence		MMLIC		
0000			36-037260H				Barings Euro CLO 2019-I BV	IRL	NIA	Barings LLC	Influence		MMLIC		
0000							Barings Euro CLO 2019-II BV	IRL	NIA	Barings LLC	Influence		MMLIC		
0000							Barings Euro CLO 2020-I DAC	IRL	NIA	Barings LLC	Influence		MMLIC		
0000			37-15576VH				Barings Euro CLO 2021-I DAC	IRL	NIA	Barings LLC	Influence		MMLIC		
0000							Barings Euro CLO 2021-II DAC	IRL	NIA	Barings LLC	Influence		MMLIC		
0000							Barings Euro CLO 2021-III DAC	IRL	NIA	Barings LLC	Influence		MMLIC		
0000							Barings Euro CLO 2023-II DAC	IRL	NIA	Barings LLC	Influence		MMLIC		
0000							Barings Euro CLO 2024-II	IRL	NIA	Barings LLC	Influence		MMLIC		
0000							Barings CLO 2025 - IV	CYM	NIA	Barings LLC	Influence		MMLIC		
0000			98-1332384				Barings Global Energy Infrastructure Fund I LP	CYM	NIA	Massachusetts Mutual Life Insurance Company	Ownership/Influence	92.624	MMLIC		
0000							Barings Joondalup Trust	AUS	NIA	Massachusetts Mutual Life Insurance Company	Ownership/Influence	49.734	MMLIC		
0000							Barings Joondalup Trust	AUS	NIA	Massachusetts Mutual Ascend	Ownership/Influence	9.500	MMLIC		
0000							Barings Joondalup Trust	AUS	NIA	Barings LLC	Influence		MMLIC		
0000			93-4219244				Barings Construction Lending Fund	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership/Influence	100.000	MMLIC		
0000			93-4219244				Barings Construction Lending Fund	DE	NIA	Barings LLC	Influence		MMLIC		
0000							Barings Liquidity Investment Strategy	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership/Influence	14.210	MMLIC		
0000							Barings Liquidity Investment Strategy	DE	NIA	Barings LLC	Influence		MMLIC		

SCHEDULE Y

PART 1A - DETAILS OF INSURANCE HOLDING COMPANY SYSTEM

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0000			82-4059427				Artemis Real Estate Income and Growth Fund II LP	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership/Influence	18.971	MMLIC		
0000			82-4059427				Artemis Real Estate Income and Growth Fund II LP	DE	NIA	Barings LLC	Influence		MMLIC		
0000			99-1828090				Artemis EM Strategy Sponsor Investor, LLC	DE	NIA	Barings LLC	Management		MMLIC		
0000							Barings Global Special Situations Credit 4 Delaware	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	61.613	MMLIC		
0000							Barings Global Special Situations Credit 4 Delaware	DE	NIA	C.M. Life Insurance Company	Ownership	3.243	MMLIC		
0000							Barings Global Special Situations Credit 4 Delaware	DE	NIA	Barings LLC	Management		MMLIC		
0000							Barings Global Special Situations Credit 4 LUX	LUX	NIA	Massachusetts Mutual Life Insurance Company	Ownership	12.867	MMLIC		
0000							Barings Global Special Situations Credit 4 LUX	LUX	NIA	C.M. Life Insurance Company	Ownership	0.812	MMLIC		
0000							Barings Global Special Situations Credit 4 LUX	LUX	NIA	Barings LLC	Management		MMLIC		
0000							Barings Europe Select Fund	IRL	NIA	Barings LLC	Management		MMLIC		
0000			87-0977058				Barings Hotel Opportunity Venture	CT	NIA	Massachusetts Mutual Life Insurance Company	Ownership/Influence	51.347	MMLIC		
0000			87-0977058				Barings Hotel Opportunity Venture	CT	NIA	Barings LLC	Management		MMLIC		
0000			86-3661023				Barings Innovations & Growth Real Estate Fund	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	29.037	MMLIC		
0000			86-3661023				Barings Innovations & Growth Real Estate Fund	DE	NIA	C.M. Life Insurance Company	Ownership	0.419	MMLIC		
0000							Barings Middle Market CLO 2017-I Ltd & LLC	CYM	NIA	Barings LLC	Influence		MMLIC		
0000			98-1612604				Barings Middle Market CLO Ltd 2021-I	CYM	NIA	Barings LLC	Influence		MMLIC		
0000							Barings Middle Market CLO Ltd 2023-I	BMU	NIA	Barings LLC	Influence		MMLIC		
0000							Barings Middle Market CLO Ltd 2023-II	BMU	NIA	Barings LLC	Influence		MMLIC		
0000							Barings Euro Middle Market CLO 2024-1 DAC	IRL	NIA	Barings LLC	Influence		MMLIC		
0000							Barings Middle Market Loan Partners 1	CYM	NIA	Barings LLC	Influence		MMLIC		
0000							Barings Middle Market Loan Partners 2	CYM	NIA	Barings LLC	Influence		MMLIC		
0000							Barings Loan Partners 5	CYM	NIA	Barings LLC	Influence		MMLIC		
0000							Barings Loan Partners 4	CYM	NIA	Barings LLC	Influence		MMLIC		
0000			98-1332384				Barings RE Credit Strategies VII LP	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership/Influence	23.890	MMLIC		
0000			98-1332384				Barings RE Credit Strategies VII LP	DE	NIA	Baring Asset Management Limited	Management		MMLIC		
0000			98-1567942				Barings Target Yield Infrastructure Debt Fund	LUX	NIA	Massachusetts Mutual Life Insurance Company	Ownership	16.979	MMLIC		
0000			98-1567942				Barings Target Yield Infrastructure Debt Fund	LUX	NIA	Baring Asset Management Limited	Management		MMLIC		
0000			81-0841854				Barings CLO Investment Partners LP	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership/Influence	100.000	MMLIC		
0000			81-0841854				Barings CLO Investment Partners LP	DE	NIA	Barings LLC	Management		MMLIC		
0000							Barings Euro Value Add II (BREEVA II)	LUX	NIA	Massachusetts Mutual Life Insurance Company	Ownership/Influence	24.208	MMLIC		
0000							Barings Euro Value Add II (BREEVA II)	LUX	NIA	C.M. Life Insurance Company	Ownership	2.105	MMLIC		
0000							Barings Euro Value Add II (BREEVA II)	LUX	NIA	Barings LLC	Management		MMLIC		
0000			87-1262754				Barings Transportation Fund LP	DE	NIA	MassMutual Holding LLC	Ownership/Influence	13.539	MMLIC		
0000			87-1262754				Barings Transportation Fund LP	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	8.268	MMLIC		

SCHEDULE Y

PART 1A - DETAILS OF INSURANCE HOLDING COMPANY SYSTEM

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0000							Braemar Energy Ventures I, L.P.	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership/Influence	98.520	MMLIC		
0000							Braemar Energy Ventures I, L.P.	DE	NIA	C.M. Life Insurance Company	Ownership	1.480	MMLIC		
0000							Braemar Energy Ventures I, L.P.	DE	NIA	Barings LLC	Management		MMLIC		
0000			13-1935920				BRAVA 5 MALIC Investor LLC	AUS	NIA	Massachusetts Mutual Ascend	Ownership	2.270	MMLIC		
0000			04-1590850				BRAVA 5 MM Investor LLC	AUS	NIA	Massachusetts Mutual Life Insurance Company	Ownership	54.470	MMLIC		
0000							Barings European Core Property Fund SCSp	LUX	NIA	MassMutual Holding LLC	Ownership/Influence	12.550	MMLIC		
0000							Barings European Core Property Fund SCSp	LUX	NIA	C.M. Life Insurance Company	Ownership	0.802	MMLIC		
0000							Barings European Core Property Fund SCSp	LUX	NIA	Barings Real Estate Advisers LLC	Management		MMLIC		
0000			46-5001122				Barings European Private Loan Fund III A	LUX	NIA	Massachusetts Mutual Life Insurance Company	Ownership	45.238	MMLIC		
0000			38-4059932				Benchmark 2018-B2 Mortgage Trust	NY	NIA	Barings LLC	Influence		MMLIC		
0000							Benchmark 2018-B4	NY	NIA	Barings LLC	Influence		MMLIC		
0000			38-4096530				Benchmark 2018-B8	NY	NIA	Barings LLC	Influence		MMLIC		
0000			20-5578089				Barings Core Property Fund LP	DE	NIA	MassMutual Holding LLC	Ownership/Influence	32.264	MMLIC		
0000			20-5578089				Barings Core Property Fund LP	DE	NIA	Barings Real Estate Advisers LLC	Management		MMLIC		
0000			04-1590850				DPI Acres Capital SPV LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000			04-1590850				DPI-ARES Mortgage Lending SPV, LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000							E2E Affordable Housing Debt Fund LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership/Influence	100.000	MMLIC		
0000			98-1607033				GIA EU Holdings - Emerson JV Sarl	LUX	NIA	Massachusetts Mutual Life Insurance Company	Ownership/Influence	100.000	MMLIC		
0000			98-1607033				GIA EU Holdings - Emerson JV Sarl	LUX	NIA	Barings LLC	Management		MMLIC		
0000			38-4041011				JPMCC Commercial Mortgage Securities Trust 2017-JP7	NY	NIA	Barings LLC	Influence		MMLIC		
0000			38-4032059				JPMDB Commercial Mortgage Securities Trust 2017-C5	NY	NIA	Barings LLC	Influence		MMLIC		
0000							Martello Re Feeder LP	DE	NIA	MassMutual Holding LLC	Ownership	58.050	MMLIC		
0000							Martello Re LP	DE	NIA	Martello Re Feeder LP	Ownership	25.800	MMLIC		
0000							Martello Re Holding Limited LLC	DE	NIA	Martello Re LP	Ownership	100.000	MMLIC		
0000							Martello Re Limited	BMU	NIA	Martello Re Holding Limited LLC	Ownership	100.000	MMLIC		
0000							Martello Re Services Company	DE	NIA	Martello Re Holding Limited LLC	Ownership	100.000	MMLIC		
0000			04-1590850				Miami Douglas Three MM, LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	50.000	MMLIC		
0000			87-4021641				MM BIG Peninsula Co-Invest Member LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	26.985	MMLIC		
0000			87-4021641				MM BIG Peninsula Co-Invest Member LLC	DE	NIA	C.M. Life Insurance Company	Ownership	0.835	MMLIC		
0000			04-1590850				MM Direct Private Invetment Holding	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000							MM CM Holding LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000			81-3000420				MM Debt Participations LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership/Influence	100.000	MMLIC		
0000			81-3000420				MM Debt Participations LLC	DE	NIA	Barings LLC	Management		MMLIC		
0000			92-3857084				Barings Capital Solutions Perpetual Fund (DE) LP	DE	NIA	Barings LLC	Influence		MMLIC		
0000							Barings Capital Solutions Perpetual Fund (LUX)	LUX	NIA	Barings LLC	Influence		MMLIC		

SCHEDULE Y

PART 1A - DETAILS OF INSURANCE HOLDING COMPANY SYSTEM

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0000							Barings Income Navigator Fund	IRL	NIA	Barings LLC	Influence		MMLIC		
0000							Barings Capital Solutions Perpetual Fund (CA), LP	CYM	NIA	Barings LLC	Influence		MMLIC		
0000							Barings Emerging Market Debt Blended Total Return Fund	IRL	NIA	Barings LLC	Ownership	72.430	MMLIC		
0000			04-1590850				40 Exchange MM Member LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	88.350	MMLIC		
0000			04-1590850				40 Exchange MM Member LLC	DE	NIA	Massachusetts Mutual Ascend	Ownership	6.650	MMLIC		
0000							Barings Global Investment Grade Credit Fund	IRL	NIA	Massachusetts Mutual Life Insurance Company	Ownership	41.925	MMLIC		
0000							Barings Global Investment Grade Credit Fund	IRL	NIA	Barings LLC	Management		MMLIC		
0000			04-1590850				MM MD2 Station Member LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	47.000	MMLIC		
0000			04-1590850				MM MD2 Station Member LLC	DE	NIA	C.M. Life Insurance Company	Ownership	3.100	MMLIC		
0000			04-1590850				MM National IOS Program Member LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	72.000	MMLIC		
0000			04-1590850				MM National IOS Program Member LLC	DE	NIA	Massachusetts Mutual Ascend	Ownership	18.000	MMLIC		
0000							MM National Self-Storage Program Member II LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000			04-1590850				MMV Climate Technology Fund GP	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	99.000	MMLIC		
0000			04-1590850				MMV Climate Technology Fund GP	DE	NIA	Massachusetts Mutual Ascend	Ownership	1.000	MMLIC		
0000							MM REED District Landco Member LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	76.800	MMLIC		
0000							MM REED District Landco Member LLC	DE	NIA	C.M. Life Insurance Company	Ownership	3.200	MMLIC		
0000			04-1590850				MM Sedona Vortex Investor LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	76.290	MMLIC		
0000			04-1590850				MM Sedona Vortex Investor LLC	DE	NIA	Massachusetts Mutual Ascend	Ownership	18.710	MMLIC		
0000			04-1590850				MM SL Willistown LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	89.670	MMLIC		
0000			04-1590850				MM SL Willistown LLC	DE	NIA	C.M. Life Insurance Company	Ownership	10.330	MMLIC		
0000			04-1590850				MM Subline Borrower LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000							MM The Gilman Member LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	45.000	MMLIC		
0000			39-2502808				MM Tokyo BTR1 LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	70.000	MMLIC		
0000			39-2502808				MM Tokyo BTR1 LLC	DE	NIA	Massachusetts Mutual Ascend	Ownership	30.000	MMLIC		
0000			39-2502808				MM Tokyo BTR1 LLC Project Zeus	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	70.000	MMLIC		
0000			39-2502808				MM Tokyo BTR1 LLC Project Zeus	DE	NIA	Massachusetts Mutual Ascend	Ownership	30.000	MMLIC		
0000							MMLIC Australia BAST LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000							MMLIC Australia BSOT LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000							SBNP SIA IV LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	99.000	MMLIC		
0000			04-1590850				Washington Pine LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000			33-5063019				PDX SW Third Hotel Owner LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000			04-1590850				Trailside MM Member LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	59.590	MMLIC		

SCHEDULE Y

PART 1A - DETAILS OF INSURANCE HOLDING COMPANY SYSTEM

1 Group Code	2 Group Name	3 NAIC Company Code	4 ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries Or Affiliates	9 Domiciliary Location	10 Relationship to Reporting Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	13 If Control is Ownership Provide Percentage	14 Ultimate Controlling Entity(ies)/Person(s)	15 Is an SCA Filing Required? (Yes/No)	16 *
0000			04-1590850				Trailside MM Member LLC	DE	NIA	C.M. Life Insurance Company	Ownership	7.370	MMLIC		
0000			83-1325764				Washington Gateway Two LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	66.810	MMLIC		
0000			83-1325764				Washington Gateway Two LLC	DE	NIA	C.M. Life Insurance Company	Ownership	28.190	MMLIC		
0000			32-0574045				Washington Gateway Three LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	83.781	MMLIC		
0000							MALIC Debt Participations LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000							Invesco Ltd	BMU	NIA	MM Asset Management Holding LLC	Ownership	18.200	MMLIC		
0000							Barings US Loan Fund Series	DE	NIA	Barings LLC	Ownership	0.028	MMLIC		
0000							Barings Global Private Loan Fund	LUX	NIA	Barings LLC	Ownership	13.475	MMLIC		
0000							KKR MM Project Vector LP	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	90.000	MMLIC		
0000							Mass360 Commerical Real Estate Debt Partners LLC	CA	NIA	Massachusetts Mutual Life Insurance Company	Ownership	81.000	MMLIC		
0000							Mass360 Commerical Real Estate Debt Partners LLC	CA	NIA	C.M. Life Insurance Company	Ownership	9.000	MMLIC		
0000			04-1590850				Barings Developed Europe Private Loan Fund 1 SCSp	LUX	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000							Barings Developed Europe Real Estate Debt Fund	NC	NIA	Massachusetts Mutual Life Insurance Company	Ownership	68.671	MMLIC		
0000							Barings Developed Europe Real Estate Debt Fund	NC	NIA	MassMutual Ascend Life Insurance Company	Ownership	31.330	MMLIC		
0000							Barings Umbrella Fund plc - Barings Global Investment Grade	IRL	NIA	Massachusetts Mutual Life Insurance Company	Ownership	52.550	MMLIC		
0000							Barings CLO LTD 2018-III	CYM	NIA	Barings LLC	Influence		MMLIC		
0000							Babson LP-II	CYM	NIA	Barings LLC	Influence		MMLIC		
0000							Barings Loan Partners CLO-III	CYM	NIA	Barings LLC	Influence		MMLIC		
0000							Barings CLO Ltd 2025-III	CYM	NIA	Barings LLC	Influence		MMLIC		
0000							Barings CLO Ltd 2025-VI	CYM	NIA	Barings LLC	Influence		MMLIC		
0000							Barings CLO Ltd 2025-VII	CYM	NIA	Barings LLC	Influence		MMLIC		
0000							Barings CLO Ltd 2025-VII	CYM	NIA	Barings LLC	Influence		MMLIC		
0000							Barings CLO Romeo Warehouse	CYM	NIA	Barings LLC	Influence		MMLIC		
0000							Barings Euro CLO 2014-II BV	IRL	NIA	Barings LLC	Influence		MMLIC		
0000							Babson Capital Loan Strategies Master Fund LP	CYM	NIA	Barings LLC	Management		MMLIC		
0000							Barings China Aggregate Bond Private Securities Investment Fund	CHN	NIA	Barings LLC	Management		MMLIC		
0000			47-3790192				Barings Global High Yield Fund	MA	NIA	Barings LLC	Management		MMLIC		
0000			71-1018134				Great Lakes II LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	0.754	MMLIC		
0000			71-1018134				Great Lakes II LLC	DE	NIA	C.M. Life Insurance Company	Ownership	0.319	MMLIC		
0000			04-1590850				Wood Creek Venture Fund LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	40.000	MMLIC		
0000							Barings California Mortgage Fund IV	CA	NIA	Massachusetts Mutual Life Insurance Company	Ownership/Influence	100.000	MMLIC		
0000							Barings California Mortgage Fund IV	CA	NIA	Barings LLC	Influence		MMLIC		
0000							Barings Umbrella Fund LUX SCSp SICAV RAIF	LUX	NIA	Massachusetts Mutual Life Insurance Company	Ownership	22.972	MMLIC		
0000							Barings Umbrella Fund LUX SCSp SICAV RAIF	LUX	NIA	C.M. Life Insurance Company	Ownership	1.997	MMLIC		

