



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

Universal Guaranty Life Insurance Company

NAIC Group Code _____ (Current) _____ (Prior) NAIC Company Code 70130 Employer's ID Number 31-0727974

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 11/15/1966 Commenced Business 12/31/1966

Statutory Home Office 65 East State Street, Suite 2100, Columbus, OH, US 43215-4260
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 111 W Main Street
(Street and Number) 217-241-6300
Stanford, KY, US 40484-1253 (Area Code) (Telephone Number)
(City or Town, State, Country and Zip Code)

Mail Address P.O. Box 410, Stanford, KY, US 40484-1253
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 111 W Main Street
(Street and Number) 217-241-6300
Stanford, KY, US 40484-1253 (Area Code) (Telephone Number)
(City or Town, State, Country and Zip Code)

Internet Website Address www.utgins.com

Statutory Statement Contact Nolan Lee Wesley, 217-241-6300
(Name) (Area Code) (Telephone Number)
accounting@utgins.com, 888-686-6567
(E-mail Address) (FAX Number)

OFFICERS

President Daniel Thomas Roberts CFO Theodore Clayton Miller
Secretary Bradley John Betack

OTHER

Jacob Joncarl Andrew, Chief Investment Officer Michael Keith Borden, Chief Operating Officer Jesse Thomas Correll, Chairman & CEO
Casey Jonathan Willis, Vice President Donald Shay Pendencygraft, Vice President Theodore Clayton Miller, Senior Vice President & CFO
Micheal Wayne Taylor, Assistant Vice President Douglas Paul Ditto, Vice President

DIRECTORS OR TRUSTEES

Preston Howard Correll John Michael Cortines Jesse Thomas Correll
Thomas Francis Darden II Thomas Eugene Harmon Peter Loyd Ochs
Gabriel John Molnar Charles Wesley Perry #

State of Kentucky SS
County of Lincoln

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.

Daniel Thomas Roberts
President

Bradley John Betack
Secretary

Theodore Clayton Miller
CFO

Subscribed and sworn to before me this _____ day of _____

- a. Is this an original filing? Yes [X] No []
b. If no,
1. State the amendment number.....
2. Date filed02/24/2026
3. Number of pages attached.....



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF Alabama

DURING THE YEAR 2025

NAIC Company Code 70130

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	18										
2. Whole	6,209		698	114	9,113	9,925	150,710	13	16,673		169,219
3. Term	2,150						5,689		826		6,515
4. Indexed											
5. Universal	26,388										
6. Universal with secondary guarantees											
7. Variable											
8. Variable universal											
9. Credit											
10. Other											
11. Total individual life	34,765		698	114	9,113	9,925	156,399	1,849	18,403		176,651
Group Life											
12. Whole											
13. Term	180										
14. Universal											
15. Variable											
16. Variable universal											
17. Credit											
18. Other											
19. Total group life	180										
Individual Annuities											
20. Fixed	1,945								35,612		37,557
21. Indexed											
22. Variable with guarantees											
23. Variable without guarantees											
24. Life contingent payout											
25. Other											
26. Total individual annuities	1,945								35,612		37,557
Group Annuities											
27. Fixed											
28. Indexed											
29. Variable with guarantees											
30. Variable without guarantees											
31. Life contingent payout											
32. Other											
33. Total group annuities											
Accident and Health											
34. Comprehensive individual	(d)	(f)						XXX	XXX	XXX	
35. Comprehensive group	(d)	(f)						XXX	XXX	XXX	
36. Medicare supplement	(d)	(f)						XXX	XXX	XXX	
37. Vision only	(d)	(f)						XXX	XXX	XXX	
38. Dental only	(d)	(f)						XXX	XXX	XXX	
39. Federal employees health benefits plan	(d)	(f)						XXX	XXX	XXX	
40. Title XVIII Medicare	(d)	(e, f)						XXX	XXX	XXX	
41. Title XIX Medicaid	(d)	(f)						XXX	XXX	XXX	
42. Credit A&H	(d)	(f)						XXX	XXX	XXX	
43. Disability income	(d)	(f)						XXX	XXX	XXX	
44. Long-term care	(d)	(f)						XXX	XXX	XXX	
45. Other health	(d)	(f)						XXX	XXX	XXX	
46. Total accident and health								XXX	XXX	XXX	
47. Total	36,890 (c)		698	114	9,113	9,925	192,011	1,849	51,931		245,791

24.AL

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code 0000 BUSINESS IN THE STATE OF Alabama DURING THE YEAR 2025 NAIC Company Code 70130

Line of Business	13 Incurred During Current Year	13 Claims Settled During Current Year								22 Unpaid December 31, Current Year	22 Policy Exhibit							
		Totals Paid				Reduction by Compromise		Amount Rejected			Total Settled During Current Year		Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount		23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount		
		Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount		Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount		
Individual Life																		
1. Industrial	13	13							13									
2. Whole	162,356	152,547	104					104	152,547	24,234								
3. Term	5,689	5,689	2					2	5,689									
4. Indexed																		
5. Universal																		
6. Universal with secondary guarantees																		
7. Variable																		
8. Variable universal																		
9. Credit																		
10. Other																		
11. Total individual life	168,058	158,249	107					107	158,249	24,234			(102)	(55,234)	1,724	4,622,073		
Group Life																		
12. Whole																		
13. Term																		
14. Universal																		
15. Variable																		
16. Variable universal																		
17. Credit																	(a)	
18. Other																		
19. Total group life																	7,500	
Individual Annuities																		
20. Fixed	35,612	35,612	2					2	35,612				(2)	(34,888)	18	93,929		
21. Indexed																		
22. Variable with guarantees																		
23. Variable without guarantees																		
24. Life contingent payout																		
25. Other																		
26. Total individual annuities	35,612	35,612	2					2	35,612				(2)	(34,888)	18	93,929		
Group Annuities																		
27. Fixed																		
28. Indexed																		
29. Variable with guarantees																		
30. Variable without guarantees																		
31. Life contingent payout																		
32. Other																		
33. Total group annuities																		
Accident and Health																		
34. Comprehensive individual (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
35. Comprehensive group (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
36. Medicare supplement (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
37. Vision only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
38. Dental only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
39. Federal employees health benefits plan (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
40. Title XVIII Medicare (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
41. Title XIX Medicaid (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
42. Credit A&H (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
43. Disability income (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
44. Long-term care (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
45. Other health (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
46. Total accident and health	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
47. Total	203,670	193,861	109					109	193,861	24,234			(104)	(90,122)	1,743	4,723,502		