SCHEDULE Y

PART 1A - DETAILS OF INSURANCE HOLDING COMPANY SYSTEM

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0000			82-2285211				Calgary Railway Holding LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	90.000	MMLIC		
0000			82-3307907				Cornbrook PRS Holdings LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	96.080	MMLIC		
0000			95-4207717				Cornerstone California Mortgage Fund I LLC	CA	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000			95-4207717				Cornerstone California Mortgage Fund II LLC	CA	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000			95-4207717				Cornerstone California Mortgage Fund III LLC	CA	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000			56-2630592				Cornerstone Fort Pierce Development LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	84.388	MMLIC		
0000			56-2630592				Cornerstone Fort Pierce Development LLC	DE	NIA	C.M. Life Insurance Company	Ownership	5.578	MMLIC		
0000			61-1750537				Cornerstone Permanent Mortgage Fund II	MA	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000			61-1750537				Cornerstone Permanent Mortgage Fund II	MA	NIA	Barings LLC	Management		MMLIC		
0000							Cornerstone Permanent Mortgage Fund III LLC	MA	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000			61-1793735				Cornerstone Permanent Mortgage Fund IV	MA	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000			82-2783393				Danville Riverwalk Venture, LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	93.860	MMLIC		
0000			04-1590850				Euro Real Estate Holdings LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	50.000	MMLIC		
0000			20-3347091				Fan Pier Development LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	59.150	MMLIC		
0000			20-3347091				Fan Pier Development LLC	DE	NIA	C.M. Life Insurance Company	Ownership	5.850	MMLIC		
0000			04-1590850				GIA EU Holdings LLC - Avalon Spain	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000			04-1590850				GIA EU Holdings LLC- GIA Italy SCSp	MA	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000			04-1590850				GIA EU Holdings LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	95.000	MMLIC		
0000			81-5360103				Landmark Manchester Holdings LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000			13-1935920				MMLIC Debt Participations LLC	DE	NIA	Massachusetts Mutual Ascend	Ownership	100.000	MMLIC		
0000			04-1590850				MM Brookhaven Member LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	95.000	MMLIC		
0000			04-1590850				MM Ascend Mtg. Lending LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000			04-1590850				MM Kannapolis Industrial Member LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	87.080	MMLIC		
0000			04-1590850				MM Kannapolis Industrial Member LLC	DE	NIA	Massachusetts Mutual Ascend	Ownership	12.920	MMLIC		
0000			04-1590850				MM East South Crossing Member LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	95.000	MMLIC		
0000							MM Fremont Member LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000			04-1590850				MM Horizon Savannah Member LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	88.710	MMLIC		
0000			04-1590850				MM Horizon Savannah Member LLC	DE	NIA	C.M. Life Insurance Company	Ownership	7.220	MMLIC		
0000			04-1590850				MM Horizon Savannah Member II LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	84.270	MMLIC		
0000			04-1590850				MM Horizon Savannah Member II LLC	DE	NIA	C.M. Life Insurance Company	Ownership	3.690	MMLIC		

SCHEDULE Y

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0000			04-1590850				MM Horizon Savannah Member II LLC	DE	NIA	Massachusetts Mutual Ascend	Ownership	7.600	MMLIC		
0000			04-1590850				MM Ironhead Commerce Center	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	75.210	MMLIC		
0000			04-1590850				MM Ironhead Commerce Center	DE	NIA	Massachusetts Mutual Ascend	Ownership	19.790	MMLIC		
0000							BRAVA5 MM Investor LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000							BRAVA5 MALIC Investor LLC	DE	NIA	MassMutual Ascend Life Insurance Company	Ownership	100.000	MMLIC		
0000							MM Ironhead Commerce Center Member LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000							MM 425 Montgomery Member LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	78.355	MMLIC		
0000							MM 425 Montgomery Member LLC	DE	NIA	Massachusetts Mutual Ascend	Ownership	21.645	MMLIC		
0000							MM 550 Corporate Member LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000							MM Ascend DS Investor LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000							MM Century Square LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000							MM Horizon Savannah Member III LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	88.710	MMLIC		
0000							MM Horizon Savannah Member III LLC	DE	NIA	C.M. Life Insurance Company	Ownership	3.690	MMLIC		
0000							MM Horizon Savannah Member III LLC	DE	NIA	Massachusetts Mutual Ascend	Ownership	7.600	MMLIC		
0000							MM Liberty Centre LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000			04-1590850				MM National Self-Storage Program Member LLC	DE	NIA	C.M. Life Insurance Company	Ownership	98.000	MMLIC		
0000							MM Park City Investor LLC	NC	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000							MM Park City Investor LLC	NC	NIA	Massachusetts Mutual Ascend	Influence		MMLIC		
0000			04-1590850				MM ReDiscover Member LLC	DE	NIA	Massachusetts Mutual Ascend	Influence		MMLIC		
0000			04-1590850				MM ReDiscover Member LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000			04-1590850				MM Liberty Centre Member LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	82.000	MMLIC		
0000			04-1590850				MM Century Square Member LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	68.560	MMLIC		
0000			04-1590850				MM Century Square Member LLC	DE	NIA	C.M. Life Insurance Company	Ownership	3.120	MMLIC		
0000			04-1590850				MM Stowe Investor LLC	NC	NIA	Massachusetts Mutual Life Insurance Company	Ownership	13.700	MMLIC		
0000			04-1590850				MM Virginian Investor LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000			04-1590850				MM 340 Madison Member LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	96.721	MMLIC		
0000			04-1590850				MM 340 Madison Member LLC	DE	NIA	Massachusetts Mutual Ascend	Ownership	3.279	MMLIC		
0000			04-1590850				MM 1370 AVE OF AM LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	90.000	MMLIC		
0000			04-1590850				MM 1370 AVE OF AM LLC	DE	NIA	C.M. Life Insurance Company	Ownership	3.330	MMLIC		
0000			04-1590850				MM 1400 E 4th Street Member LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	94.000	MMLIC		
0000			04-1590850				Miami Douglas Four MM LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000			04-1590850				MM Five50West Member LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	88.750	MMLIC		

SCHEDULE Y

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0000			04-1590850				MM Five50West Member LLC	DE	NIA	C.M. Life Insurance Company	Ownership	11.250	MMLIC		
0000			04-1590850				MM Breton Village Member LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	81.130	MMLIC		
0000			04-1590850				MM Breton Village Member LLC	DE	NIA	C.M. Life Insurance Company	Ownership	16.980	MMLIC		
0000			80-0948028				One Harbor Shore LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	86.440	MMLIC		
0000			80-0948028				One Harbor Shore LLC	DE	NIA	C.M. Life Insurance Company	Ownership	8.550	MMLIC		
0000			04-1590850				Paco France Logistics LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	50.000	MMLIC		
0000							Salomon Brothers Commercial Mortgage Trust 2001-MM	DE	NIA	Barings Real Estate Advisers LLC	Influence		MMLIC		
0000			04-1590850				Trailside MM Member II LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	47.120	MMLIC		
0000			82-3250684				Unna, Dortmund Holding LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	50.000	MMLIC		
0000			45-5401109				Washington Gateway Apartments Venture LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	91.000	MMLIC		
0000			45-5401109				Washington Gateway Apartments Venture LLC	DE	NIA	C.M. Life Insurance Company	Ownership	4.800	MMLIC		
0000			88-3861481				West 37th Street Hotel LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	93.800	MMLIC		
0000			88-3861481				West 37th Street Hotel LLC	DE	NIA	C.M. Life Insurance Company	Ownership	6.200	MMLIC		
0000			02-0769954		0000916053	OQ	MassMutual Select Small Capital Value Equity Fund	MA	NIA	Massachusetts Mutual Life Insurance Company	Influence		MMLIC		
0000			47-3529636				MML Series II Dynamic Bond Fund	MA	NIA	Massachusetts Mutual Life Insurance Company	Influence		MMLIC		
0000			45-1618222		0000916053	OQ	MML SER INVT FD II ISHARES 80/20 ALLOCATION FD	MA	NIA	Massachusetts Mutual Life Insurance Company	Ownership	21.387	MMLIC		
0000			45-1618046		0000916053	OQ	MassMutual ishares 60/40 Allocation Fund	MA	NIA	Massachusetts Mutual Life Insurance Company	Ownership	43.767	MMLIC		
0000			04-3556992		0000916053	OQ	MassMutual Blue Chip Growth Fund	MA	NIA	Massachusetts Mutual Life Insurance Company	Ownership	67.722	MMLIC		
0000			04-3277549		0000916053	OQ	MassMutual Core Bond Fund	MA	NIA	Massachusetts Mutual Life Insurance Company	Ownership/Influence	2.481	MMLIC		
0000			01-0821120		0000916053	OQ	MassMutual Diversified Value Fund	MA	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000			03-0532475		0000916053	OQ	MassMutual Inflation-Protected and Income Fund	MA	NIA	Massachusetts Mutual Life Insurance Company	Ownership	40.120	MMLIC		
0000			04-3512596		0000916053	OQ	MassMutual Mid Cap Growth Fund	MA	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000			04-3464165		0000916053	OQ	MassMutual Premier Diversified Bond Fund	MA	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000			04-3557000		0000916053	OQ	MassMutual Select Overseas Fund	MA	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000			04-3520009		0000916053	OQ	MassMutual High Yield Fund	MA	NIA	Massachusetts Mutual Life Insurance Company	Ownership	20.318	MMLIC		

Asterisk	Explanation
1	Massachusetts Mutual Life Insurance Company owns 14.23% of the affiliated debt of Jefferies Finance LLC
2	Debt investors own .5% and includes only Great Lakes III, L.P.

SCHEDULE Y

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

1 NAIC Company Code	2 ID Number	3 Names of Insurers and Parent, Subsidiaries or Affiliates	4 Shareholder Dividends	5 Capital Contributions	6 Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	7 Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	8 Management Agreements and Service Contracts	9 Income/ (Disbursements) Incurred Under Reinsurance Agreements	10 *	11 Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	12 Totals	13 Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
65935	04-1590850	Massachusetts Mutual Life Insurance Company (MMLIC)	1,959,400,297	1,063,691,395	346,939,372						3,370,031,063	(100,688,782)
93432	06-1041383	C.M. Life Insurance Company	17,563,077	(23,130,256)							(5,567,179)	51,847,946
70416	43-0581430	MML Bay State Life Insurance Company	(21,000,000)								(21,000,000)	15,557,064
63312	13-1935920	MassMutual Ascend Life Insurance Company	83,164,332	(125,514,284)							(42,349,951)	
93661	31-1021738	Annuity Investors Life Insurance Company	(250,000,000)								(250,000,000)	
		MM Investment Holding			(346,939,372)						(346,939,372)	
		Rothesay Life Plc									0	33,283,772
	04-2854319	MassMutual Holding LLC	(1,503,807,154)	88,260,730							(1,415,546,424)	
	04-1590850	Insurance Road LLC	(90,000,000)	39,950,434							(50,049,566)	
		MML Investment Advisers, LLC	(35,127,662)								(35,127,662)	
	85-3449260	Barings Real Estate Debt Income Fund LP	(25,093,939)	(70,281,228)							(95,375,168)	
		KKR MM Project Vector LP	(12,808,636)								(12,808,636)	
	06-1563535	MassMutual Private Wealth & Trust, FSB	(8,000,000)								(8,000,000)	
		Barings European Real Estate Debt Income Fund	(7,630,325)	(1,767,197)							(9,397,522)	
	98-1567942	Barings Target Yield Infrastructure Debt Fund	(6,193,327)	(10,027,153)							(16,220,480)	
	04-1590850	MML Private Equity Fund Investor LLC	(6,134,706)	(10,216,264)							(16,350,970)	
	45-1618222	MML SER INVT FD II ISHARES 80/20 ALLOCATION FD	(6,019,417)								(6,019,417)	
	85-3036663	Barings Affordable Housing Mortgage Fund III LLC	(5,683,671)	14,564,161							8,880,491	
		LNL MM, LLC	(5,203,166)	137,991,192							132,788,026	
	46-5001122	Barings European Private Loan Fund III A	(5,146,236)	(5,810,292)							(10,956,528)	
		Barings Global Special Situations Credit 4 Delaware	(4,804,913)	(14,161,217)							(18,966,130)	
	84-3784245	Barings Emerging Generation Fund, LP	(4,001,385)	(2,754,493)							(6,755,878)	
	93-4168848	MassMutual Clinton Municipal Credit Opportunities Fund	(3,715,338)								(3,715,338)	
	61-1793735	Cornerstone Permanent Mortgage Fund IV	(3,603,018)	(2,204,982)							(5,808,000)	
	95-4207717	Cornerstone California Mortgage Fund III LLC	(3,455,761)	(1,677,827)							(5,133,589)	
		Barings California Mortgage Fund IV	(3,429,757)	50,966,314							47,536,557	
	61-1902329	Barings Affordable Housing Mortgage Fund II LLC	(3,420,181)	(2,165,819)							(5,586,000)	
	95-4207717	Cornerstone California Mortgage Fund I LLC	(3,284,084)	(1,714,493)							(4,998,577)	
	04-3520009	MassMutual High Yield Fund	(3,269,705)								(3,269,705)	
	45-2632610	Cornerstone Permanent Mortgage Fund LLC	(3,235,801)	(2,426,199)							(5,662,000)	
		Cornerstone Permanent Mortgage Fund III LLC	(3,147,202)	(2,256,798)							(5,404,000)	
	98-1332384	Barings Global Energy Infrastructure Fund I LP	(3,028,688)	(4,639,401)							(7,668,089)	
		Barings Emerging Generation Fund II LP	(2,984,100)	4,213,022							1,228,922	

SCHEDULE Y

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		Eclipse Business Capital LLC	(2,779,994)	(3,222,754)							(6,002,747)	
	87-1262754	Barings Transportation Fund LP	(2,729,821)								(2,729,821)	
	61-1750537	Cornerstone Permanent Mortgage Fund II	(2,720,076)	(2,246,924)							(4,967,000)	
		Barings Global Special Situations Credit 4 LUX	(2,703,227)	(6,163,975)							(8,867,201)	
		Barings Affordable Housing Mortgage Fund I LLC	(2,686,947)	(2,110,053)							(4,797,000)	
	95-4207717	Cornerstone California Mortgage Fund II LLC	(2,530,621)	(906,823)							(3,437,444)	
		Barings Perpetual European Direct Lending Fund	(2,231,766)	(26,595,176)							(28,826,942)	
	82-3250684	Unna, Dortmund Holding LLC	(2,120,890)	72,634							(2,048,256)	
	04-1590850	MM Subline Borrower LLC	(1,990,592)	94							(1,990,498)	
	04-1590850	Washington Pine LLC	(1,637,609)	(56,800,000)							(58,437,609)	
	81-0841854	Barings CLO Investment Partners LP	(1,442,097)	(5,588,839)							(7,030,936)	
		Mass360 Commerical Real Estate Debt Partners LLC	(1,196,586)	(16,498,087)							(17,694,673)	
		Barings Construction Lending Fund LP	(1,167,557)	25,613,455							24,445,897	
	81-4258759	CRA Aircraft Holding LLC	(742,851)	(4,456,694)							(5,199,545)	
		Barings European Core Property Fund SCSp	(639,074)	(347,354)							(986,427)	
	20-3347091	Fan Pier Development LLC	(519,506)	(3,315,494)							(3,835,000)	
		Barings Participation Investors	(499,097)								(499,097)	
		Barings Small Business Fund, L.P.	(336,276)	3,125,000							2,788,724	
	04-1590850	PACO France Logistics LLC	(250,904)	(4,390,123)							(4,641,026)	
	92-1441036	MassMutual RetireSMART by JPMorgan 2065 Fund	(179,883)								(179,883)	
	92-1427882	MassMutual Select T Rowe Price Retirement 2065 Fund	(127,057)								(127,057)	
		JFIN Revolver Fund, L.P.	(100,101)	380,798							280,697	
	04-1590850	Barings Developed Europe Private Loan Fund 1 SCSp	(87,850)	6,218,262							6,130,412	
	47-5326235	MassMutual RetireSMART 2060 Fund	(74,815)								(74,815)	
	04-3584140	MassMutual Select Small Company Value Fund	(52,187)								(52,187)	
	01-0821120	MassMutual Diversified Value Fund	(47,148)								(47,148)	
	04-3512590	MassMutual Equity Opportunities Fund	(47,042)								(47,042)	
	04-3212054	MassMutual Balanced Fund	(37,262)								(37,262)	
	04-3556992	MassMutual Blue Chip Growth Fund	(31,553)								(31,553)	
	04-3539083	MassMutual Disciplined Value Fund	(20,780)								(20,780)	
	04-3557000	MassMutual Select Overseas Fund	(18,992)								(18,992)	
	04-3512596	MassMutual Mid Cap Growth Fund	(18,057)								(18,057)	
	46-4257056	MML Series International Equity Fund	(17,582)								(17,582)	
	45-1618155	MassMutual 20/80 Allocation Fund	(15,573)								(15,573)	
	04-3277549	MassMutual Core Bond Fund	(14,394)								(14,394)	

SCHEDULE Y

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

1 NAIC Company Code	2 ID Number	3 Names of Insurers and Parent, Subsidiaries or Affiliates	4 Shareholder Dividends	5 Capital Contributions	6 Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	7 Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	8 Management Agreements and Service Contracts	9 Income/ (Disbursements) Incurred Under Reinsurance Agreements	10 *	11 Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	12 Totals	13 Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
	45-1618222	MassMutual Select 80/20 Allocation Fund	(13,844)								(13,844)	
	02-0769954	MassMutual Small Cap Value Equity Fund	(10,709)								(10,709)	
	42-1710935	MassMutual Select Mid-Cap Value Fund	(10,006)								(10,006)	
	04-3464165	MassMutual Premier Diversified Bond Fund	(8,612)								(8,612)	
	04-1590850	Miami Douglas Three MM, LLC	(7,951)	11,890,781							11,882,829	
	03-0532475	MassMutual Inflation-Protected and Income Fund	(7,704)								(7,704)	
	45-1618262	MassMutual 40/60 Allocation Fund	(7,584)								(7,584)	
	04-3539084	MassMutual Disciplined Growth Fund	(6,808)								(6,808)	
		Barings US Loan Fund Series	(6,306)								(6,306)	
	45-1618046	MassMutual 60/40 Allocation Fund	(4,576)								(4,576)	
		MassMutual Strategic Bond Fund	(2,762)								(2,762)	
	03-0532464	MassMutual RetireSMART In Retirement Fund	(1,740)								(1,740)	
	46-3289207	MassMutual RetireSMART 2055 Fund	(1,130)								(1,130)	
	27-1933389	MassMutual RetireSMART 2035 Fund	(771)								(771)	
	04-3424705	MassMutual Small Cap Opportunities Fund	(722)								(722)	
		MassMutual RetireSMART by JPMorgan 2045 Fund	(679)								(679)	
	36-4868350	Barings Asset-Based Income Fund (US) LP	7,077	(7,077)							0	
		Barings Miller Investment Trust	34,290	(561,301)							(527,012)	
		CML Special Situations Investor LLC	57,399	(57,399)							0	
		Great Lakes III LP	219,048	(219,048)							0	
	88-3861481	West 37th Street Hotel LLC	612,824	(404,455)							208,369	
	82-3867745	Barings Global Real Assets Fund LP	4,077,501	(5,743,952)							(1,666,451)	
		Sleeper Street LLC		(1,998,812,616)							(1,998,812,616)	
	04-3313782	MassMutual International LLC		(300,704,123)							(300,704,123)	
	04-1590850	DPI-ARES Mortgage Lending SPV, LLC		(300,000,000)							(300,000,000)	
	04-1590850	DPI Acres Capital SPV LLC		(107,811,706)							(107,811,706)	
		MassMutual Mortgage Lending LLC		(94,626,750)							(94,626,750)	
	04-1590850	MM Horizon Savannah Member LLC		(47,788,007)							(47,788,007)	
	04-1590850	Berkshire Way LLC		(32,649,731)							(32,649,731)	
	04-1590850	MM Private Equity Intercontinental LLC		(8,853,796)							(8,853,796)	
	04-1590850	MM Direct Private Invetment Holding		(5,658,587)							(5,658,587)	
	98-1332384	Barings RE Credit Strategies VII LP		(2,676,848)							(2,676,848)	
		MM CM Holding LLC		(2,170,815)							(2,170,815)	
	98-1612604	Barings Middle Market CLO Ltd 2021-I		(2,002,040)							(2,002,040)	
		Barings Real Estate European Value Add I SCSp		(1,597,688)							(1,597,688)	
		E2E Affordable Housing Debt Fund LLC		(1,215,567)							(1,215,567)	
	04-1590850	Trailside MM Member II LLC		(1,169,319)							(1,169,319)	
	56-2630592	Cornerstone Fort Pierce Development LLC		(998,635)							(998,635)	
	04-1590850	Trailside MM Member LLC		(655,666)							(655,666)	
	04-1590850	MM MD1 Station Member LLC		(600,000)							(600,000)	
		Barings Euro CLO 2021-II DAC		(589,834)							(589,834)	

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

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
....	04-1590850	New Haven Holdco LLC	.....	(468,756)	.....	.....	.....	.....	....	.....	(468,756)	.....
....	47-5322979	Timberland Forest Holding LLC	.....	(296,000)	.....	.....	.....	.....	....	.....	(296,000)	.....
....	.....	Barings CLO LTD 2018-III	.....	(3,272)	.....	.....	.....	.....	....	.....	(3,272)	.....
....	.....	Barings Euro CLO 2014-II BV	.....	(2,619)	.....	.....	.....	.....	....	.....	(2,619)	.....
....	.....	Barings CLO 2020-IV	.....	(10)	.....	.....	.....	.....	....	.....	(10)	.....
....	04-1590850	MM 340 Madison Member LLC	.....	258,902,678	.....	.....	.....	.....	....	.....	258,902,678	.....
....	.....	Barings Developed Europe Real Estate Debt Fund	.....	187,573,421	.....	.....	.....	.....	....	.....	187,573,421	.....
....	.....	Counterpointe MM Mortgage Lending LLC	.....	118,399,468	.....	.....	.....	.....	....	.....	118,399,468	.....
....	04-1590850	GIA EU Holdings LLC	.....	114,226,184	.....	.....	.....	.....	....	.....	114,226,184	.....
....	.....	Barings US High Yield Fund	.....	86,934,128	.....	.....	.....	.....	....	.....	86,934,128	.....
....	80-0948028	One Harbor Shore LLC	.....	68,917,692	.....	.....	.....	.....	....	.....	68,917,692	.....
....	04-1590850	MM ReDiscover Member LLC	.....	67,123,075	.....	.....	.....	.....	....	.....	67,123,075	.....
....	04-1590850	Barings Australia Storage Trust	.....	64,482,986	.....	.....	.....	.....	....	.....	64,482,986	.....
....	04-1590850	MMV Climate Technology Fund GP	.....	45,566,151	.....	.....	.....	.....	....	.....	45,566,151	.....
....	04-1590850	MM Horizon Savannah Member II LLC	.....	38,901,417	.....	.....	.....	.....	....	.....	38,901,417	.....
....	87-0977058	Barings Hotel Opportunity Venture	.....	35,150,000	.....	.....	.....	.....	....	.....	35,150,000	.....
....	.....	MassMutual Ventures Europe/APAC I L.P.	.....	33,598,657	.....	.....	.....	.....	....	.....	33,598,657	.....
....	04-1590850	BRAVA 5 MM Investor LLC	.....	33,181,830	.....	.....	.....	.....	....	.....	33,181,830	.....
....	86-3661023	Barings Innovations & Growth Real Estate Fund	.....	32,358,597	.....	.....	.....	.....	....	.....	32,358,597	.....
....	.....	Barings Diversified Residential Fund LP ..	.....	30,106,738	.....	.....	.....	.....	....	.....	30,106,738	.....
....	.....	MM Horizon Savannah Member III LLC	.....	28,807,742	.....	.....	.....	.....	....	.....	28,807,742	.....
....	.....	MassMutual Ventures US IV, L.P.	.....	27,694,433	.....	.....	.....	.....	....	.....	27,694,433	.....
....	.....	Counterpointe Ascend Mortgage Lending LLC	.....	26,471,157	.....	.....	.....	.....	....	.....	26,471,157	.....
....	.....	LNL MM 2, LLC	.....	26,336,378	.....	.....	.....	.....	....	.....	26,336,378	.....
....	.....	MM Speedway El Paso Member LLC	.....	25,843,166	.....	.....	.....	.....	....	.....	25,843,166	.....
....	.....	Barings CLO Ltd 2025-VII	.....	24,797,600	.....	.....	.....	.....	....	.....	24,797,600	.....
....	.....	Barings CLO Ltd 2025-III	.....	24,648,300	.....	.....	.....	.....	....	.....	24,648,300	.....
....	04-1590850	MM Ironhead Commerce Center	.....	24,584,705	.....	.....	.....	.....	....	.....	24,584,705	.....
....	04-1590850	MM Breton Village Member LLC	.....	24,079,238	.....	.....	.....	.....	....	.....	24,079,238	.....
....	04-1590850	MM Five50West Member LLC	.....	23,883,208	.....	.....	.....	.....	....	.....	23,883,208	.....
....	82-4059427	Artemis Real Estate Income and Growth Fund II LP	.....	23,696,090	.....	.....	.....	.....	....	.....	23,696,090	.....
....	04-1590850	40 Exchange MM Member LLC	.....	23,665,329	.....	.....	.....	.....	....	.....	23,665,329	.....
....	04-1590850	MM National Self-Storage Program Member LLC	.....	23,064,979	.....	.....	.....	.....	....	.....	23,064,979	.....
....	04-1590850	Barings Real Estate European Value Add Fund 3 SCSp	.....	21,646,000	.....	.....	.....	.....	....	.....	21,646,000	.....
....	.....	Barings CLO Ltd 2025-VI	.....	21,050,500	.....	.....	.....	.....	....	.....	21,050,500	.....
....	39-2502808	MM Tokyo BTR1 LLC	.....	19,648,987	.....	.....	.....	.....	....	.....	19,648,987	.....
....	.....	Benchmark 2018-B4	.....	19,374,038	.....	.....	.....	.....	....	.....	19,374,038	.....
....	.....	Babson LP-II	.....	18,804,630	.....	.....	.....	.....	....	.....	18,804,630	.....
....	04-1590850	MM National IOS Program Member LLC	.....	18,134,615	.....	.....	.....	.....	....	.....	18,134,615	.....

SCHEDULE Y

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

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
	38-4096530	Benchmark 2018-B8		17,977,191							17,977,191	
		MM Park City Investor LLC		17,562,780							17,562,780	
	04-1590850	MM SL Willistown LLC		17,428,534							17,428,534	
		Barings Loan Partners CLO-III		16,106,736							16,106,736	
	04-1590850	GIA EU Holdings LLC- GIA Italy SCSp		15,894,840							15,894,840	
		MM The Gilman Member LLC		14,762,111							14,762,111	
		Barings Joondalup Trust		13,077,195							13,077,195	
		MM 425 Montgomery Member LLC		13,001,357							13,001,357	
	04-1590850	Miami Douglas Four MM LLC		11,317,099							11,317,099	
		Barings Umbrella Fund LUX SCSp SICAV RAIF		8,457,039							8,457,039	
		Barings CLO 2025 - IV		8,250,000							8,250,000	
		Barings Middle Market CLO Ltd 2023-II		8,118,000							8,118,000	
		Counterpointe Sustainable Advisors LLC		7,500,000							7,500,000	
		Euro Real Estate Holdings Herleshausen LLC		5,661,026							5,661,026	
		Barings CLO Romeo Warehouse		5,000,000							5,000,000	
		Barings CLO 2021-I		4,519,440							4,519,440	
	04-1590850	Barings Storage Operations Trust		4,494,094							4,494,094	
		Barings Euro CLO 2020-I DAC		4,009,949							4,009,949	
	04-1590850	MM Kannapolis Industrial Member LLC		3,488,629							3,488,629	
	37-15576VH	Barings Euro CLO 2021-I DAC		3,163,094							3,163,094	
	04-1590850	MM Virginian Investor LLC		3,014,220							3,014,220	
	04-1590850	MM Speedway El Paso Member II LLC		2,705,108							2,705,108	
	88-3792609	Barings Centre Street CLO Equity Partnership LP		2,265,861							2,265,861	
	04-1590850	MM Stowe Investor LLC		2,029,019							2,029,019	
	04-1590850	MM Rothesay Holdco US LLC		1,845,666							1,845,666	
	04-1590850	MM Sedona Vortex Investor LLC		1,831,550							1,831,550	
	32-0574045	Washington Gateway Three LLC		1,802,485							1,802,485	
	04-1590850	Euro Real Estate Holdings LLC		1,564,499							1,564,499	
	81-5360103	Landmark Manchester Holdings LLC		1,391,494							1,391,494	
	04-1590850	MM Copper Hill Road LLC		1,329,796							1,329,796	
	45-5401109	Washington Gateway Apartments Venture LLC		1,261,303							1,261,303	
	31-1395344	MM Ascend Life Investor Services, LLC		1,000,000							1,000,000	
	83-1325764	Washington Gateway Two LLC		558,325							558,325	
	82-3307907	Cornbrook PRS Holdings LLC		357,638							357,638	
	13-1935920	BRAVA 5 MALIC Investor LLC		234,720							234,720	
	81-3000420	MM Debt Participations LLC		68,000							68,000	
		MALIC Debt Participations LLC		53,920							53,920	
	04-1590850	MM East South Crossing Member LLC		31,981							31,981	
		Barings Global Private Loan Fund		8,726							8,726	
9999999 Control Totals			0	0	0	0	0	0	XXX	0	0	0

SCHEDULE Y

PART 3 - ULTIMATE CONTROLLING PARTY AND LISTING OF OTHER U.S. INSURANCE GROUPS OR ENTITIES UNDER THAT ULTIMATE CONTROLLING PARTY'S CONTROL

1 Insurers in Holding Company	2 Owners with Greater Than 10% Ownership	3 Ownership Percentage Column 2 of Column 1	4 Granted Disclaimer of Control/ Affiliation of Column 2 Over Column 1 (Yes/No)	5 Ultimate Controlling Party	6 U.S. Insurance Groups or Entities Controlled by Column 5	7 Ownership Percentage (Column 5 of Column 6)	8 Granted Disclaimer of Control/ Affiliation of Column 5 Over Column 6 (Yes/No)
Massachusetts Mutual Life Insurance Company	Massachusetts Mutual Life Insurance Company	100.000	NO	Massachusetts Mutual Life Insurance Company	Massachusetts Mutual Life Insurance Company	100.000	NO
C.M. Life Insurance Company	Massachusetts Mutual Life Insurance Company	100.000	NO	Massachusetts Mutual Life Insurance Company	Massachusetts Mutual Life Insurance Company	100.000	NO
MML Bay State Life Insurance Company	C.M. Life Insurance Company	100.000	NO	Massachusetts Mutual Life Insurance Company	Massachusetts Mutual Life Insurance Company	100.000	NO
MassMutual Ascend Life Insurance Company	Glidepath Holdings Inc.	100.000	NO	Massachusetts Mutual Life Insurance Company	Massachusetts Mutual Life Insurance Company	100.000	NO
Annuity Investors Life Insurance Company	MassMutual Ascend Life Insurance Company	100.000	NO	Massachusetts Mutual Life Insurance Company	Massachusetts Mutual Life Insurance Company	100.000	NO
Manhattan National Life Insurance Company	Manhattan National Holding LLC	100.000	NO	Massachusetts Mutual Life Insurance Company	Massachusetts Mutual Life Insurance Company	100.000	NO

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

REQUIRED FILINGS

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

		Responses
	MARCH FILING	
1.	Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	YES
2.	Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?	YES
3.	Will the confidential Risk-based Capital Report be filed with the state of domicile, if required, by March 1?	YES
4.	Will an Actuarial Opinion be filed by March 1?	YES
	APRIL FILING	
5.	Will Management's Discussion and Analysis be filed by April 1?	YES
6.	Will the Life, Health & Annuity Guaranty Association Assessable Premium Exhibit - Parts 1 and 2 be filed with the state of domicile and the NAIC by April 1? (Not applicable to fraternal benefit societies)	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 Accountant's Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	YES

SUPPLEMENTAL FILINGS

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

	MARCH FILING	
10.	Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1? (Not applicable to fraternal benefit societies)	NO
11.	Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	YES
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?	YES
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

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

26.	Will the Actuarial Opinion required by the Modified Guaranteed Annuity Model Regulation be filed with the state of domicile and electronically with the NAIC by March 1?	NO
27.	Will the Actuarial Certification regarding the use of 2001 Preferred Class Tables required by the Model Regulation Permitting the Recognition of Preferred Mortality Tables for Use in Determining Minimum Reserve Liabilities be filed with the state of domicile and electronically with the NAIC by March 1?	NO
28.	Will the Worker's Compensation Carve-Out Supplement be filed by March 1? (Not applicable to fraternal benefit societies)	NO
29.	Will Supplemental Schedule O be filed with the state of domicile and the NAIC by March 1?	YES
30.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	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?	YES
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?	YES
45.	Will the confidential Executive Summary of the PBR Actuarial Report be filed with the state of domicile by April 1?	YES
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?	YES
	AUGUST FILING	
48.	Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	YES

Explanations:

10. The data for this supplement is not required to be filed.
12. The data for this supplement is not required to be filed.
16. The data for this supplement is not required to be filed.
17. The data for this supplement is not required to be filed.
18. The data for this supplement is not required to be filed.
20. The data for this supplement is not required to be filed.
21. The data for this supplement is not required to be filed.
22. The data for this supplement is not required to be filed.
25. The data for this supplement is not required to be filed.
26. The data for this supplement is not required to be filed.
27. The data for this supplement is not required to be filed.
28. The data for this supplement is not required to be filed.
30. The data for this supplement is not required to be filed.
31. The data for this supplement is not required to be filed.
32. The data for this supplement is not required to be filed.
33. The data for this supplement is not required to be filed.
39. The data for this supplement is not required to be filed.
41. The data for this supplement is not required to be filed.
42. The data for this supplement is not required to be filed.
46. The data for this supplement is not required to be filed.