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

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

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

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

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

(f) For health business report Direct Premiums Earned: Comprehensive Individual \$; Comprehensive 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 \$

24.1.AL



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF Alaska

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members				7 Total (Col. 3+4+5+6)	Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other		8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial												
2. Whole	160		23				23	5,000				5,000
3. Term												
4. Indexed												
5. Universal												
6. Universal with secondary guarantees												
7. Variable												
8. Variable universal												
9. Credit												
10. Other												
11. Total individual life	160		23				23	5,000				5,000
Group Life												
12. Whole												
13. Term												
14. Universal												
15. Variable												
16. Variable universal												
17. Credit												
18. Other												
19. Total group life												
Individual Annuities												
20. Fixed	80											
21. Indexed												
22. Variable with guarantees												
23. Variable without guarantees												
24. Life contingent payout												
25. Other												
26. Total individual annuities	80											
Group Annuities												
27. Fixed												
28. Indexed												
29. Variable with guarantees												
30. Variable without guarantees												
31. Life contingent payout												
32. Other												
33. Total group annuities												
Accident and Health												
34. Comprehensive individual	(d)	(f)						XXX	XXX	XXX		
35. Comprehensive group	(d)	(f)						XXX	XXX	XXX		
36. Medicare supplement	(d)	(f)						XXX	XXX	XXX		
37. Vision only	(d)	(f)						XXX	XXX	XXX		
38. Dental only	(d)	(f)						XXX	XXX	XXX		
39. Federal employees health benefits plan	(d)	(f)						XXX	XXX	XXX		
40. Title XVIII Medicare	(d)	(e, f)						XXX	XXX	XXX		
41. Title XIX Medicaid	(d)	(f)						XXX	XXX	XXX		
42. Credit A&H	(d)	(f)						XXX	XXX	XXX		
43. Disability income	(d)	(f)						XXX	XXX	XXX		
44. Long-term care	(d)	(f)						XXX	XXX	XXX		
45. Other health	(d)	(f)						XXX	XXX	XXX		
46. Total accident and health								XXX	XXX	XXX		
47. Total	240 (c)		23				23	5,000				5,000

24.AK

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF Alaska

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit						
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)		
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount	
		14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount								
Individual Life																	
1. Industrial																	
2. Whole	5,000		1	5,000					1	5,000			(1)	(3,360)	12	33,057	
3. Term													(1)	(3,963)	2	14,642	
4. Indexed																	
5. Universal																	
6. Universal with secondary guarantees																	
7. Variable																	
8. Variable universal																	
9. Credit																	
10. Other																	
11. Total individual life	5,000		1	5,000					1	5,000			(2)	(7,323)	14	47,699	
Group Life																	
12. Whole																	
13. Term																	
14. Universal																	
15. Variable																	
16. Variable universal																	
17. Credit																(a)	
18. Other																	
19. Total group life																	
Individual Annuities																	
20. Fixed													(1)	(5,041)	3	25,666	
21. Indexed																	
22. Variable with guarantees																	
23. Variable without guarantees																	
24. Life contingent payout																	
25. Other																	
26. Total individual annuities													(1)	(5,041)	3	25,666	
Group Annuities																	
27. Fixed																	
28. Indexed																	
29. Variable with guarantees																	
30. Variable without guarantees																	
31. Life contingent payout																	
32. Other																	
33. Total group annuities																	
Accident and Health																	
34. Comprehensive individual (d)		XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)		XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
37. Vision only (d)		XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H (d)		XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)		XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
44. Long-term care (d)		XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
45. Other health (d)		XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
46. Total accident and health		XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
47. Total	5,000		1	5,000					1	5,000			(3)	(12,364)	17	73,365	

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

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

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

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

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

(f) For health business report Direct Premiums Earned: Comprehensive Individual \$ _____; Comprehensive 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 \$ _____.