Bar Codes:

10. SIS Stockholder Information Supplement [Document Identifier 420]

12. Trusteed Surplus Statement [Document Identifier 490]

16. Actuarial Opinion on Separate Accounts Funding Guaranteed Minimum Benefit [Document Identifier 443]

17. Actuarial Opinion on Synthetic Guaranteed Investment Contracts [Document Identifier 444]

18. Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV [Document Identifier 445]

20. Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI [Document Identifier 447]

21. Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI [Document Identifier 448]

22. Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value) [Document Identifier 449]

25. Actuarial Certifications Related to Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities [Document Identifier 452]

26. Modified Guaranteed Annuity Model Regulation [Document Identifier 453]

27. Actuarial Certification regarding the use of 2001 Preferred Class Tables required by the Model Regulation Permitting the Recognition of Preferred Mortality Tables for Use in Determining Minimum Reserve Liabilities [Document Identifier 454]

28. Workers' Compensation Carve-Out Supplement [Document Identifier 495]

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

30. Medicare Part D Coverage Supplement [Document Identifier 365]

31. Relief from the five-year rotation requirement for lead audit partner [Document Identifier 224]

32. Relief from the one-year cooling off period for independent CPA [Document Identifier 225]

33. Relief from the Requirements for Audit Committees [Document Identifier 226]

39. Credit Insurance Experience Exhibit [Document Identifier 230]

41. Supplemental Health Care Exhibit (Parts 1 and 2) [Document Identifier 216]

42. Actuarial Memorandum Required by Actuarial Guideline XXXVIII 8D [Document Identifier 435]

46. Life Summary of the PBR Actuarial Report [Document Identifier 458]

OVERFLOW PAGE FOR WRITE-INS

Additional Write-ins for Assets Line11

	Current Year			Prior Year
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
1104.			0	0
1105.			0	0
1197. Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0

Additional Write-ins for Assets Line 25

	Current Year			Prior Year
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
2504.			0	0
2505. Accounts receivable	20,345,816	9,891,250	10,454,566	18,277,854
2597. Summary of remaining write-ins for Line 25 from overflow page	20,345,816	9,891,250	10,454,566	18,277,854

Additional Write-ins for Liabilities Line 25

	1 Current Year	2 Prior Year
2504. Tax Credit Deferred Gain	6,090,764	
2597. Summary of remaining write-ins for Line 25 from overflow page	6,090,764	0

Additional Write-ins for Summary of Operations Line 8.3

	1 Current Year	2 Prior Year
08.304. Miscellaneous income	12,038,298	2,356,664
08.397. Summary of remaining write-ins for Line 8.3 from overflow page	12,038,298	2,356,664

OVERFLOW PAGE FOR WRITE-INS

Additional Write-ins for Analysis of Operations - Summary Line 8.3

	1 Total	2 Individual Life	3 Group Life	4 Individual Annuities	5 Group Annuities	6 Accident and Health	7 Fraternal	8 Other Lines of Business	9 YRT Mortality Risk Only
08.304. Miscellaneous income	2,829,535			2,749,441	80,094				
08.397. Summary of remaining write-ins for Line 8.3 from overflow page	2,829,535	0	0	2,749,441	80,094	0	0	0	0

Additional Write-ins for Analysis of Operations - Individual Annuities Line 8.3

	1	Deferred				6	7
		2	3	4	5		
	Total	Fixed Annuities	Indexed Annuities	Variable Annuities with Guarantees	Variable Annuities Without Guarantees	Life Contingent Payout (Immediate and Annuitizations)	Other Annuities
08.304. Miscellaneous income	2,749,441	1,054,745	1,676,759			17,937	
08.397. Summary of remaining write-ins for Line 8.3 from overflow page	2,749,441	1,054,745	1,676,759	0	0	17,937	0

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SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF Alabama
NAIC Group Code 0435 NAIC Company Code 63312
ADDRESS (City, State and Zip Code) Cincinnati , OH 45202
Person Completing This Exhibit
Title Telephone Number

1	2	3	4	5	6	7	8	9	10	Policies Issued Through 2022				Policies Issued in 2023; 2024; 2025			
										11	Incurred Claims		14	15	Incurred Claims		18
Compliance with OBRA	Policy Form Number	Standardized Medicare Supplement Benefit Plan	Medicare Select	Plan Character-istics	Date Approved	Date Approval Withdrawn	Date Last Amended	Date Closed	Policy Marketing Trade Name	Premiums Earned	12 Amount	13 Percent of Premiums Earned	Number of Covered Lives	Premiums Earned	16 Amount	17 Percent of Premiums Earned	Number of Covered Lives
YES	1MSPD0001	D	NO	0034000	03/11/2004	03/11/2004		05/31/2010	MEDICARE SUPPLEMENT	14	(485)	(3,440.9)	0	0	0	0.0	0
YES	1MSPF0001	F	NO	0034000	03/11/2004	03/11/2004		05/31/2010	MEDICARE SUPPLEMENT	6,555	10,144	154.7	1	0	0	0.0	0
YES	1MSPG0001	G	NO	0034000	03/11/2004	03/11/2004		05/31/2010	MEDICARE SUPPLEMENT	6,497	4,046	62.3	1	0	0	0.0	0
0199999. Total experience on individual policies										13,066	13,705	104.9	2	0	0	0.0	0

GENERAL INTERROGATORIES

1. If response in Column 1 is no, give full and complete details
2. Claims address and contact person provided to the Secretary of Health and Human Services as required by 42 U.S.C. 1395ss(c)(3)(E) for this state.
   2.1 Address: 11200 Lakeline Blvd Suite 100 Austin , TX 78717
   2.2 Contact Person and Phone Number: David Brosig 186-645-9427-2
3. Billing address and contact person for user fees established under 41 U.S.C. 1395u(h)(3)(B).
   3.1 Address: 11200 Lakeline Blvd Suite 100 Austin , TX 78717
   3.2 Contact Person and Phone Number: David Brosig 186-645-9427-2
4. Explain any policies identified above as policy type "O".

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SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF Colorado
NAIC Group Code 0435 NAIC Company Code 63312
ADDRESS (City, State and Zip Code) Cincinnati , OH 45202
Person Completing This Exhibit
Title Telephone Number

1	2	3	4	5	6	7	8	9	10	Policies Issued Through 2022				Policies Issued in 2023; 2024; 2025			
										11	Incurred Claims		14	15	Incurred Claims		18
Compliance with OBRA	Policy Form Number	Standardized Medicare Supplement Benefit Plan	Medicare Select	Plan Character-istics	Date Approved	Date Approval Withdrawn	Date Last Amended	Date Closed	Policy Marketing Trade Name	Premiums Earned	12 Amount	13 Percent of Premiums Earned	Number of Covered Lives	Premiums Earned	16 Amount	17 Percent of Premiums Earned	Number of Covered Lives
YES	1MSPF0001	F	NO	0034060	12/24/2007			05/31/2010	MEDICARE SUPPLEMENT	5,745	1,926	33.5	1	0	0	0.0	0
0199999. Total experience on individual policies										5,745	1,926	33.5	1	0	0	0.0	0

GENERAL INTERROGATORIES

1. If response in Column 1 is no, give full and complete details
2. Claims address and contact person provided to the Secretary of Health and Human Services as required by 42 U.S.C. 1395ss(c)(3)(E) for this state.
   2.1 Address: 11200 Lakeline Blvd Suite 100 Austin , TX 78717
   2.2 Contact Person and Phone Number: David Brosig 186-645-9427-2
3. Billing address and contact person for user fees established under 41 U.S.C. 1395u(h)(3)(B).
   3.1 Address: 11200 Lakeline Blvd Suite 100 Austin , TX 78717
   3.2 Contact Person and Phone Number: David Brosig 186-645-9427-2
4. Explain any policies identified above as policy type "O".

360.CO

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SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF Florida
NAIC Group Code 0435 NAIC Company Code 63312
ADDRESS (City, State and Zip Code) Cincinnati , OH 45202
Person Completing This Exhibit
Title Telephone Number

1	2	3	4	5	6	7	8	9	10	Policies Issued Through 2022				Policies Issued in 2023; 2024; 2025			
										11	Incurred Claims		14	15	Incurred Claims		18
Compliance with OBRA	Policy Form Number	Standardized Medicare Supplement Benefit Plan	Medicare Select	Plan Character-istics	Date Approved	Date Approval Withdrawn	Date Last Amended	Date Closed	Policy Marketing Trade Name	Premiums Earned	12 Amount	13 Percent of Premiums Earned	Number of Covered Lives	Premiums Earned	16 Amount	17 Percent of Premiums Earned	Number of Covered Lives
YES	1MSPC0001	C	NO	0034060	10/19/2006	10/16/2009			MEDICARE SUPPLEMENT	8,689	2,660	30.6	2	0	0	0.0	0
YES	1MSPD0001	D	NO	0034060	10/19/2006	10/16/2009			MEDICARE SUPPLEMENT	57,230	68,449	119.6	19	0	0	0.0	0
YES	1MSPF0001	F	NO	0034060	10/19/2006	10/16/2009			MEDICARE SUPPLEMENT	106,369	109,659	103.1	29	0	0	0.0	0
YES	1MSPG0001	G	NO	0034060	10/19/2006	10/16/2009			MEDICARE SUPPLEMENT	46,645	40,433	86.7	14	0	0	0.0	0
0199999. Total experience on individual policies										218,933	221,200	101.0	64	0	0	0.0	0

GENERAL INTERROGATORIES

1. If response in Column 1 is no, give full and complete details
2. Claims address and contact person provided to the Secretary of Health and Human Services as required by 42 U.S.C. 1395ss(c)(3)(E) for this state.
   2.1 Address: 11200 Lakeline Blvd Suite 100 Austin , TX 78717
   2.2 Contact Person and Phone Number: David Brosig 186-645-9427-2
3. Billing address and contact person for user fees established under 41 U.S.C. 1395u(h)(3)(B).
   3.1 Address: 11200 Lakeline Blvd Suite 100 Austin , TX 78717
   3.2 Contact Person and Phone Number: David Brosig 186-645-9427-2
4. Explain any policies identified above as policy type "O".

6 3 3 1 2 2 0 2 5 3 6 0 1 1 1 0 0

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF Georgia
NAIC Group Code 0435 NAIC Company Code 63312
ADDRESS (City, State and Zip Code) Cincinnati , OH 45202
Person Completing This Exhibit
Title Telephone Number

1	2	3	4	5	6	7	8	9	10	Policies Issued Through 2022				Policies Issued in 2023; 2024; 2025			
										11	Incurred Claims		14	15	Incurred Claims		18
Compliance with OBRA	Policy Form Number	Standardized Medicare Supplement Benefit Plan	Medicare Select	Plan Character-istics	Date Approved	Date Approval Withdrawn	Date Last Amended	Date Closed	Policy Marketing Trade Name	Premiums Earned	12 Amount	13 Percent of Premiums Earned	Number of Covered Lives	Premiums Earned	16 Amount	17 Percent of Premiums Earned	Number of Covered Lives
YES	1MSPD0001	D	NO	0034060	02/25/2004			05/31/2010	MEDICARE SUPPLEMENT	5,114	738	14.4	1	0	0	0.0	0
YES	1MSPG0001	G	NO	0034060	02/25/2004			05/31/2010	MEDICARE SUPPLEMENT	10,181	2,364	23.2	2	0	0	0.0	0
0199999. Total experience on individual policies										15,295	3,102	20.3	3	0	0	0.0	0

GENERAL INTERROGATORIES

1. If response in Column 1 is no, give full and complete details

2. Claims address and contact person provided to the Secretary of Health and Human Services as required by 42 U.S.C. 1395ss(c)(3)(E) for this state.
   2.1 Address: 11200 Lakeline Blvd Suite 100 Austin , TX 78717
   2.2 Contact Person and Phone Number: David Brosig 186-645-9427-2
3. Billing address and contact person for user fees established under 41 U.S.C. 1395u(h)(3)(B).
   3.1 Address: 11200 Lakeline Blvd Suite 100 Austin , TX 78717
   3.2 Contact Person and Phone Number: David Brosig 186-645-9427-2
4. Explain any policies identified above as policy type "O".

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SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF Illinois
NAIC Group Code 0435 NAIC Company Code 63312
ADDRESS (City, State and Zip Code) Cincinnati , OH 45202
Person Completing This Exhibit
Title Telephone Number

1	2	3	4	5	6	7	8	9	10	Policies Issued Through 2022				Policies Issued in 2023; 2024; 2025			
										11	Incurred Claims		14	15	Incurred Claims		18
Compliance with OBRA	Policy Form Number	Standardized Medicare Supplement Benefit Plan	Medicare Select	Plan Character-istics	Date Approved	Date Approval Withdrawn	Date Last Amended	Date Closed	Policy Marketing Trade Name	Premiums Earned	12 Amount	13 Percent of Premiums Earned	Number of Covered Lives	Premiums Earned	16 Amount	17 Percent of Premiums Earned	Number of Covered Lives
YES	1MSPF0001	F	NO	0034060	02/09/2004			05/31/2010	MEDICARE SUPPLEMENT	25,714	12,201	47.4	3	0	0	0.0	0
0199999. Total experience on individual policies										25,714	12,201	47.4	3	0	0	0.0	0

GENERAL INTERROGATORIES

1. If response in Column 1 is no, give full and complete details
2. Claims address and contact person provided to the Secretary of Health and Human Services as required by 42 U.S.C. 1395ss(c)(3)(E) for this state.
   2.1 Address: 11200 Lakeline Blvd Suite 100 Austin , TX 78717
   2.2 Contact Person and Phone Number: David Brosig 186-645-9427-2
3. Billing address and contact person for user fees established under 41 U.S.C. 1395u(h)(3)(B).
   3.1 Address: 11200 Lakeline Blvd Suite 100 Austin , TX 78717
   3.2 Contact Person and Phone Number: David Brosig 186-645-9427-2
4. Explain any policies identified above as policy type "O".

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SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF Indiana
NAIC Group Code 0435 NAIC Company Code 63312
ADDRESS (City, State and Zip Code) Cincinnati , OH 45202
Person Completing This Exhibit
Title Telephone Number

1	2	3	4	5	6	7	8	9	10	Policies Issued Through 2022				Policies Issued in 2023; 2024; 2025			
										11	Incurred Claims		14	15	Incurred Claims		18
Compliance with OBRA	Policy Form Number	Standardized Medicare Supplement Benefit Plan	Medicare Select	Plan Character-istics	Date Approved	Date Approval Withdrawn	Date Last Amended	Date Closed	Policy Marketing Trade Name	Premiums Earned	12 Amount	13 Percent of Premiums Earned	Number of Covered Lives	Premiums Earned	16 Amount	17 Percent of Premiums Earned	Number of Covered Lives
YES	1MSPD0001	D	NO	0034000	12/14/2007			05/31/2010	MEDICARE SUPPLEMENT	28,672	22,626	78.9	6	0	0	0.0	0
YES	1MSPF0001	F	NO	0034000	12/14/2007			05/31/2010	MEDICARE SUPPLEMENT	70,045	59,195	84.5	15	0	0	0.0	0
YES	1MSPG0001	G	NO	0034000	12/14/2007			05/31/2010	MEDICARE SUPPLEMENT	16,638	6,473	38.9	3	0	0	0.0	0
0199999. Total experience on individual policies										115,355	88,294	76.5	24	0	0	0.0	0

GENERAL INTERROGATORIES

1. If response in Column 1 is no, give full and complete details
2. Claims address and contact person provided to the Secretary of Health and Human Services as required by 42 U.S.C. 1395ss(c)(3)(E) for this state.
   2.1 Address: 11200 Lakeline Blvd Suite 100 Austin , TX 78717
   2.2 Contact Person and Phone Number: David Brosig 186-645-9427-2
3. Billing address and contact person for user fees established under 41 U.S.C. 1395u(h)(3)(B).
   3.1 Address: 11200 Lakeline Blvd Suite 100 Austin , TX 78717
   3.2 Contact Person and Phone Number: David Brosig 186-645-9427-2
4. Explain any policies identified above as policy type "O".