24.1.AK



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF Arizona

DURING THE YEAR 2025

NAIC Company Code 70130

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	(32)							2,000			2,000
2. Whole	5,268		936	547	129	1,612	10,000	1,000	5,195		16,195
3. Term											
4. Indexed											
5. Universal	8,421										
6. Universal with secondary guarantees											
7. Variable											
8. Variable universal											
9. Credit											
10. Other											
11. Total individual life	13,657		936	547	129	1,612	12,000	1,000	5,195		18,195
Group Life											
12. Whole											
13. Term											
14. Universal											
15. Variable											
16. Variable universal											
17. Credit											
18. Other											
19. Total group life											
Individual Annuities											
20. Fixed	780								18,706		18,706
21. Indexed											
22. Variable with guarantees											
23. Variable without guarantees											
24. Life contingent payout											
25. Other											
26. Total individual annuities	780								18,706		18,706
Group Annuities											
27. Fixed											
28. Indexed											
29. Variable with guarantees											
30. Variable without guarantees											
31. Life contingent payout											
32. Other											
33. Total group annuities											
Accident and Health											
34. Comprehensive individual	(d)	(f)						XXX	XXX	XXX	
35. Comprehensive group	(d)	(f)						XXX	XXX	XXX	
36. Medicare supplement	(d)	(f)						XXX	XXX	XXX	
37. Vision only	(d)	(f)						XXX	XXX	XXX	
38. Dental only	(d)	(f)						XXX	XXX	XXX	
39. Federal employees health benefits plan	(d)	(f)						XXX	XXX	XXX	
40. Title XVIII Medicare	(d)	(e, f)						XXX	XXX	XXX	
41. Title XIX Medicaid	(d)	(f)						XXX	XXX	XXX	
42. Credit A&H	(d)	(f)						XXX	XXX	XXX	
43. Disability income	(d)	(f)						XXX	XXX	XXX	
44. Long-term care	(d)	(f)						XXX	XXX	XXX	
45. Other health	(d)	(f)						XXX	XXX	XXX	
46. Total accident and health								XXX	XXX	XXX	
47. Total	14,437 (c)		936	547	129	1,612	12,000	1,000	23,901		36,901

24.AZ

**ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE) (Continued)^(b)**

NAIC Group Code 0000 BUSINESS IN THE STATE OF Arizona DURING THE YEAR 2025 NAIC Company Code 70130

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit						
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	23 Issued During Year		25 Other Changes to In Force (Net)		27 In Force December 31, Current Year (b)		
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			24	26	28	28			
		14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount		Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	
Individual Life																	
1. Industrial	2,000	2,000					1	2,000					(1)	(2,000)	11	9,250	
2. Whole	11,000	11,000					2	11,000					(7)	(36,632)	139	873,041	
3. Term													(2)	(60,308)	13	74,713	
4. Indexed																	
5. Universal																	
6. Universal with secondary guarantees														1,214	22	1,444,460	
7. Variable																	
8. Variable universal																	
9. Credit																	
10. Other																	
11. Total individual life	13,000	13,000	3					3	13,000					(10)	(97,726)	185	2,401,464
Group Life																	
12. Whole																	
13. Term																	
14. Universal																	
15. Variable																	
16. Variable universal																	
17. Credit																	(a)
18. Other																	
19. Total group life																	
Individual Annuities																	
20. Fixed														(1)	(27,125)	11	125,852
21. Indexed																	
22. Variable with guarantees																	
23. Variable without guarantees																	
24. Life contingent payout																	
25. Other																	
26. Total individual annuities														(1)	(27,125)	11	125,852
Group Annuities																	
27. Fixed																	
28. Indexed																	
29. Variable with guarantees																	
30. Variable without guarantees																	
31. Life contingent payout																	
32. Other																	
33. Total group annuities																	
Accident and Health																	
34. Comprehensive individual (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
35. Comprehensive group (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
36. Medicare supplement (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
37. Vision only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
38. Dental only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
39. Federal employees health benefits plan (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
40. Title XVIII Medicare (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
41. Title XIX Medicaid (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
42. Credit A&H (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
43. Disability income (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
44. Long-term care (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
45. Other health (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
46. Total accident and health	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
47. Total	13,000	13,000	3					3	13,000					(11)	(124,851)	196	2,527,316

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

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

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

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

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

(f) For health business report Direct Premiums Earned: Comprehensive Individual \$ _____; Comprehensive 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 \$ _____.

24.1.AZ



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF Arkansas

DURING THE YEAR 2025

NAIC Company Code 70130

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	1,443							10,000	3,691	1,643	15,334
2. Whole	18,545		472	160	1,355	1,987	104,468	1,260	11,686		117,414
3. Term	342						9,582	4,638	41,810		56,030
4. Indexed											
5. Universal	16,395									2,244	2,244
6. Universal with secondary guarantees											
7. Variable											
8. Variable universal											
9. Credit											
10. Other											
11. Total individual life	36,725		472	160	1,355	1,987	124,050	9,589	57,383		191,022
Group Life											
12. Whole											
13. Term											
14. Universal											
15. Variable											
16. Variable universal											
17. Credit											
18. Other											
19. Total group life											
Individual Annuities											
20. Fixed	80							1,991			1,991
21. Indexed											
22. Variable with guarantees											
23. Variable without guarantees											
24. Life contingent payout											
25. Other											
26. Total individual annuities	80							1,991			1,991
Group Annuities											
27. Fixed											
28. Indexed											
29. Variable with guarantees											
30. Variable without guarantees											
31. Life contingent payout											
32. Other											
33. Total group annuities											
Accident and Health											
34. Comprehensive individual	(d)	(f)						XXX	XXX	XXX	
35. Comprehensive group	(d)	(f)						XXX	XXX	XXX	
36. Medicare supplement	(d)	(f)						XXX	XXX	XXX	
37. Vision only	(d)	(f)						XXX	XXX	XXX	
38. Dental only	(d)	(f)						XXX	XXX	XXX	
39. Federal employees health benefits plan	(d)	(f)						XXX	XXX	XXX	
40. Title XVIII Medicare	(d)	(e, f)						XXX	XXX	XXX	
41. Title XIX Medicaid	(d)	(f)						XXX	XXX	XXX	
42. Credit A&H	(d)	(f)						XXX	XXX	XXX	
43. Disability income	(d)	(f)						XXX	XXX	XXX	
44. Long-term care	(d)	(f)						XXX	XXX	XXX	
45. Other health	(d)	(f)						XXX	XXX	XXX	
46. Total accident and health								XXX	XXX	XXX	
47. Total	36,805 (c)		472	160	1,355	1,987	126,041	9,589	57,383		193,013

24-AR

**ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE) (Continued)^(b)**

NAIC Group Code 0000

BUSINESS IN THE STATE OF Arkansas

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	13 Incurred During Current Year	13 Claims Settled During Current Year								22 Unpaid December 31, Current Year	22 Policy Exhibit					
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		14 Number of Pols/Certs	15 Amount	16 Number of Pols/Certs	17 Amount	18 Number of Pols/Certs	19 Amount	20 Number of Pols/Certs	21 Amount		23 Number of Pols/Certs	24 Amount	25 Number of Pols/Certs	26 Amount	27 Number of Pols/Certs	28 Amount
Individual Life																
1. Industrial	13,691	42	13,691					42	13,691	1,500			(60)	(48,999)	1,340	1,003,460
2. Whole	104,178	18	120,588					18	120,588	9,040			(28)	(105,195)	811	2,570,490
3. Term	9,582	2	9,582					2	9,582				(18)	(144,013)	379	996,329
4. Indexed																
5. Universal																
6. Universal with secondary guarantees																
7. Variable																
8. Variable universal																
9. Credit																
10. Other																
11. Total individual life	127,451	62	143,861					62	143,861	10,540			(108)	(496,535)	2,569	6,532,067
Group Life																
12. Whole																
13. Term																
14. Universal																
15. Variable																
16. Variable universal																
17. Credit																(a)
18. Other																
19. Total group life																
Individual Annuities																
20. Fixed	1,991	1	1,991					1	1,991					1,004	5	23,566
21. Indexed																
22. Variable with guarantees																
23. Variable without guarantees																
24. Life contingent payout																
25. Other																
26. Total individual annuities	1,991	1	1,991					1	1,991					1,004	5	23,566
Group Annuities																
27. Fixed																
28. Indexed																
29. Variable with guarantees																
30. Variable without guarantees																
31. Life contingent payout																
32. Other																
33. Total group annuities																
Accident and Health																
34. Comprehensive individual (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
37. Vision only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
44. Long-term care (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
45. Other health (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
46. Total accident and health	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
47. Total	129,442	63	145,852					63	145,852	10,540			(108)	(495,531)	2,574	6,555,633

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

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

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

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

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

(f) For health business report Direct Premiums Earned: Comprehensive Individual \$ _____; Comprehensive 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 \$ _____.

24.1.AR



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF California

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members				7 Total (Col. 3+4+5+6)	Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other		8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial	184							3,138	100			
2. Whole	9,498		1,701	234	403	2,338	40,611			1,037		4,275
3. Term	44							2,000		16,857		57,468
4. Indexed												2,000
5. Universal	7,122											
6. Universal with secondary guarantees												
7. Variable												
8. Variable universal												
9. Credit												
10. Other												
11. Total individual life	16,848		1,701	234	403	2,338	45,749	100		17,894		63,743
Group Life												
12. Whole												
13. Term												
14. Universal												
15. Variable												
16. Variable universal												
17. Credit												
18. Other												
19. Total group life												
Individual Annuities												
20. Fixed	104									76,912		76,912
21. Indexed												
22. Variable with guarantees												
23. Variable without guarantees												
24. Life contingent payout												
25. Other												
26. Total individual annuities	104									76,912		76,912
Group Annuities												
27. Fixed												
28. Indexed												
29. Variable with guarantees												
30. Variable without guarantees												
31. Life contingent payout												
32. Other												
33. Total group annuities												
Accident and Health												
34. Comprehensive individual	(d)	(f)						XXX	XXX	XXX		
35. Comprehensive group	(d)	(f)						XXX	XXX	XXX		
36. Medicare supplement	(d)	(f)						XXX	XXX	XXX		
37. Vision only	(d)	(f)						XXX	XXX	XXX		
38. Dental only	(d)	(f)						XXX	XXX	XXX		
39. Federal employees health benefits plan	(d)	(f)						XXX	XXX	XXX		
40. Title XVIII Medicare	(d)	(e, f)						XXX	XXX	XXX		
41. Title XIX Medicaid	(d)	(f)						XXX	XXX	XXX		
42. Credit A&H	(d)	(f)						XXX	XXX	XXX		
43. Disability income	(d)	(f)						XXX	XXX	XXX		
44. Long-term care	(d)	(f)						XXX	XXX	XXX		
45. Other health	(d)	(f)						XXX	XXX	XXX		
46. Total accident and health								XXX	XXX	XXX		
47. Total	16,952 (c)		1,701	234	403	2,338	45,749	100		94,806		140,655