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SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF Iowa
NAIC Group Code 0435 NAIC Company Code 63312
ADDRESS (City, State and Zip Code) Cincinnati , OH 45202
Person Completing This Exhibit
Title Telephone Number

1	2	3	4	5	6	7	8	9	10	Policies Issued Through 2022				Policies Issued in 2023; 2024; 2025			
										11	Incurred Claims		14	15	Incurred Claims		18
Compliance with OBRA	Policy Form Number	Standardized Medicare Supplement Benefit Plan	Medicare Select	Plan Character-istics	Date Approved	Date Approval Withdrawn	Date Last Amended	Date Closed	Policy Marketing Trade Name	Premiums Earned	12 Amount	13 Percent of Premiums Earned	Number of Covered Lives	Premiums Earned	16 Amount	17 Percent of Premiums Earned	Number of Covered Lives
YES	1MSPF0001	F	NO	0034000	02/24/2004			05/31/2010	MEDICARE SUPPLEMENT	75,272	40,160	53.4	12	0	0	0.0	0
0199999. Total experience on individual policies										75,272	40,160	53.4	12	0	0	0.0	0

GENERAL INTERROGATORIES

1. If response in Column 1 is no, give full and complete details
2. Claims address and contact person provided to the Secretary of Health and Human Services as required by 42 U.S.C. 1395ss(c)(3)(E) for this state.
   2.1 Address: 11200 Lakeline Blvd Suite 100 Austin , TX 78717
   2.2 Contact Person and Phone Number: David Brosig 186-645-9427-2
3. Billing address and contact person for user fees established under 41 U.S.C. 1395u(h)(3)(B).
   3.1 Address: 11200 Lakeline Blvd Suite 100 Austin , TX 78717
   3.2 Contact Person and Phone Number: David Brosig 186-645-9427-2
4. Explain any policies identified above as policy type "O".

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SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF Kansas
NAIC Group Code 0435 NAIC Company Code 63312
ADDRESS (City, State and Zip Code) Cincinnati , OH 45202
Person Completing This Exhibit
Title Telephone Number

1	2	3	4	5	6	7	8	9	10	Policies Issued Through 2022				Policies Issued in 2023; 2024; 2025			
										11	Incurred Claims		14	15	Incurred Claims		18
Compliance with OBRA	Policy Form Number	Standardized Medicare Supplement Benefit Plan	Medicare Select	Plan Character-istics	Date Approved	Date Approval Withdrawn	Date Last Amended	Date Closed	Policy Marketing Trade Name	Premiums Earned	12 Amount	13 Percent of Premiums Earned	Number of Covered Lives	Premiums Earned	16 Amount	17 Percent of Premiums Earned	Number of Covered Lives
YES	1MSPF0001	F	NO	0034060	12/19/2007			05/31/2010	MEDICARE SUPPLEMENT	45,695	32,304	70.7	6	0	0	0.0	0
YES	1MSPG0001	G	NO	0034060	12/19/2007			05/31/2010	MEDICARE SUPPLEMENT	9,802	19,008	193.9	2	0	0	0.0	0
0199999. Total experience on individual policies										55,497	51,312	92.5	8	0	0	0.0	0

GENERAL INTERROGATORIES

1. If response in Column 1 is no, give full and complete details

2. Claims address and contact person provided to the Secretary of Health and Human Services as required by 42 U.S.C. 1395ss(c)(3)(E) for this state.
   2.1 Address: 11200 Lakeline Blvd Suite 100 Austin , TX 78717
   2.2 Contact Person and Phone Number: David Brosig 186-645-9427-2
3. Billing address and contact person for user fees established under 41 U.S.C. 1395u(h)(3)(B).
   3.1 Address: 11200 Lakeline Blvd Suite 100 Austin , TX 78717
   3.2 Contact Person and Phone Number: David Brosig 186-645-9427-2
4. Explain any policies identified above as policy type "O".

360.KS

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SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF Kentucky
NAIC Group Code 0435 NAIC Company Code 63312
ADDRESS (City, State and Zip Code) Cincinnati , OH 45202
Person Completing This Exhibit
Title Telephone Number

1	2	3	4	5	6	7	8	9	10	Policies Issued Through 2022				Policies Issued in 2023; 2024; 2025			
										11	Incurred Claims		14	15	Incurred Claims		18
Compliance with OBRA	Policy Form Number	Standardized Medicare Supplement Benefit Plan	Medicare Select	Plan Character-istics	Date Approved	Date Approval Withdrawn	Date Last Amended	Date Closed	Policy Marketing Trade Name	Premiums Earned	12 Amount	13 Percent of Premiums Earned	Number of Covered Lives	Premiums Earned	16 Amount	17 Percent of Premiums Earned	Number of Covered Lives
YES	1MSPD0001	D	NO	0034060	02/26/2004			05/31/2010	MEDICARE SUPPLEMENT	0	9	0.0	0	0	0	0.0	0
YES	1MSPF0001	F	NO	0034060	02/26/2004			05/31/2010	MEDICARE SUPPLEMENT	70,164	55,122	78.6	9	0	0	0.0	0
YES	1MSPG0001	G	NO	0034060	02/26/2004			05/31/2010	MEDICARE SUPPLEMENT	10,825	5,714	52.8	2	0	0	0.0	0
0199999. Total experience on individual policies										80,989	60,846	75.1	11	0	0	0.0	0

GENERAL INTERROGATORIES

1. If response in Column 1 is no, give full and complete details
2. Claims address and contact person provided to the Secretary of Health and Human Services as required by 42 U.S.C. 1395ss(c)(3)(E) for this state.
   2.1 Address: 11200 Lakeline Blvd Suite 100 Austin , TX 78717
   2.2 Contact Person and Phone Number: David Brosig 186-645-9427-2
3. Billing address and contact person for user fees established under 41 U.S.C. 1395u(h)(3)(B).
   3.1 Address: 11200 Lakeline Blvd Suite 100 Austin , TX 78717
   3.2 Contact Person and Phone Number: David Brosig 186-645-9427-2
4. Explain any policies identified above as policy type "O".

6 3 3 1 2 2 0 2 5 3 6 0 2 3 1 0 0

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF Michigan.....
NAIC Group Code 0435 ..... NAIC Company Code 63312 .....
ADDRESS (City, State and Zip Code) Cincinnati , OH 45202 .....
Person Completing This Exhibit .....
Title ..... Telephone Number .....

1	2	3	4	5	6	7	8	9	10	Policies Issued Through 2022				Policies Issued in 2023; 2024; 2025			
										11	Incurred Claims		14	15	Incurred Claims		18
Compliance with OBRA	Policy Form Number	Standardized Medicare Supplement Benefit Plan	Medicare Select	Plan Character-istics	Date Approved	Date Approval Withdrawn	Date Last Amended	Date Closed	Policy Marketing Trade Name	Premiums Earned	12 Amount	13 Percent of Premiums Earned	Number of Covered Lives	Premiums Earned	16 Amount	17 Percent of Premiums Earned	Number of Covered Lives

GENERAL INTERROGATORIES

1. If response in Column 1 is no, give full and complete details
   .....
2. Claims address and contact person provided to the Secretary of Health and Human Services as required by 42 U.S.C. 1395ss(c)(3)(E) for this state.
   2.1 Address: 11200 Lakeline Blvd Suite 100 Austin , TX 78717 .....
   2.2 Contact Person and Phone Number: David Brosig 186-645-9427-2 .....
3. Billing address and contact person for user fees established under 41 U.S.C. 1395u(h)(3)(B).
   3.1 Address: 11200 Lakeline Blvd Suite 100 Austin , TX 78717 .....
   3.2 Contact Person and Phone Number: David Brosig 186-645-9427-2 .....
4. Explain any policies identified above as policy type "O". .....

6 3 3 1 2 2 0 2 5 3 6 0 2 6 1 0 0

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF Missouri
NAIC Group Code 0435 NAIC Company Code 63312
ADDRESS (City, State and Zip Code) Cincinnati , OH 45202
Person Completing This Exhibit
Title Telephone Number

1	2	3	4	5	6	7	8	9	10	Policies Issued Through 2022			14	Policies Issued in 2023; 2024; 2025			18
										11	Incurred Claims			15	Incurred Claims		
Compliance with OBRA	Policy Form Number	Standardized Medicare Supplement Benefit Plan	Medicare Select	Plan Character-istics	Date Approved	Date Approval Withdrawn	Date Last Amended	Date Closed	Policy Marketing Trade Name	Premiums Earned	12 Amount	13 Percent of Premiums Earned	Number of Covered Lives	Premiums Earned	16 Amount	17 Percent of Premiums Earned	Number of Covered Lives
YES	1MSPF0001	F	NO	0034060	10/22/2007		05/31/2010	05/31/2010	MEDICARE SUPPLEMENT	32,081	24,194	75.4	7	0	0	0.0	0
0199999. Total experience on individual policies										32,081	24,194	75.4	7	0	0	0.0	0

GENERAL INTERROGATORIES

1. If response in Column 1 is no, give full and complete details
2. Claims address and contact person provided to the Secretary of Health and Human Services as required by 42 U.S.C. 1395ss(c)(3)(E) for this state.
   2.1 Address: 11200 Lakeline Blvd Suite 100 Austin , TX 78717
   2.2 Contact Person and Phone Number: David Brosig 186-645-9427-2
3. Billing address and contact person for user fees established under 41 U.S.C. 1395u(h)(3)(B).
   3.1 Address: 11200 Lakeline Blvd Suite 100 Austin , TX 78717
   3.2 Contact Person and Phone Number: David Brosig 186-645-9427-2
4. Explain any policies identified above as policy type "O".

360.MO

6 3 3 1 2 2 0 2 5 3 6 0 2 8 1 0 0

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF Nebraska
NAIC Group Code 0435 NAIC Company Code 63312
ADDRESS (City, State and Zip Code) Cincinnati , OH 45202
Person Completing This Exhibit
Title Telephone Number

1	2	3	4	5	6	7	8	9	10	Policies Issued Through 2022				Policies Issued in 2023; 2024; 2025			
										11	Incurred Claims		14	15	Incurred Claims		18
Compliance with OBRA	Policy Form Number	Standardized Medicare Supplement Benefit Plan	Medicare Select	Plan Character-istics	Date Approved	Date Approval Withdrawn	Date Last Amended	Date Closed	Policy Marketing Trade Name	Premiums Earned	12 Amount	13 Percent of Premiums Earned	Number of Covered Lives	Premiums Earned	16 Amount	17 Percent of Premiums Earned	Number of Covered Lives
YES	1MSPF0001	F	NO	0034000	10/18/2007			05/31/2010	MEDICARE SUPPLEMENT	11,850	2,802	23.6	2	0	0	0.0	0
0199999. Total experience on individual policies										11,850	2,802	23.6	2	0	0	0.0	0

GENERAL INTERROGATORIES

1. If response in Column 1 is no, give full and complete details
2. Claims address and contact person provided to the Secretary of Health and Human Services as required by 42 U.S.C. 1395ss(c)(3)(E) for this state.
   2.1 Address: 11200 Lakeline Blvd Suite 100 Austin , TX 78717
   2.2 Contact Person and Phone Number: David Brosig 186-645-9427-2
3. Billing address and contact person for user fees established under 41 U.S.C. 1395u(h)(3)(B).
   3.1 Address: 11200 Lakeline Blvd Suite 100 Austin , TX 78717
   3.2 Contact Person and Phone Number: David Brosig 186-645-9427-2
4. Explain any policies identified above as policy type "O".

360.NE

6 3 3 1 2 2 0 2 5 3 6 0 2 9 1 0 0

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF Nevada
NAIC Group Code 0435 NAIC Company Code 63312
ADDRESS (City, State and Zip Code) Cincinnati , OH 45202
Person Completing This Exhibit
Title Telephone Number

1	2	3	4	5	6	7	8	9	10	Policies Issued Through 2022				Policies Issued in 2023; 2024; 2025			
										11	Incurred Claims		14	15	Incurred Claims		18
Compliance with OBRA	Policy Form Number	Standardized Medicare Supplement Benefit Plan	Medicare Select	Plan Character-istics	Date Approved	Date Approval Withdrawn	Date Last Amended	Date Closed	Policy Marketing Trade Name	Premiums Earned	12 Amount	13 Percent of Premiums Earned	Number of Covered Lives	Premiums Earned	16 Amount	17 Percent of Premiums Earned	Number of Covered Lives
YES	1MSPG0001	G	NO	0034000	09/26/2008			05/31/2010	MEDICARE SUPPLEMENT	3,732	2,208	59.2	0	0	0	0.0	0
0199999. Total experience on individual policies										3,732	2,208	59.2	0	0	0	0.0	0

GENERAL INTERROGATORIES

1. If response in Column 1 is no, give full and complete details
2. Claims address and contact person provided to the Secretary of Health and Human Services as required by 42 U.S.C. 1395ss(c)(3)(E) for this state.
   2.1 Address: 11200 Lakeline Blvd Suite 100 Austin , TX 78717
   2.2 Contact Person and Phone Number: David Brosig 186-645-9427-2
3. Billing address and contact person for user fees established under 41 U.S.C. 1395u(h)(3)(B).
   3.1 Address: 11200 Lakeline Blvd Suite 100 Austin , TX 78717
   3.2 Contact Person and Phone Number: David Brosig 186-645-9427-2
4. Explain any policies identified above as policy type "O".

6 3 3 1 2 2 0 2 5 3 6 0 3 0 1 0 0

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF New Hampshire
NAIC Group Code 0435 NAIC Company Code 63312
ADDRESS (City, State and Zip Code) Cincinnati , OH 45202
Person Completing This Exhibit
Title Telephone Number

1	2	3	4	5	6	7	8	9	10	Policies Issued Through 2022				Policies Issued in 2023; 2024; 2025			
										11	Incurred Claims		14	15	Incurred Claims		18
Compliance with OBRA	Policy Form Number	Standardized Medicare Supplement Benefit Plan	Medicare Select	Plan Character-istics	Date Approved	Date Approval Withdrawn	Date Last Amended	Date Closed	Policy Marketing Trade Name	Premiums Earned	12 Amount	13 Percent of Premiums Earned	Number of Covered Lives	Premiums Earned	16 Amount	17 Percent of Premiums Earned	Number of Covered Lives
YES	1MSPD0001	D	NO	0034060	12/06/2007			05/31/2010	MEDICARE SUPPLEMENT	5,104	506	9.9	1	0	0	0.0	0
YES	1MSPF0001	F	NO	0034060	12/06/2007			05/31/2010	MEDICARE SUPPLEMENT	11,784	4,192	35.6	2	0	0	0.0	0
0199999. Total experience on individual policies										16,888	4,698	27.8	3	0	0	0.0	0

GENERAL INTERROGATORIES

1. If response in Column 1 is no, give full and complete details

2. Claims address and contact person provided to the Secretary of Health and Human Services as required by 42 U.S.C. 1395ss(c)(3)(E) for this state.
   2.1 Address: 11200 Lakeline Blvd Suite 100 Austin , TX 78717
   2.2 Contact Person and Phone Number: David Brosig 186-645-9427-2
3. Billing address and contact person for user fees established under 41 U.S.C. 1395u(h)(3)(B).
   3.1 Address: 11200 Lakeline Blvd Suite 100 Austin , TX 78717
   3.2 Contact Person and Phone Number: David Brosig 186-645-9427-2
4. Explain any policies identified above as policy type "O".

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

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF North Carolina
NAIC Group Code 0435 NAIC Company Code 63312
ADDRESS (City, State and Zip Code) Cincinnati , OH 45202
Person Completing This Exhibit
Title Telephone Number

1	2	3	4	5	6	7	8	9	10	Policies Issued Through 2022				Policies Issued in 2023; 2024; 2025			
										11	Incurred Claims		14	15	Incurred Claims		18
Compliance with OBRA	Policy Form Number	Standardized Medicare Supplement Benefit Plan	Medicare Select	Plan Character-istics	Date Approved	Date Approval Withdrawn	Date Last Amended	Date Closed	Policy Marketing Trade Name	Premiums Earned	12 Amount	13 Percent of Premiums Earned	Number of Covered Lives	Premiums Earned	16 Amount	17 Percent of Premiums Earned	Number of Covered Lives
YES	1MSPF0001	F	NO	0034060	02/26/2004			05/31/2010	MEDICARE SUPPLEMENT	124,908	63,786	51.1	15	0	0	0.0	0
YES	1MSPG0001	G	NO	0034000	02/26/2004			05/31/2010	MEDICARE SUPPLEMENT	42,193	7,548	17.9	6	0	0	0.0	0
0199999. Total experience on individual policies										167,101	71,334	42.7	21	0	0	0.0	0

GENERAL INTERROGATORIES

1. If response in Column 1 is no, give full and complete details

2. Claims address and contact person provided to the Secretary of Health and Human Services as required by 42 U.S.C. 1395ss(c)(3)(E) for this state.
   2.1 Address: 11200 Lakeline Blvd Suite 100 Austin , TX 78717
   2.2 Contact Person and Phone Number: David Brosig 186-645-9427-2
3. Billing address and contact person for user fees established under 41 U.S.C. 1395u(h)(3)(B).
   3.1 Address: 11200 Lakeline Blvd Suite 100 Austin , TX 78717
   3.2 Contact Person and Phone Number: David Brosig 186-645-9427-2
4. Explain any policies identified above as policy type "O".

360.NC

6 3 3 1 2 2 0 2 5 3 6 0 3 6 1 0 0

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF Ohio
NAIC Group Code 0435 NAIC Company Code 63312
ADDRESS (City, State and Zip Code) Cincinnati , OH 45202
Person Completing This Exhibit
Title Telephone Number

1	2	3	4	5	6	7	8	9	10	Policies Issued Through 2022				Policies Issued in 2023; 2024; 2025			
										11	Incurred Claims		14	15	Incurred Claims		18
Compliance with OBRA	Policy Form Number	Standardized Medicare Supplement Benefit Plan	Medicare Select	Plan Character-istics	Date Approved	Date Approval Withdrawn	Date Last Amended	Date Closed	Policy Marketing Trade Name	Premiums Earned	12 Amount	13 Percent of Premiums Earned	Number of Covered Lives	Premiums Earned	16 Amount	17 Percent of Premiums Earned	Number of Covered Lives
YES	1MSPC0001	C	NO	0034000	01/23/2004			05/31/2010	MEDICARE SUPPLEMENT	7,633	1,313	17.2	1	0	0	0.0	0
YES	1MSPD0001	D	NO	0034000	01/23/2004			05/31/2010	MEDICARE SUPPLEMENT	18,647	6,058	32.5	3	0	0	0.0	0
YES	1MSPF0001	F	NO	0034000	01/23/2004			05/31/2010	MEDICARE SUPPLEMENT	27,641	14,536	52.6	4	0	0	0.0	0
0199999. Total experience on individual policies										53,921	21,907	40.6	8	0	0	0.0	0

GENERAL INTERROGATORIES

1. If response in Column 1 is no, give full and complete details
2. Claims address and contact person provided to the Secretary of Health and Human Services as required by 42 U.S.C. 1395ss(c)(3)(E) for this state.
   2.1 Address: 11200 Lakeline Blvd Suite 100 Austin , TX 78717
   2.2 Contact Person and Phone Number: David Brosig 186-645-9427-2
3. Billing address and contact person for user fees established under 41 U.S.C. 1395u(h)(3)(B).
   3.1 Address: 11200 Lakeline Blvd Suite 100 Austin , TX 78717
   3.2 Contact Person and Phone Number: David Brosig 186-645-9427-2
4. Explain any policies identified above as policy type "O".

360.OH

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

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF Oklahoma
NAIC Group Code 0435 NAIC Company Code 63312
ADDRESS (City, State and Zip Code) Cincinnati , OH 45202
Person Completing This Exhibit
Title Telephone Number

1	2	3	4	5	6	7	8	9	10	Policies Issued Through 2022				Policies Issued in 2023; 2024; 2025			
										11	Incurred Claims		14	15	Incurred Claims		18
Compliance with OBRA	Policy Form Number	Standardized Medicare Supplement Benefit Plan	Medicare Select	Plan Character-istics	Date Approved	Date Approval Withdrawn	Date Last Amended	Date Closed	Policy Marketing Trade Name	Premiums Earned	12 Amount	13 Percent of Premiums Earned	Number of Covered Lives	Premiums Earned	16 Amount	17 Percent of Premiums Earned	Number of Covered Lives
YES	1MSPF0001	F	NO	0034000	04/26/2004			05/31/2010	MEDICARE SUPPLEMENT	53,050	29,189	55.0	7	0	0	0.0	0
YES	1MSPG0001	G	NO	0034000	04/26/2004			05/31/2010	MEDICARE SUPPLEMENT	15,510	5,349	34.5	3	0	0	0.0	0
0199999. Total experience on individual policies										68,561	34,538	50.4	10	0	0	0.0	0

GENERAL INTERROGATORIES

1. If response in Column 1 is no, give full and complete details

2. Claims address and contact person provided to the Secretary of Health and Human Services as required by 42 U.S.C. 1395ss(c)(3)(E) for this state.
   2.1 Address: 11200 Lakeline Blvd Suite 100 Austin , TX 78717
   2.2 Contact Person and Phone Number: David Brosig 186-645-9427-2
3. Billing address and contact person for user fees established under 41 U.S.C. 1395u(h)(3)(B).
   3.1 Address: 11200 Lakeline Blvd Suite 100 Austin , TX 78717
   3.2 Contact Person and Phone Number: David Brosig 186-645-9427-2
4. Explain any policies identified above as policy type "O".

360.OK

6 3 3 1 2 2 0 2 5 3 6 0 3 8 1 0 0

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF Oregon
NAIC Group Code 0435 NAIC Company Code 63312
ADDRESS (City, State and Zip Code) Cincinnati , OH 45202
Person Completing This Exhibit
Title Telephone Number

1	2	3	4	5	6	7	8	9	10	Policies Issued Through 2022			14	Policies Issued in 2023; 2024; 2025			18
										11	Incurred Claims			15	Incurred Claims		
Compliance with OBRA	Policy Form Number	Standardized Medicare Supplement Benefit Plan	Medicare Select	Plan Character-istics	Date Approved	Date Approval Withdrawn	Date Last Amended	Date Closed	Policy Marketing Trade Name	Premiums Earned	12 Amount	13 Percent of Premiums Earned	Number of Covered Lives	Premiums Earned	16 Amount	17 Percent of Premiums Earned	Number of Covered Lives
YES	1MSPF0001	F	NO	0034060	01/09/2008			05/31/2010	MEDICARE SUPPLEMENT	14,263	2,840	19.9	2	0	0	0.0	0
0199999. Total experience on individual policies										14,263	2,840	19.9	2	0	0	0.0	0

GENERAL INTERROGATORIES

1. If response in Column 1 is no, give full and complete details
2. Claims address and contact person provided to the Secretary of Health and Human Services as required by 42 U.S.C. 1395ss(c)(3)(E) for this state.
   2.1 Address: 11200 Lakeline Blvd Suite 100 Austin , TX 78717
   2.2 Contact Person and Phone Number: David Brosig 186-645-9427-2
3. Billing address and contact person for user fees established under 41 U.S.C. 1395u(h)(3)(B).
   3.1 Address: 11200 Lakeline Blvd Suite 100 Austin , TX 78717
   3.2 Contact Person and Phone Number: David Brosig 186-645-9427-2
4. Explain any policies identified above as policy type "O".

360.OR

6 3 3 1 2 2 0 2 5 3 6 0 3 9 1 0 0

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF Pennsylvania
NAIC Group Code 0435 NAIC Company Code 63312
ADDRESS (City, State and Zip Code) Cincinnati , OH 45202
Person Completing This Exhibit
Title Telephone Number

1	2	3	4	5	6	7	8	9	10	Policies Issued Through 2022				Policies Issued in 2023; 2024; 2025			
										11	Incurred Claims		14	15	Incurred Claims		18
Compliance with OBRA	Policy Form Number	Standardized Medicare Supplement Benefit Plan	Medicare Select	Plan Character-istics	Date Approved	Date Approval Withdrawn	Date Last Amended	Date Closed	Policy Marketing Trade Name	Premiums Earned	12 Amount	13 Percent of Premiums Earned	Number of Covered Lives	Premiums Earned	16 Amount	17 Percent of Premiums Earned	Number of Covered Lives
YES	1MSPD0001	D	NO	0034060	09/30/2008			05/31/2010	MEDICARE SUPPLEMENT	3,109	858	27.6	1	0	0	0.0	0
YES	1MSPF0001	F	NO	0034060	09/30/2008			05/31/2010	MEDICARE SUPPLEMENT	7,119	1,433	20.1	2	0	0	0.0	0
0199999. Total experience on individual policies										10,228	2,291	22.4	3	0	0	0.0	0

GENERAL INTERROGATORIES

1. If response in Column 1 is no, give full and complete details

2. Claims address and contact person provided to the Secretary of Health and Human Services as required by 42 U.S.C. 1395ss(c)(3)(E) for this state.
   2.1 Address: 11200 Lakeline Blvd Suite 100 Austin , TX 78717
   2.2 Contact Person and Phone Number: David Brosig 186-645-9427-2
3. Billing address and contact person for user fees established under 41 U.S.C. 1395u(h)(3)(B).
   3.1 Address: 11200 Lakeline Blvd Suite 100 Austin , TX 78717
   3.2 Contact Person and Phone Number: David Brosig 186-645-9427-2
4. Explain any policies identified above as policy type "O".

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

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF South Carolina
NAIC Group Code 0435 NAIC Company Code 63312
ADDRESS (City, State and Zip Code) Cincinnati , OH 45202
Person Completing This Exhibit
Title Telephone Number

1	2	3	4	5	6	7	8	9	10	Policies Issued Through 2022				Policies Issued in 2023; 2024; 2025			
										11	Incurred Claims		14	15	Incurred Claims		18
Compliance with OBRA	Policy Form Number	Standardized Medicare Supplement Benefit Plan	Medicare Select	Plan Character-istics	Date Approved	Date Approval Withdrawn	Date Last Amended	Date Closed	Policy Marketing Trade Name	Premiums Earned	12 Amount	13 Percent of Premiums Earned	Number of Covered Lives	Premiums Earned	16 Amount	17 Percent of Premiums Earned	Number of Covered Lives
YES	1MSPF0001	F	NO	0034000	02/18/2004			05/31/2010	MEDICARE SUPPLEMENT	51,568	48,945	94.9	8	0	0	0.0	0
YES	1MSPG0001	G	NO	0034000	02/18/2004			05/31/2010	MEDICARE SUPPLEMENT	71,461	38,262	53.5	13	0	0	0.0	0
0199999. Total experience on individual policies										123,029	87,207	70.9	21	0	0	0.0	0

GENERAL INTERROGATORIES

1. If response in Column 1 is no, give full and complete details

2. Claims address and contact person provided to the Secretary of Health and Human Services as required by 42 U.S.C. 1395ss(c)(3)(E) for this state.
   2.1 Address: 11200 Lakeline Blvd Suite 100 Austin , TX 78717
   2.2 Contact Person and Phone Number: David Brosig 186-645-9427-2
3. Billing address and contact person for user fees established under 41 U.S.C. 1395u(h)(3)(B).
   3.1 Address: 11200 Lakeline Blvd Suite 100 Austin , TX 78717
   3.2 Contact Person and Phone Number: David Brosig 186-645-9427-2
4. Explain any policies identified above as policy type "O".

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

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF Tennessee
NAIC Group Code 0435 NAIC Company Code 63312
ADDRESS (City, State and Zip Code) Cincinnati , OH 45202
Person Completing This Exhibit
Title Telephone Number

1	2	3	4	5	6	7	8	9	10	Policies Issued Through 2022				Policies Issued in 2023; 2024; 2025			
										11	Incurred Claims		14	15	Incurred Claims		18
Compliance with OBRA	Policy Form Number	Standardized Medicare Supplement Benefit Plan	Medicare Select	Plan Character-istics	Date Approved	Date Approval Withdrawn	Date Last Amended	Date Closed	Policy Marketing Trade Name	Premiums Earned	12 Amount	13 Percent of Premiums Earned	Number of Covered Lives	Premiums Earned	16 Amount	17 Percent of Premiums Earned	Number of Covered Lives
YES	1MSPF0001	F	NO	0034060	02/13/2004			05/31/2010	MEDICARE SUPPLEMENT	54,483	58,452	107.3	7	0	0	0.0	0
YES	1MSPG0001	G	NO	0034060	02/13/2004			05/31/2010	MEDICARE SUPPLEMENT	6,020	410	6.8	1	0	0	0.0	0
0199999. Total experience on individual policies										60,503	58,861	97.3	8	0	0	0.0	0

GENERAL INTERROGATORIES

1. If response in Column 1 is no, give full and complete details
2. Claims address and contact person provided to the Secretary of Health and Human Services as required by 42 U.S.C. 1395ss(c)(3)(E) for this state.
   2.1 Address: 11200 Lakeline Blvd Suite 100 Austin , TX 78717
   2.2 Contact Person and Phone Number: David Brosig 186-645-9427-2
3. Billing address and contact person for user fees established under 41 U.S.C. 1395u(h)(3)(B).
   3.1 Address: 11200 Lakeline Blvd Suite 100 Austin , TX 78717
   3.2 Contact Person and Phone Number: David Brosig 186-645-9427-2
4. Explain any policies identified above as policy type "O".

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

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF Texas
NAIC Group Code 0435 NAIC Company Code 63312
ADDRESS (City, State and Zip Code) Cincinnati , OH 45202
Person Completing This Exhibit
Title Telephone Number

1	2	3	4	5	6	7	8	9	10	Policies Issued Through 2022				Policies Issued in 2023; 2024; 2025			
										11	Incurred Claims		14	15	Incurred Claims		18
Compliance with OBRA	Policy Form Number	Standardized Medicare Supplement Benefit Plan	Medicare Select	Plan Character-istics	Date Approved	Date Approval Withdrawn	Date Last Amended	Date Closed	Policy Marketing Trade Name	Premiums Earned	12 Amount	13 Percent of Premiums Earned	Number of Covered Lives	Premiums Earned	16 Amount	17 Percent of Premiums Earned	Number of Covered Lives
YES	1MSPA0001	A	NO	0034060	01/09/2004		05/31/2010	05/31/2010	MEDICARE SUPPLEMENT	7,595	8,148	107.3	2	0	0	0.0	0
YES	1MSPF0001	F	NO	0034000	01/09/2004		05/31/2010	05/31/2010	MEDICARE SUPPLEMENT	61,888	20,016	32.3	8	0	0	0.0	0
YES	1MSPG0001	G	NO	0034000	01/09/2004		05/31/2010	05/31/2010	MEDICARE SUPPLEMENT	24,195	7,727	31.9	3	0	0	0.0	0
0199999. Total experience on individual policies										93,679	35,891	38.3	13	0	0	0.0	0

GENERAL INTERROGATORIES

1. If response in Column 1 is no, give full and complete details
2. Claims address and contact person provided to the Secretary of Health and Human Services as required by 42 U.S.C. 1395ss(c)(3)(E) for this state.
   2.1 Address: 11200 Lakeline Blvd Suite 100 Austin , TX 78717
   2.2 Contact Person and Phone Number: David Brosig 186-645-9427-2
3. Billing address and contact person for user fees established under 41 U.S.C. 1395u(h)(3)(B).
   3.1 Address: 11200 Lakeline Blvd Suite 100 Austin , TX 78717
   3.2 Contact Person and Phone Number: David Brosig 186-645-9427-2
4. Explain any policies identified above as policy type "O".

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

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF Utah
NAIC Group Code 0435 NAIC Company Code 63312
ADDRESS (City, State and Zip Code) Cincinnati , OH 45202
Person Completing This Exhibit
Title Telephone Number

1	2	3	4	5	6	7	8	9	10	Policies Issued Through 2022				Policies Issued in 2023; 2024; 2025			
										11	Incurred Claims		14	15	Incurred Claims		18
Compliance with OBRA	Policy Form Number	Standardized Medicare Supplement Benefit Plan	Medicare Select	Plan Character-istics	Date Approved	Date Approval Withdrawn	Date Last Amended	Date Closed	Policy Marketing Trade Name	Premiums Earned	12 Amount	13 Percent of Premiums Earned	Number of Covered Lives	Premiums Earned	16 Amount	17 Percent of Premiums Earned	Number of Covered Lives
YES	1MSPF0001	F	NO	0034000	01/24/2008			05/31/2010	MEDICARE SUPPLEMENT	25,170	7,927	31.5	4	0	0	0.0	0
YES	1MSPG0001	G	NO	0034000	01/24/2008			05/31/2010	MEDICARE SUPPLEMENT	15,747	3,610	22.9	3	0	0	0.0	0
0199999. Total experience on individual policies										40,917	11,538	28.2	7	0	0	0.0	0

GENERAL INTERROGATORIES

1. If response in Column 1 is no, give full and complete details

2. Claims address and contact person provided to the Secretary of Health and Human Services as required by 42 U.S.C. 1395ss(c)(3)(E) for this state.
   2.1 Address: 11200 Lakeline Blvd Suite 100 Austin , TX 78717
   2.2 Contact Person and Phone Number: David Brosig 186-645-9427-2
3. Billing address and contact person for user fees established under 41 U.S.C. 1395u(h)(3)(B).
   3.1 Address: 11200 Lakeline Blvd Suite 100 Austin , TX 78717
   3.2 Contact Person and Phone Number: David Brosig 186-645-9427-2
4. Explain any policies identified above as policy type "O".

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

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF Virginia
NAIC Group Code 0435 NAIC Company Code 63312
ADDRESS (City, State and Zip Code) Cincinnati , OH 45202
Person Completing This Exhibit
Title Telephone Number

1	2	3	4	5	6	7	8	9	10	Policies Issued Through 2022				Policies Issued in 2023; 2024; 2025			
										11	Incurred Claims		14	15	Incurred Claims		18
Compliance with OBRA	Policy Form Number	Standardized Medicare Supplement Benefit Plan	Medicare Select	Plan Character-istics	Date Approved	Date Approval Withdrawn	Date Last Amended	Date Closed	Policy Marketing Trade Name	Premiums Earned	12 Amount	13 Percent of Premiums Earned	Number of Covered Lives	Premiums Earned	16 Amount	17 Percent of Premiums Earned	Number of Covered Lives
YES	1MSPF0001	F	NO	0034000	02/04/2009			05/31/2010	MEDICARE SUPPLEMENT	22,097	1,958	8.9	3	0	0	0.0	0
0199999. Total experience on individual policies										22,097	1,958	8.9	3	0	0	0.0	0

GENERAL INTERROGATORIES

1. If response in Column 1 is no, give full and complete details
2. Claims address and contact person provided to the Secretary of Health and Human Services as required by 42 U.S.C. 1395ss(c)(3)(E) for this state.
   2.1 Address: 11200 Lakeline Blvd Suite 100 Austin , TX 78717
   2.2 Contact Person and Phone Number: David Brosig 186-645-9427-2
3. Billing address and contact person for user fees established under 41 U.S.C. 1395u(h)(3)(B).
   3.1 Address: 11200 Lakeline Blvd Suite 100 Austin , TX 78717
   3.2 Contact Person and Phone Number: David Brosig 186-645-9427-2
4. Explain any policies identified above as policy type "O".