24.CA

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF California

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit						
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	23 Issued During Year		25 Other Changes to In Force (Net)		27 In Force December 31, Current Year (b)		
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount	
		14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount								
																	23	24	25	26	27	28
Individual Life																	
1. Industrial	1,238	3,238					9	3,238									
2. Whole	47,711	40,611					6	40,611	17,100				(2)	(1,500)	55	48,465	
3. Term	2,000	2,000					1	2,000					(12)	758	34	2,357,036	
4. Indexed													(4)	(5,923)		317,123	
5. Universal																	
6. Universal with secondary guarantees																	
7. Variable																	
8. Variable universal																	
9. Credit																	
10. Other																	
11. Total individual life	50,949	45,849					16	45,849	17,100				(18)	3,909	387	4,755,914	
Group Life																	
12. Whole																	
13. Term																	
14. Universal																	
15. Variable																	
16. Variable universal																	
17. Credit																	(a)
18. Other																	
19. Total group life																	
Individual Annuities																	
20. Fixed	45,343								45,343					(4)	(115,729)	21	115,745
21. Indexed																	
22. Variable with guarantees																	
23. Variable without guarantees																	
24. Life contingent payout																	
25. Other																	
26. Total individual annuities	45,343								45,343					(4)	(115,729)	21	115,745
Group Annuities																	
27. Fixed																	
28. Indexed																	
29. Variable with guarantees																	
30. Variable without guarantees																	
31. Life contingent payout																	
32. Other																	
33. Total group annuities																	
Accident and Health																	
34. Comprehensive individual (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
35. Comprehensive group (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
36. Medicare supplement (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
37. Vision only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
38. Dental only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
39. Federal employees health benefits plan (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
40. Title XVIII Medicare (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
41. Title XIX Medicaid (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
42. Credit A&H (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
43. Disability income (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
44. Long-term care (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
45. Other health (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
46. Total accident and health	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
47. Total	96,292	45,849					16	45,849	62,443				(22)	(111,820)	408	4,871,659	

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

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

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

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

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

(f) For health business report Direct Premiums Earned: Comprehensive Individual \$ _____; Comprehensive 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 \$ _____

24.1.CA



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF Colorado

DURING THE YEAR 2025

NAIC Company Code 70130

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	105										
2. Whole	9,417		1,608	424	580	2,612	33,259		1,338		34,597
3. Term	4,587								14,877		14,877
4. Indexed											
5. Universal	14,891								14,233		14,233
6. Universal with secondary guarantees											
7. Variable											
8. Variable universal											
9. Credit											
10. Other											
11. Total individual life	29,000		1,608	424	580	2,612	33,259		30,448		63,707
Group Life											
12. Whole											
13. Term											
14. Universal											
15. Variable											
16. Variable universal											
17. Credit											
18. Other											
19. Total group life											
Individual Annuities											
20. Fixed	540								49		49
21. Indexed											
22. Variable with guarantees											
23. Variable without guarantees											
24. Life contingent payout											
25. Other											
26. Total individual annuities	540								49		49
Group Annuities											
27. Fixed											
28. Indexed											
29. Variable with guarantees											
30. Variable without guarantees											
31. Life contingent payout											
32. Other											
33. Total group annuities											
Accident and Health											
34. Comprehensive individual	(d)	(f)						XXX	XXX	XXX	
35. Comprehensive group	(d)	(f)						XXX	XXX	XXX	
36. Medicare supplement	(d)	(f)						XXX	XXX	XXX	
37. Vision only	(d)	(f)						XXX	XXX	XXX	
38. Dental only	(d)	(f)						XXX	XXX	XXX	
39. Federal employees health benefits plan	(d)	(f)						XXX	XXX	XXX	
40. Title XVIII Medicare	(d)	(e, f)						XXX	XXX	XXX	
41. Title XIX Medicaid	(d)	(f)						XXX	XXX	XXX	
42. Credit A&H	(d)	(f)						XXX	XXX	XXX	
43. Disability income	(d)	(f)						XXX	XXX	XXX	
44. Long-term care	(d)	(f)						XXX	XXX	XXX	
45. Other health	(d)	(f)						XXX	XXX	XXX	
46. Total accident and health								XXX	XXX	XXX	
47. Total	29,540 (c)		1,608	424	580	2,612	33,259		30,497		63,756

24.CO

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF Colorado

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit						
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)		
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount	
		14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount								
Individual Life																	
1. Industrial																	
2. Whole	33,259	6	33,259					6	33,259				(6)	(44,999)	294	1,912,629	
3. Term														2,996	25	453,419	
4. Indexed																	
5. Universal																	
6. Universal with secondary guarantees													(2)	(59,620)	28	1,502,249	
7. Variable																	
8. Variable universal																	
9. Credit																	
10. Other																	
11. Total individual life	33,259	6	33,259					6	33,259				(8)	(101,623)	367	3,885,831	
Group Life																	
12. Whole																	
13. Term																	
14. Universal																	
15. Variable																	
16. Variable universal																	
17. Credit																(a)	
18. Other																	
19. Total group life																	
Individual Annuities																	
20. Fixed														12,009	30	298,694	
21. Indexed																	
22. Variable with guarantees																	
23. Variable without guarantees																	
24. Life contingent payout																	
25. Other																	
26. Total individual annuities														12,009	30	298,694	
Group Annuities																	
27. Fixed																	
28. Indexed																	
29. Variable with guarantees																	
30. Variable without guarantees																	
31. Life contingent payout																	
32. Other																	
33. Total group annuities																	
Accident and Health																	
34. Comprehensive individual (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
35. Comprehensive group (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
36. Medicare supplement (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
37. Vision only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
38. Dental only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
39. Federal employees health benefits plan (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
40. Title XVIII Medicare (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
41. Title XIX Medicaid (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
42. Credit A&H (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
43. Disability income (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
44. Long-term care (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
45. Other health (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
46. Total accident and health	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
47. Total	33,259	6	33,259					6	33,259				(8)	(89,614)	397	4,184,525	

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

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

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

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

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

(f) For health business report Direct Premiums Earned: Comprehensive Individual \$ _____; Comprehensive 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 \$ _____.