6 3 3 1 2 2 0 2 5 3 6 0 4 9 1 0 0

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF West Virginia
NAIC Group Code 0435 NAIC Company Code 63312
ADDRESS (City, State and Zip Code) Cincinnati , OH 45202
Person Completing This Exhibit
Title Telephone Number

1	2	3	4	5	6	7	8	9	10	Policies Issued Through 2022			14	Policies Issued in 2023; 2024; 2025			18
										11	Incurred Claims			15	Incurred Claims		
Compliance with OBRA	Policy Form Number	Standardized Medicare Supplement Benefit Plan	Medicare Select	Plan Character-istics	Date Approved	Date Approval Withdrawn	Date Last Amended	Date Closed	Policy Marketing Trade Name	Premiums Earned	12 Amount	13 Percent of Premiums Earned	Number of Covered Lives	Premiums Earned	16 Amount	17 Percent of Premiums Earned	Number of Covered Lives
YES	1MSPF0001	F	NO	0034000	10/29/2007			05/31/2010	MEDICARE SUPPLEMENT	6,298	575	9.1	1	0	0	0.0	0
0199999. Total experience on individual policies										6,298	575	9.1	1	0	0	0.0	0

GENERAL INTERROGATORIES

1. If response in Column 1 is no, give full and complete details
2. Claims address and contact person provided to the Secretary of Health and Human Services as required by 42 U.S.C. 1395ss(c)(3)(E) for this state.
   2.1 Address: 11200 Lakeline Blvd Suite 100 Austin , TX 78717
   2.2 Contact Person and Phone Number: David Brosig 186-645-9427-2
3. Billing address and contact person for user fees established under 41 U.S.C. 1395u(h)(3)(B).
   3.1 Address: 11200 Lakeline Blvd Suite 100 Austin , TX 78717
   3.2 Contact Person and Phone Number: David Brosig 186-645-9427-2
4. Explain any policies identified above as policy type "O".

360.WV

6 3 3 1 2 2 0 2 5 3 6 0 5 0 1 0 0

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF Wisconsin
NAIC Group Code 0435 NAIC Company Code 63312
ADDRESS (City, State and Zip Code) Cincinnati , OH 45202
Person Completing This Exhibit
Title Telephone Number

1	2	3	4	5	6	7	8	9	10	Policies Issued Through 2022				Policies Issued in 2023; 2024; 2025			
										11	Incurred Claims		14	15	Incurred Claims		18
Compliance with OBRA	Policy Form Number	Standardized Medicare Supplement Benefit Plan	Medicare Select	Plan Character-istics	Date Approved	Date Approval Withdrawn	Date Last Amended	Date Closed	Policy Marketing Trade Name	Premiums Earned	12 Amount	13 Percent of Premiums Earned	Number of Covered Lives	Premiums Earned	16 Amount	17 Percent of Premiums Earned	Number of Covered Lives
YES	1MSP-WI	0	NO	0034060	03/30/2009			05/31/2010	MEDICARE SUPPLEMENT	36,106	43,823	121.4	5	0	0	0.0	0
0199999. Total experience on individual policies										36,106	43,823	121.4	5	0	0	0.0	0

GENERAL INTERROGATORIES

1. If response in Column 1 is no, give full and complete details
2. Claims address and contact person provided to the Secretary of Health and Human Services as required by 42 U.S.C. 1395ss(c)(3)(E) for this state.
   2.1 Address: 11200 Lakeline Blvd Suite 100 Austin , TX 78717
   2.2 Contact Person and Phone Number: David Brosig 186-645-9427-2
3. Billing address and contact person for user fees established under 41 U.S.C. 1395u(h)(3)(B).
   3.1 Address: 11200 Lakeline Blvd Suite 100 Austin , TX 78717
   3.2 Contact Person and Phone Number: David Brosig 186-645-9427-2
4. Explain any policies identified above as policy type "O".

VM-20 Reserves Supplement - Part 1A

N O N E

VM-20 Reserves Supplement - Part 1B

N O N E

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

VM-20 RESERVES SUPPLEMENT – PART 2

Life PBR Exemption
For The Year Ended December 31, 2025
(To Be Filed by March 1)

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

1. Has the company been allowed a Life PBR Exemption from the reserve requirements of VM-20 of the Valuation Manual by their state of domicile? ..... Yes [ ] No [ ]

2. If the response to Question 1 is "Yes", then check the source of the "Life PBR Exemption" definition? (Check either 2.1, 2.2 or 2.3)

   2.1 NAIC Adopted VM [ ]

   2.2 State Statute (SVL) [ ] Complete items "a" and "b" as appropriate.

   a. Is the criteria in the State Statute (SVL) different from the NAIC adopted VM? ..... Yes [ ] No [ ]

   b. If the answer to “a” above is “Yes”, provide the criteria the state has used to allow the Life PBR Exemption (e.g., Group/Legal Entity criteria) and the minimum reserve requirements that are required by the state of domicile (if the minimum reserve requirements are the same as the Adopted VM, write SAME AS NAIC VM):

   .....

   2.3 State Regulation [ ] Complete items "a" and "b" as appropriate.

   a. Is the criteria in the State Regulation different from the NAIC adopted VM? ..... Yes [ ] No [ ]

   b. If the answer to "a" above is "Yes", provide the criteria of the state’s Life PBR Exemption that the company has met and the minimum reserve requirements that are required by the state of domicile (if the minimum reserve requirements are the same as the Adopted VM, write SAME AS NAIC VM):

   .....

3. If the criteria for the "Life PBR Exemption" is the same as or substantially similar to the NAIC adopted VM (i.e., Question 2.1 is checked or Question 2.2.a is "No" or Question 2.3.a is "No"), then provide the most recent year that the company filed a statement of exemption that was allowed. If such calendar year is not the current calendar year for this statement, also provide confirmation that the company meets the criteria for utilizing an ongoing statement of exemption, meaning that none of the following apply:
   1) the company fails to meet either of the conditions in VM Section II, Subsection 1.G.2,
   2) the policies exempted contain those in VM Section II, Subsection 1.G.3, or
   3) the domiciliary commissioner contacted the company prior to Sept. 1 and notified them that the statement of exemption was not allowed:

   .....

VM-20 RESERVES SUPPLEMENT – PART 3

Other Exclusions from Life PBR
For The Year Ended December 31, 2025
(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 [ ]

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 [ ]

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

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

SCHEDULE O SUPPLEMENT

For The Year Ended December 31, 2025
(To Be Filed by March 1)

Of The MASSMUTUAL ASCEND LIFE INSURANCE COMPANY
ADDRESS (City, State and Zip Code) Cincinnati , OH 45202
NAIC Group Code 0435 NAIC Company Code 63312 Employer's Identification Number (FEIN) 13-1935920

SUPPLEMENTAL SCHEDULE O - PART 1

Development of Incurred Losses
($000 Omitted)

Section A - Group Accident and Health

Years in Which Losses Were Incurred	Cumulative Net Amounts Paid Policyholders				
	1 2021	2 2022	3 2023	4 2024	5 2025(a)
1. Prior	(5)	(5)	(5)	(5)	
2. 2021	(5)				
3. 2022	XXX				
4. 2023	XXX	XXX			
5. 2024	XXX	XXX	XXX		
6. 2025	XXX	XXX	XXX	XXX	

Section B - Other Accident and Health

1. Prior	6,164	6,664	8,615	10,348	11,645
2. 2021	413	1,160	1,878	2,578	3,009
3. 2022	XXX	173	931	1,425	1,899
4. 2023	XXX	XXX	638	1,865	2,972
5. 2024	XXX	XXX	XXX	760	2,343
6. 2025	XXX	XXX	XXX	XXX	488

Section C - Credit Accident and Health

1. Prior					
2. 2021					
3. 2022	XXX				
4. 2023	XXX	XXX			
5. 2024	XXX	XXX	XXX		
6. 2025	XXX	XXX	XXX	XXX	

NONE

Section D -

1. Prior					
2. 2021					
3. 2022	XXX				
4. 2023	XXX	XXX			
5. 2024	XXX	XXX	XXX		
6. 2025	XXX	XXX	XXX	XXX	

NONE

Section E -

1. Prior					
2. 2021					
3. 2022	XXX				
4. 2023	XXX	XXX			
5. 2024	XXX	XXX	XXX		
6. 2025	XXX	XXX	XXX	XXX	

NONE

Section F -

1. Prior					
2. 2021					
3. 2022	XXX				
4. 2023	XXX	XXX			
5. 2024	XXX	XXX	XXX		
6. 2025	XXX	XXX	XXX	XXX	

NONE

Section G -

1. Prior					
2. 2021					
3. 2022	XXX				
4. 2023	XXX	XXX			
5. 2024	XXX	XXX	XXX		
6. 2025	XXX	XXX	XXX	XXX	

NONE

(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

Years in Which Losses Were Incurred	Net Amounts Paid for Cost Containment Expenses				
	1 2021	2 2022	3 2023	4 2024	5 2025
1. Prior	NONE				
2. 2021					
3. 2022	XXX				
4. 2023	XXX	XXX			
5. 2024	XXX	XXX	XXX		
6. 2025	XXX	XXX	XXX	XXX	

Section B - Other Accident and Health

1. Prior	NONE				
2. 2021					
3. 2022	XXX				
4. 2023	XXX	XXX			
5. 2024	XXX	XXX	XXX		
6. 2025	XXX	XXX	XXX	XXX	

Section C - Credit Accident and Health

1. Prior	NONE				
2. 2021					
3. 2022	XXX				
4. 2023	XXX	XXX			
5. 2024	XXX	XXX	XXX		
6. 2025	XXX	XXX	XXX	XXX	

Section D -

1. Prior	NONE				
2. 2021					
3. 2022	XXX				
4. 2023	XXX	XXX			
5. 2024	XXX	XXX	XXX		
6. 2025	XXX	XXX	XXX	XXX	

Section E -

1. Prior	NONE				
2. 2021					
3. 2022	XXX				
4. 2023	XXX	XXX			
5. 2024	XXX	XXX	XXX		
6. 2025	XXX	XXX	XXX	XXX	

Section F -

1. Prior	NONE				
2. 2021					
3. 2022	XXX				
4. 2023	XXX	XXX			
5. 2024	XXX	XXX	XXX		
6. 2025	XXX	XXX	XXX	XXX	

Section G -

1. Prior	NONE				
2. 2021					
3. 2022	XXX				
4. 2023	XXX	XXX			
5. 2024	XXX	XXX	XXX		
6. 2025	XXX	XXX	XXX	XXX	

SCHEDULE O SUPPLEMENT

SUPPLEMENTAL SCHEDULE O - PART 3

Development of Incurred Losses

($000 Omitted)

Section A - Group Accident and Health

Years in Which Losses Were Incurred	Sum of Net Cumulative Amount Paid Policyholders and Claim Liability and Reserve Outstanding at End of Year				
	1 2021	2 2022	3 2023	4 2024	5 2025
1. 2021	(4)	0	0	XXX	XXX
2. 2022	XXX	2	0	0	XXX
3. 2023	XXX	XXX	3	0	
4. 2024	XXX	XXX	XXX	4	
5. 2025	XXX	XXX	XXX	XXX	4

Section B - Other Accident and Health

1. 2021	3,684	2,950	3,785	XXX	XXX
2. 2022	XXX	4,150	2,796	2,785	XXX
3. 2023	XXX	XXX	5,392	5,095	5,826
4. 2024	XXX	XXX	XXX	6,955	7,158
5. 2025	XXX	XXX	XXX	XXX	3,834

Section C - Credit Accident and Health

1. 2021				XXX	XXX
2. 2022	XXX				XXX
3. 2023	XXX				
4. 2024	XXX	XXX	XXX		
5. 2025	XXX	XXX	XXX	XXX	

NONE

Section D -

1. 2021				XXX	XXX
2. 2022	XXX				XXX
3. 2023	XXX				
4. 2024	XXX	XXX	XXX		
5. 2025	XXX	XXX	XXX	XXX	

NONE

Section E -

1. 2021				XXX	XXX
2. 2022	XXX				XXX
3. 2023	XXX				
4. 2024	XXX	XXX	XXX		
5. 2025	XXX	XXX	XXX	XXX	

NONE

Section F -

1. 2021				XXX	XXX
2. 2022	XXX				XXX
3. 2023	XXX				
4. 2024	XXX	XXX	XXX		
5. 2025	XXX	XXX	XXX	XXX	

NONE

Section G -

1. 2021				XXX	XXX
2. 2022	XXX				XXX
3. 2023	XXX				
4. 2024	XXX	XXX	XXX		
5. 2025	XXX	XXX	XXX	XXX	

NONE

SCHEDULE O SUPPLEMENT

SUPPLEMENTAL SCHEDULE O - PART 4

Development of Incurred Losses

($000 Omitted)

Section A - Group Accident and Health

Years in Which Losses Were Incurred	Sum of Net Cumulative Amount Paid Policyholders, Cost Containment Expenses, and Claim and Cost Containment Liability and Reserve Outstanding at End of Year				
	1 2021	2 2022	3	4 2024	5 2025
1. 2021					
2. 2022	XXX				
3. 2023	XXX	XXX			
4. 2024	XXX	XXX	XXX		
5. 2025	XXX	XXX	XXX	XXX	

NONE

Section B - Other Accident and Health

1. 2021					
2. 2022	XXX				
3. 2023	XXX	XXX			
4. 2024	XXX	XXX	XXX		
5. 2025	XXX	XXX	XXX	XXX	

NONE

Section C - Credit Accident and Health

1. 2021					
2. 2022	XXX				
3. 2023	XXX	XXX			
4. 2024	XXX	XXX	XXX		
5. 2025	XXX	XXX	XXX	XXX	

NONE

Section D -

1. 2021					
2. 2022	XXX				
3. 2023	XXX	XXX			
4. 2024	XXX	XXX	XXX		
5. 2025	XXX	XXX	XXX	XXX	

NONE

Section E -

1. 2021					
2. 2022	XXX				
3. 2023	XXX	XXX			
4. 2024	XXX	XXX	XXX		
5. 2025	XXX	XXX	XXX	XXX	

NONE

Section F -

1. 2021					
2. 2022	XXX				
3. 2023	XXX	XXX			
4. 2024	XXX	XXX	XXX		
5. 2025	XXX	XXX	XXX	XXX	

NONE

Section G -

1. 2021					
2. 2022	XXX				
3. 2023	XXX	XXX			
4. 2024	XXX	XXX	XXX		
5. 2025	XXX	XXX	XXX	XXX	

NONE

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	Standard Factor	4,444
3. Individual Annuity	Standard Factor	176,077
4. Supplementary Contracts		
5. Credit Life		
6. Group Life	Standard Factor	17
7. Group Annuities	Standard Factor	2,756
8 Group Accident and Health	Other	4
9 Credit Accident and Health		0
10. Other Accident and Health	Other	16,282
11. Total		199,580

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

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

HEALTH SUPPLEMENTS

For The Year Ended December 31, 2025
(To Be Filed by March 1)

Of The MASSMUTUAL ASCEND LIFE INSURANCE COMPANY .....
ADDRESS (City, State and Zip Code) Cincinnati , OH 45202 .....
NAIC Group Code 0435 ..... NAIC Company Code 63312 ..... Employer's ID Number 13-1935920 .....

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

ANALYSIS OF OPERATIONS BY LINES OF BUSINESS

		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
			2	3				Federal Employees Health							
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
1.	Net premium income	9,586,581,369											2,726,406		9,583,854,963
2.	Change in unearned premium reserves and reserve for rate credit	0													
3.	Fee-for-service (net of $ medical expenses)	0													XXX
4.	Risk revenue	0													XXX
5.	Aggregate write-ins for other health care related revenues	124,078	0	0	5,676	0	0	0	0	0	0	0	118,364	38	XXX
6.	Aggregate write-ins for other non-health care related revenues	181,821,675	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	181,821,675
7.	Total revenues (Lines 1 to 6)	9,768,527,122	0	0	5,676	0	0	0	0	0	0	0	2,844,770	38	9,765,676,638
8.	Hospital/medical benefits	5,011,503			889,001							6,630	4,115,872		XXX
9.	Other professional services	0													XXX
10.	Outside referrals	0													XXX
11.	Emergency room and out-of-area	0													XXX
12.	Prescription drugs	0													XXX
13.	Aggregate write-ins for other hospital and medical	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX
14.	Incentive pool, withhold adjustments and bonus amounts	0													XXX
15.	Subtotal (Lines 8 to 14)	5,011,503	0	0	889,001	0	0	0	0	0	0	6,630	4,115,872	0	XXX
16.	Net reinsurance recoveries	(218,080)			889,001							6,630	(1,113,711)		XXX
17.	Total medical and hospital (Lines 15 minus 16)	5,229,583	0	0	0	0	0	0	0	0	0	0	5,229,583	0	XXX
18.	Non-health claims (net)	4,562,656,478	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,562,656,478
19.	Claims adjustment expenses including $ cost containment expenses	460,012,598			5,676							0	634,004	38	459,372,880
20.	General administrative expenses	203,908,612													203,908,612
21.	Increase in reserves for accident and health contracts	1,453,236											1,453,236		XXX
22.	Increase in reserves for life contracts	7,101,204,178	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7,101,204,178
23.	Total underwriting deductions (Lines 17 to 22)	12,334,464,685	0	0	5,676	0	0	0	0	0	0	0	7,316,823	38	12,327,142,148
24.	Net underwriting gain or (loss) (Line 7 minus Line 23)	(2,565,937,563)	0	0	0	0	0	0	0	0	0	0	(4,472,053)	0	(2,561,465,510)
	DETAILS OF WRITE-INS														
0501.	Commissions and expense allowances on reinsurance ceded	124,078	0		5,676							0	118,364	38	XXX
0502.															XXX
0503.															XXX
0598.	Summary of remaining write-ins for Line 5 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX
0599.	Totals (Lines 0501 through 0503 plus 0598) (Line 5 above)	124,078	0	0	5,676	0	0	0	0	0	0	0	118,364	38	XXX
0601.	Commissions and expense allowances on reinsurance ceded	103,284,167	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	103,284,167
0602.	Contractual rider fee income	59,413,487	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	59,413,487
0603.	Charges and fees for deposit-type contracts	7,847,441	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7,847,441
0698.	Summary of remaining write-ins for Line 6 from overflow page	11,276,580	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	11,276,580
0699.	Totals (Lines 0601 through 0603 plus 0698) (Line 6 above)	181,821,675	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	181,821,675
1301.															XXX
1302.															XXX
1303.															XXX
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX
1399.	Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