24.1.CO



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF Connecticut

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members				7 Total (Col. 3+4+5+6)	Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other		8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial												
2. Whole	.652		120	36			156					
3. Term												
4. Indexed												
5. Universal												
6. Universal with secondary guarantees												
7. Variable												
8. Variable universal												
9. Credit												
10. Other												
11. Total individual life	.652		120	36			156					
Group Life												
12. Whole												
13. Term												
14. Universal												
15. Variable												
16. Variable universal												
17. Credit												
18. Other												
19. Total group life												
Individual Annuities												
20. Fixed	.800											
21. Indexed												
22. Variable with guarantees												
23. Variable without guarantees												
24. Life contingent payout												
25. Other												
26. Total individual annuities	.800											
Group Annuities												
27. Fixed												
28. Indexed												
29. Variable with guarantees												
30. Variable without guarantees												
31. Life contingent payout												
32. Other												
33. Total group annuities												
Accident and Health												
34. Comprehensive individual (d) (f)								XXX	XXX	XXX		
35. Comprehensive group (d) (f)								XXX	XXX	XXX		
36. Medicare supplement (d) (f)								XXX	XXX	XXX		
37. Vision only (d) (f)								XXX	XXX	XXX		
38. Dental only (d) (f)								XXX	XXX	XXX		
39. Federal employees health benefits plan (d) (f)								XXX	XXX	XXX		
40. Title XVIII Medicare (d) (e, f)								XXX	XXX	XXX		
41. Title XIX Medicaid (d) (f)								XXX	XXX	XXX		
42. Credit A&H (d) (f)								XXX	XXX	XXX		
43. Disability income (d) (f)								XXX	XXX	XXX		
44. Long-term care (d) (f)								XXX	XXX	XXX		
45. Other health (d) (f)								XXX	XXX	XXX		
46. Total accident and health								XXX	XXX	XXX		
47. Total	1,452 (c)		120	36			156					

24.CT

**ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE) (Continued)^(b)**

NAIC Group Code 0000

BUSINESS IN THE STATE OF Connecticut

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	13 Incurred During Current Year	13 Claims Settled During Current Year								22 Unpaid December 31, Current Year	22 Policy Exhibit							
		Totals Paid				Reduction by Compromise		Amount Rejected			Total Settled During Current Year		Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount		23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount		
Individual Life																		
1. Industrial																5	2,250	
2. Whole															13	51,102		
3. Term															3	4,500		
4. Indexed																		
5. Universal																		
6. Universal with secondary guarantees																		
7. Variable																		
8. Variable universal																		
9. Credit																		
10. Other																		
11. Total individual life													(1)	(4,300)	21	57,852		
Group Life																		
12. Whole																		
13. Term																		
14. Universal																		
15. Variable																		
16. Variable universal																		
17. Credit																	(a)	
18. Other																		
19. Total group life																		
Individual Annuities																		
20. Fixed																4	107,453	
21. Indexed																		
22. Variable with guarantees																		
23. Variable without guarantees																		
24. Life contingent payout																		
25. Other																		
26. Total individual annuities																4	107,453	
Group Annuities																		
27. Fixed																		
28. Indexed																		
29. Variable with guarantees																		
30. Variable without guarantees																		
31. Life contingent payout																		
32. Other																		
33. Total group annuities																		
Accident and Health																		
34. Comprehensive individual (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
35. Comprehensive group (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
36. Medicare supplement (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
37. Vision only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
38. Dental only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
39. Federal employees health benefits plan (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
40. Title XVIII Medicare (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
41. Title XIX Medicaid (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
42. Credit A&H (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
43. Disability income (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
44. Long-term care (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
45. Other health (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
46. Total accident and health	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
47. Total													(1)	1,225	25	165,305		

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

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

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

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

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

(f) For health business report Direct Premiums Earned: Comprehensive Individual \$ _____; Comprehensive 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 \$ _____.

24.1.CT



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF Delaware

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members				7 Total (Col. 3+4+5+6)	Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other		8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial												
2. Whole .....	.607											
3. Term												
4. Indexed												
5. Universal .....	.233											
6. Universal with secondary guarantees												
7. Variable												
8. Variable universal												
9. Credit												
10. Other												
11. Total individual life	840									6,977		6,977
Group Life												
12. Whole												
13. Term												
14. Universal												
15. Variable												
16. Variable universal												
17. Credit												
18. Other												
19. Total group life												
Individual Annuities												
20. Fixed	9											
21. Indexed												
22. Variable with guarantees												
23. Variable without guarantees												
24. Life contingent payout												
25. Other												
26. Total individual annuities	9											
Group Annuities												
27. Fixed												
28. Indexed												
29. Variable with guarantees												
30. Variable without guarantees												
31. Life contingent payout												
32. Other												
33. Total group annuities												
Accident and Health												
34. Comprehensive individual	(d)	(f)						XXX	XXX	XXX		
35. Comprehensive group	(d)	(f)						XXX	XXX	XXX		
36. Medicare supplement	(d)	(f)						XXX	XXX	XXX		
37. Vision only	(d)	(f)						XXX	XXX	XXX		
38. Dental only	(d)	(f)						XXX	XXX	XXX		
39. Federal employees health benefits plan	(d)	(f)						XXX	XXX	XXX		
40. Title XVIII Medicare	(d)	(e, f)						XXX	XXX	XXX		
41. Title XIX Medicaid	(d)	(f)						XXX	XXX	XXX		
42. Credit A&H		(f)						XXX	XXX	XXX		
43. Disability income		(d)						XXX	XXX	XXX		
44. Long-term care		(d)						XXX	XXX	XXX		
45. Other health		(d)						XXX	XXX	XXX		
46. Total accident and health								XXX	XXX	XXX		
47. Total	849 (c)									6,977		6,977

24 DE

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF Delaware

DURING THE YEAR 2025

NAIC Company Code 70130

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

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

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

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

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

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

(f) For health business report Direct Premiums Earned: Comprehensive Individual \$ _____; Comprehensive 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 \$ _____.

24.1.DE



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company

LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF District of Columbia

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members				7 Total (Col. 3+4+5+6)	Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other		8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial	102											
2. Whole	400		75			75						
3. Term												
4. Indexed									5,000			
5. Universal	748											
6. Universal with secondary guarantees												
7. Variable												
8. Variable universal												
9. Credit												
10. Other												
11. Total individual life	1,250		75			75		5,000				5,000
Group Life												
12. Whole												
13. Term												
14. Universal												
15. Variable												
16. Variable universal												
17. Credit												
18. Other												
19. Total group life												
Individual Annuities												
20. Fixed												
21. Indexed												
22. Variable with guarantees												
23. Variable without guarantees												
24. Life contingent payout												
25. Other												
26. Total individual annuities												
Group Annuities												
27. Fixed												
28. Indexed												
29. Variable with guarantees												
30. Variable without guarantees												
31. Life contingent payout												
32. Other												
33. Total group annuities												
Accident and Health												
34. Comprehensive individual (d) (f)								XXX	XXX	XXX		
35. Comprehensive group (d) (f)								XXX	XXX	XXX		
36. Medicare supplement (d) (f)								XXX	XXX	XXX		
37. Vision only (d) (f)								XXX	XXX	XXX		
38. Dental only (d) (f)								XXX	XXX	XXX		
39. Federal employees health benefits plan (d) (f)								XXX	XXX	XXX		
40. Title XVIII Medicare (d) (e, f)								XXX	XXX	XXX		
41. Title XIX Medicaid (d) (f)								XXX	XXX	XXX		
42. Credit A&H (d) (f)								XXX	XXX	XXX		
43. Disability income (d) (f)								XXX	XXX	XXX		
44. Long-term care (d) (f)								XXX	XXX	XXX		
45. Other health (d) (f)								XXX	XXX	XXX		
46. Total accident and health								XXX	XXX	XXX		
47. Total	1,250 (c)		75			75		5,000				5,000

24.DC

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF District of Columbia

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit						
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)		
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount	
		14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount								
Individual Life																	
1. Industrial																19	21,000
2. Whole																16	161,897
3. Term	5,000	1	5,000						1	5,000			(1)	(5,000)	6	17,000	
4. Indexed																	
5. Universal																	
6. Universal with secondary guarantees														2,777	2	124,792	
7. Variable																	
8. Variable universal																	
9. Credit																	
10. Other																	
11. Total individual life	5,000	1	5,000						1	5,000			(1)	(3,330)	43	324,689	
Group Life																	
12. Whole																	
13. Term																	
14. Universal																	
15. Variable																	
16. Variable universal																	
17. Credit																	(a)
18. Other																	
19. Total group life																	
Individual Annuities																	
20. Fixed																	
21. Indexed																	
22. Variable with guarantees																	
23. Variable without guarantees																	
24. Life contingent payout																	
25. Other																	
26. Total individual annuities																	
Group Annuities																	
27. Fixed																	
28. Indexed																	
29. Variable with guarantees																	
30. Variable without guarantees																	
31. Life contingent payout																	
32. Other																	
33. Total group annuities																	
Accident and Health																	
34. Comprehensive individual (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
35. Comprehensive group (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
36. Medicare supplement (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
37. Vision only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
38. Dental only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
39. Federal employees health benefits plan (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
40. Title XVIII Medicare (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
41. Title XIX Medicaid (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
42. Credit A&H (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
43. Disability income (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
44. Long-term care (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
45. Other health (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
46. Total accident and health	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
47. Total	5,000	1	5,000						1	5,000			(1)	(3,330)	43	324,689	

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

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

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

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

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

(f) For health business report Direct Premiums Earned: Comprehensive Individual \$ _____; Comprehensive 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 \$ _____.

24.1.DC



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF Florida

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members				7 Total (Col. 3+4+5+6)	Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other		8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial	53										798	798
2. Whole	20,719		5,374	976	7,878	14,228	67,243	12,038		34,032		113,313
3. Term	6,480						6,830			16,018		22,848
4. Indexed												
5. Universal	140,933						301,100			91,032		392,132
6. Universal with secondary guarantees												
7. Variable												
8. Variable universal												
9. Credit												
10. Other												
11. Total individual life	168,185		5,374	976	7,878	14,228	375,173	12,038		141,880		529,091
Group Life												
12. Whole												
13. Term	337						5,002					5,002
14. Universal												
15. Variable												
16. Variable universal												
17. Credit												
18. Other												
19. Total group life	337						5,002					5,002
Individual Annuities												
20. Fixed	2,428						459			70,656		71,115
21. Indexed												
22. Variable with guarantees												
23. Variable without guarantees												
24. Life contingent payout												
25. Other												
26. Total individual annuities	2,428						459			70,656		71,115
Group Annuities												
27. Fixed												
28. Indexed												
29. Variable with guarantees												
30. Variable without guarantees												
31. Life contingent payout												
32. Other												
33. Total group annuities												
Accident and Health												
34. Comprehensive individual	(d)	(f)					XXX	XXX		XXX		
35. Comprehensive group	(d)	(f)					XXX	XXX		XXX		
36. Medicare supplement	(d)	(f)					XXX	XXX		XXX		
37. Vision only	(d)	(f)					XXX	XXX		XXX		
38. Dental only	(d)	(f)					XXX	XXX		XXX		
39. Federal employees health benefits plan	(d)	(f)					XXX	XXX		XXX		
40. Title XVIII Medicare	(d)	(e, f)					XXX	XXX		XXX		
41. Title XIX Medicaid	(d)	(f)					XXX	XXX		XXX		
42. Credit A&H	(d)	(f)					XXX	XXX		XXX		
43. Disability income	(d)	(f)					XXX	XXX		XXX		
44. Long-term care	(d)	(f)					XXX	XXX		XXX		
45. Other health	(d)	(f)					XXX	XXX		XXX		
46. Total accident and health	23	23					XXX	XXX		XXX		
47. Total	170,973 (c)		5,374	976	7,878	14,228	380,634	12,038		212,536		605,208