OVERFLOW PAGE FOR WRITE-INS

Additional Write-ins for Analysis of Operations Line 6

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		2	3											
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
0604. Interest on company-owned life insurance	7,427,799	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7,427,799
0605. Reinsurance experience refund	1,019,246	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,019,246
0606. Miscellaneous income	2,829,535	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,829,535
0697. Summary of remaining write-ins for Line 6 from overflow page	11,276,580	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	11,276,580

Health Supplement - Exhibit 3 - Health Care Receivables

N O N E

Health Supplement - Exhibit 3A - Health Care Receivables Collected and Accrued

N O N E

6 3 3 1 2 2 0 2 5 6 0 0 0 1 1 0 0

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF: Alabama

NAIC Group Code 0435 NAIC Company Code 63312

MCAS LINE OF BUSINESS	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	YES
8. Other health	NO
9. Private flood	NO
10. Private passenger auto	NO
11. Short-term limited duration health plans	NO
12. Travel	NO
13. Pet insurance plans	NO

6 3 3 1 2 2 0 2 5 6 0 0 0 2 1 0 0

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF: Alaska

NAIC Group Code 0435 NAIC Company Code 63312

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability income	NO
2. Health	NO
3. Homeowners	NO
4. Individual annuity	YES
5. Individual life	NO
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
13. Pet insurance plans	NO

6 3 3 1 2 2 0 2 5 6 0 0 0 3 1 0 0

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF: Arizona

NAIC Group Code 0435 NAIC Company Code 63312

MCAS LINE OF BUSINESS	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	YES
8. Other health	NO
9. Private flood	NO
10. Private passenger auto	NO
11. Short-term limited duration health plans	NO
12. Travel	NO
13. Pet insurance plans	NO

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

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF: Arkansas

NAIC Group Code 0435 NAIC Company Code 63312

MCAS LINE OF BUSINESS	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	YES
8. Other health	NO
9. Private flood	NO
10. Private passenger auto	NO
11. Short-term limited duration health plans	NO
12. Travel	NO
13. Pet insurance plans	NO

6 3 3 1 2 2 0 2 5 6 0 0 0 5 1 0 0

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF: California

NAIC Group Code 0435 NAIC Company Code 63312

MCAS LINE OF BUSINESS	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	YES
8. Other health	NO
9. Private flood	NO
10. Private passenger auto	NO
11. Short-term limited duration health plans	NO
12. Travel	NO
13. Pet insurance plans	NO

6 3 3 1 2 2 0 2 5 6 0 0 0 6 1 0 0

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF: Colorado

NAIC Group Code 0435 NAIC Company Code 63312

MCAS LINE OF BUSINESS	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	YES
8. Other health	NO
9. Private flood	NO
10. Private passenger auto	NO
11. Short-term limited duration health plans	NO
12. Travel	NO
13. Pet insurance plans	NO

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

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF: Connecticut

NAIC Group Code 0435 NAIC Company Code 63312

MCAS LINE OF BUSINESS	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	YES
8. Other health	NO
9. Private flood	NO
10. Private passenger auto	NO
11. Short-term limited duration health plans	NO
12. Travel	NO
13. Pet insurance plans	NO

6 3 3 1 2 2 0 2 5 6 0 0 0 8 1 0 0

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF: Delaware

NAIC Group Code 0435 NAIC Company Code 63312

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability income	NO
2. Health	NO
3. Homeowners	NO
4. Individual annuity	YES
5. Individual life	NO
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
13. Pet insurance plans	NO

6 3 3 1 2 2 0 2 5 6 0 0 0 9 1 0 0

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF: District of Columbia

NAIC Group Code 0435 NAIC Company Code 63312

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability income	NO
2. Health	NO
3. Homeowners	NO
4. Individual annuity	YES
5. Individual life	NO
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
13. Pet insurance plans	NO

6 3 3 1 2 2 0 2 5 6 0 0 1 0 1 0 0

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF: Florida

NAIC Group Code 0435 NAIC Company Code 63312

MCAS LINE OF BUSINESS	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	YES
8. Other health	NO
9. Private flood	NO
10. Private passenger auto	NO
11. Short-term limited duration health plans	NO
12. Travel	NO
13. Pet insurance plans	NO

6 3 3 1 2 2 0 2 5 6 0 0 1 1 1 0 0

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF: Georgia

NAIC Group Code 0435 NAIC Company Code 63312

MCAS LINE OF BUSINESS	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	YES
8. Other health	NO
9. Private flood	NO
10. Private passenger auto	NO
11. Short-term limited duration health plans	NO
12. Travel	NO
13. Pet insurance plans	NO

6 3 3 1 2 2 0 2 5 6 0 0 1 2 1 0 0

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF: Hawaii

NAIC Group Code 0435 NAIC Company Code 63312

MCAS LINE OF BUSINESS	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
13. Pet insurance plans	NO

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SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF: Idaho

NAIC Group Code 0435 NAIC Company Code 63312

MCAS LINE OF BUSINESS	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	YES
8. Other health	NO
9. Private flood	NO
10. Private passenger auto	NO
11. Short-term limited duration health plans	NO
12. Travel	NO
13. Pet insurance plans	NO

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

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF: Illinois

NAIC Group Code 0435 NAIC Company Code 63312

MCAS LINE OF BUSINESS	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	YES
8. Other health	NO
9. Private flood	NO
10. Private passenger auto	NO
11. Short-term limited duration health plans	NO
12. Travel	NO
13. Pet insurance plans	NO

6 3 3 1 2 2 0 2 5 6 0 0 1 5 1 0 0

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF: Indiana

NAIC Group Code 0435 NAIC Company Code 63312

MCAS LINE OF BUSINESS	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	YES
8. Other health	NO
9. Private flood	NO
10. Private passenger auto	NO
11. Short-term limited duration health plans	NO
12. Travel	NO
13. Pet insurance plans	NO

6 3 3 1 2 2 0 2 5 6 0 0 1 6 1 0 0

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF: Iowa

NAIC Group Code 0435 NAIC Company Code 63312

MCAS LINE OF BUSINESS	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	YES
8. Other health	NO
9. Private flood	NO
10. Private passenger auto	NO
11. Short-term limited duration health plans	NO
12. Travel	NO
13. Pet insurance plans	NO

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

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF: Kansas

NAIC Group Code 0435 NAIC Company Code 63312

MCAS LINE OF BUSINESS	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	YES
8. Other health	NO
9. Private flood	NO
10. Private passenger auto	NO
11. Short-term limited duration health plans	NO
12. Travel	NO
13. Pet insurance plans	NO

6 3 3 1 2 2 0 2 5 6 0 0 1 8 1 0 0

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF: Kentucky

NAIC Group Code 0435 NAIC Company Code 63312

MCAS LINE OF BUSINESS	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
13. Pet insurance plans	NO

6 3 3 1 2 2 0 2 5 6 0 0 1 9 1 0 0

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF: Louisiana

NAIC Group Code 0435 NAIC Company Code 63312

MCAS LINE OF BUSINESS	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
13. Pet insurance plans	NO

6 3 3 1 2 2 0 2 5 6 0 0 2 0 1 0 0

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF: Maine

NAIC Group Code 0435 NAIC Company Code 63312

MCAS LINE OF BUSINESS	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	YES
8. Other health	NO
9. Private flood	NO
10. Private passenger auto	NO
11. Short-term limited duration health plans	NO
12. Travel	NO
13. Pet insurance plans	NO

6 3 3 1 2 2 0 2 5 6 0 0 2 1 1 0 0

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF: Maryland

NAIC Group Code 0435 NAIC Company Code 63312

MCAS LINE OF BUSINESS	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	YES
8. Other health	NO
9. Private flood	NO
10. Private passenger auto	NO
11. Short-term limited duration health plans	NO
12. Travel	NO
13. Pet insurance plans	NO

6 3 3 1 2 2 0 2 5 6 0 0 2 2 1 0 0

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF: Massachusetts

NAIC Group Code 0435 NAIC Company Code 63312

MCAS LINE OF BUSINESS	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
13. Pet insurance plans	NO

6 3 3 1 2 2 0 2 5 6 0 0 2 3 1 0 0

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF: Michigan

NAIC Group Code 0435 NAIC Company Code 63312

MCAS LINE OF BUSINESS	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
13. Pet insurance plans	NO

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

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF: Minnesota

NAIC Group Code 0435 NAIC Company Code 63312

MCAS LINE OF BUSINESS	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	YES
8. Other health	NO
9. Private flood	NO
10. Private passenger auto	NO
11. Short-term limited duration health plans	NO
12. Travel	NO
13. Pet insurance plans	NO

6 3 3 1 2 2 0 2 5 6 0 0 2 5 1 0 0

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF: Mississippi

NAIC Group Code 0435 NAIC Company Code 63312

MCAS LINE OF BUSINESS	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	YES
8. Other health	NO
9. Private flood	NO
10. Private passenger auto	NO
11. Short-term limited duration health plans	NO
12. Travel	NO
13. Pet insurance plans	NO

6 3 3 1 2 2 0 2 5 6 0 0 2 6 1 0 0

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF: Missouri

NAIC Group Code 0435 NAIC Company Code 63312

MCAS LINE OF BUSINESS	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	YES
8. Other health	NO
9. Private flood	NO
10. Private passenger auto	NO
11. Short-term limited duration health plans	NO
12. Travel	NO
13. Pet insurance plans	NO

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

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF: Montana

NAIC Group Code 0435 NAIC Company Code 63312

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability income	NO
2. Health	NO
3. Homeowners	NO
4. Individual annuity	YES
5. Individual life	NO
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
13. Pet insurance plans	NO

6 3 3 1 2 2 0 2 5 6 0 0 2 8 1 0 0

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF: Nebraska

NAIC Group Code 0435 NAIC Company Code 63312

MCAS LINE OF BUSINESS	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	YES
8. Other health	NO
9. Private flood	NO
10. Private passenger auto	NO
11. Short-term limited duration health plans	NO
12. Travel	NO
13. Pet insurance plans	NO

6 3 3 1 2 2 0 2 5 6 0 0 2 9 1 0 0

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF: Nevada

NAIC Group Code 0435 NAIC Company Code 63312

MCAS LINE OF BUSINESS	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
13. Pet insurance plans	NO

6 3 3 1 2 2 0 2 5 6 0 0 3 0 1 0 0

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF: New Hampshire

NAIC Group Code 0435 NAIC Company Code 63312

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

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SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF: New Jersey

NAIC Group Code 0435 NAIC Company Code 63312

MCAS LINE OF BUSINESS	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	YES
8. Other health	NO
9. Private flood	NO
10. Private passenger auto	NO
11. Short-term limited duration health plans	NO
12. Travel	NO
13. Pet insurance plans	NO

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SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF: New Mexico

NAIC Group Code 0435 NAIC Company Code 63312

MCAS LINE OF BUSINESS	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
13. Pet insurance plans	NO

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SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF: New York

NAIC Group Code 0435 NAIC Company Code 63312

MCAS LINE OF BUSINESS	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	YES
8. Other health	NO
9. Private flood	NO
10. Private passenger auto	NO
11. Short-term limited duration health plans	NO
12. Travel	NO
13. Pet insurance plans	NO

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

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF: North Carolina

NAIC Group Code 0435 NAIC Company Code 63312

MCAS LINE OF BUSINESS	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	YES
8. Other health	NO
9. Private flood	NO
10. Private passenger auto	NO
11. Short-term limited duration health plans	NO
12. Travel	NO
13. Pet insurance plans	NO

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SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF: North Dakota

NAIC Group Code 0435 NAIC Company Code 63312

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability income	NO
2. Health	NO
3. Homeowners	NO
4. Individual annuity	YES
5. Individual life	NO
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
13. Pet insurance plans	NO

6 3 3 1 2 2 0 2 5 6 0 0 3 6 1 0 0

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF: Ohio

NAIC Group Code 0435 NAIC Company Code 63312

MCAS LINE OF BUSINESS	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	YES
8. Other health	NO
9. Private flood	NO
10. Private passenger auto	NO
11. Short-term limited duration health plans	NO
12. Travel	NO
13. Pet insurance plans	NO

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SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF: Oklahoma

NAIC Group Code 0435 NAIC Company Code 63312

	MCAS LINE OF BUSINESS	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	YES
8.	Other health	NO
9.	Private flood	NO
10.	Private passenger auto	NO
11.	Short-term limited duration health plans	NO
12.	Travel	NO
13.	Pet insurance plans	NO

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SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF: Oregon

NAIC Group Code 0435 NAIC Company Code 63312

MCAS LINE OF BUSINESS	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	YES
8. Other health	NO
9. Private flood	NO
10. Private passenger auto	NO
11. Short-term limited duration health plans	NO
12. Travel	NO
13. Pet insurance plans	NO

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SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF: Pennsylvania

NAIC Group Code 0435 NAIC Company Code 63312

MCAS LINE OF BUSINESS	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	YES
8. Other health	NO
9. Private flood	NO
10. Private passenger auto	NO
11. Short-term limited duration health plans	NO
12. Travel	NO
13. Pet insurance plans	NO

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

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF: Rhode Island

NAIC Group Code 0435 NAIC Company Code 63312

MCAS LINE OF BUSINESS	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	YES
8. Other health	NO
9. Private flood	NO
10. Private passenger auto	NO
11. Short-term limited duration health plans	NO
12. Travel	NO
13. Pet insurance plans	NO

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

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF: South Carolina

NAIC Group Code 0435 NAIC Company Code 63312

MCAS LINE OF BUSINESS	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	YES
8. Other health	NO
9. Private flood	NO
10. Private passenger auto	NO
11. Short-term limited duration health plans	NO
12. Travel	NO
13. Pet insurance plans	NO

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

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF: South Dakota

NAIC Group Code 0435 NAIC Company Code 63312

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability income	NO
2. Health	NO
3. Homeowners	NO
4. Individual annuity	YES
5. Individual life	NO
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
13. Pet insurance plans	NO

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

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF: Tennessee

NAIC Group Code 0435 NAIC Company Code 63312

MCAS LINE OF BUSINESS	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	YES
8. Other health	NO
9. Private flood	NO
10. Private passenger auto	NO
11. Short-term limited duration health plans	NO
12. Travel	NO
13. Pet insurance plans	NO

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

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF: Texas

NAIC Group Code 0435 NAIC Company Code 63312

MCAS LINE OF BUSINESS	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	YES
8. Other health	NO
9. Private flood	NO
10. Private passenger auto	NO
11. Short-term limited duration health plans	NO
12. Travel	NO
13. Pet insurance plans	NO

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

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF: Utah

NAIC Group Code 0435 NAIC Company Code 63312

MCAS LINE OF BUSINESS	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
13. Pet insurance plans	NO

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

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF: Vermont

NAIC Group Code 0435 NAIC Company Code 63312

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

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

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF: Virginia

NAIC Group Code 0435 NAIC Company Code 63312

MCAS LINE OF BUSINESS	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	YES
8. Other health	NO
9. Private flood	NO
10. Private passenger auto	NO
11. Short-term limited duration health plans	NO
12. Travel	NO
13. Pet insurance plans	NO

6 3 3 1 2 2 0 2 5 6 0 0 4 8 1 0 0

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF: Washington

NAIC Group Code 0435 NAIC Company Code 63312

MCAS LINE OF BUSINESS	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	YES
8. Other health	NO
9. Private flood	NO
10. Private passenger auto	NO
11. Short-term limited duration health plans	NO
12. Travel	NO
13. Pet insurance plans	NO

6 3 3 1 2 2 0 2 5 6 0 0 4 9 1 0 0

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF: West Virginia

NAIC Group Code 0435 NAIC Company Code 63312

MCAS LINE OF BUSINESS	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
13. Pet insurance plans	NO

6 3 3 1 2 2 0 2 5 6 0 0 5 0 1 0 0

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF: Wisconsin

NAIC Group Code 0435 NAIC Company Code 63312

MCAS LINE OF BUSINESS	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	YES
8. Other health	NO
9. Private flood	NO
10. Private passenger auto	NO
11. Short-term limited duration health plans	NO
12. Travel	NO
13. Pet insurance plans	NO

6 3 3 1 2 2 0 2 5 6 0 0 5 1 1 0 0

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF: Wyoming

NAIC Group Code 0435 NAIC Company Code 63312

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability income	NO
2. Health	NO
3. Homeowners	NO
4. Individual annuity	YES
5. Individual life	NO
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
13. Pet insurance plans	NO

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

SUPPLEMENT FOR THE YEAR 2025 OF THE MASSMUTUAL ASCEND LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
(To Be Filed by March 1)

FOR THE STATE OF: Puerto Rico

NAIC Group Code 0435 NAIC Company Code 63312

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability income	NO
2. Health	NO
3. Homeowners	NO
4. Individual annuity	YES
5. Individual life	NO
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
13. Pet insurance plans	NO