24.FL



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF Georgia

DURING THE YEAR 2025

NAIC Company Code 70130

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	1,028							1,752			1,752
2. Whole	9,345		806	60	233	1,099	80,477		7,550		88,027
3. Term	3,210						1,000		10,436		11,436
4. Indexed											
5. Universal	58,461						48,465		58,992		107,457
6. Universal with secondary guarantees											
7. Variable											
8. Variable universal											
9. Credit											
10. Other											
11. Total individual life	72,044		806	60	233	1,099	131,694		76,978		208,672
Group Life											
12. Whole											
13. Term	180										
14. Universal											
15. Variable											
16. Variable universal											
17. Credit											
18. Other											
19. Total group life	180										
Individual Annuities											
20. Fixed	975										
21. Indexed											
22. Variable with guarantees											
23. Variable without guarantees											
24. Life contingent payout											
25. Other											
26. Total individual annuities	975										
Group Annuities											
27. Fixed											
28. Indexed											
29. Variable with guarantees											
30. Variable without guarantees											
31. Life contingent payout											
32. Other											
33. Total group annuities											
Accident and Health											
34. Comprehensive individual	(d)	(f)						XXX	XXX	XXX	
35. Comprehensive group	(d)	(f)						XXX	XXX	XXX	
36. Medicare supplement	(d)	(f)						XXX	XXX	XXX	
37. Vision only	(d)	(f)						XXX	XXX	XXX	
38. Dental only	(d)	(f)						XXX	XXX	XXX	
39. Federal employees health benefits plan	(d)	(f)						XXX	XXX	XXX	
40. Title XVIII Medicare	(d)	(e, f)						XXX	XXX	XXX	
41. Title XIX Medicaid	(d)	(f)						XXX	XXX	XXX	
42. Credit A&H	(d)	(f)						XXX	XXX	XXX	
43. Disability income	(d)	(f)						XXX	XXX	XXX	
44. Long-term care	(d)	(f)						XXX	XXX	XXX	
45. Other health	(d)	(f)						XXX	XXX	XXX	
46. Total accident and health								XXX	XXX	XXX	
47. Total	73,199 (c)		806	60	233	1,099	131,694		76,978		208,672

24.GA

**ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE) (Continued)^(b)**

NAIC Group Code 0000

BUSINESS IN THE STATE OF Georgia

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit							
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	23 Issued During Year		25 Other Changes to In Force (Net)		27 In Force December 31, Current Year (b)			
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			24 Number of Pols/ Certs	26 Amount	28 Number of Pols/ Certs	29 Amount				
		14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount									
Individual Life																		
1. Industrial	1,752	1,752							2	1,752								
2. Whole	72,682	80,477							16	80,477								
3. Term		1,000							1	1,000								
4. Indexed																		
5. Universal	48,466	48,466							1	48,466								
6. Universal with secondary guarantees																		
7. Variable																		
8. Variable universal																		
9. Credit																		
10. Other																		
11. Total individual life	122,900	131,695							20	131,695	1,538			(32)	(584,871)	545	7,886,701	
Group Life																		
12. Whole																		
13. Term																		
14. Universal																		
15. Variable																		
16. Variable universal																		
17. Credit																		
18. Other																		
19. Total group life																		
Individual Annuities																		
20. Fixed																		
21. Indexed																		
22. Variable with guarantees																		
23. Variable without guarantees																		
24. Life contingent payout																		
25. Other																		
26. Total individual annuities																		
Group Annuities																		
27. Fixed																		
28. Indexed																		
29. Variable with guarantees																		
30. Variable without guarantees																		
31. Life contingent payout																		
32. Other																		
33. Total group annuities																		
Accident and Health																		
34. Comprehensive individual (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
35. Comprehensive group (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
36. Medicare supplement (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
37. Vision only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
38. Dental only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
39. Federal employees health benefits plan (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
40. Title XVIII Medicare (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
41. Title XIX Medicaid (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
42. Credit A&H (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
43. Disability income (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
44. Long-term care (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
45. Other health (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
46. Total accident and health	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
47. Total	122,900	131,695	20						20	131,695	1,538			(32)	(576,122)	567	8,092,901	

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

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

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

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

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

(f) For health business report Direct Premiums Earned: Comprehensive Individual \$ _____; Comprehensive 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 \$ _____

24.1.GA



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF Hawaii

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members				Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life											
1. Industrial											
2. Whole .....464			86	64		150			2,792		2,792
3. Term											
4. Indexed											
5. Universal .....137											
6. Universal with secondary guarantees											
7. Variable											
8. Variable universal											
9. Credit											
10. Other											
11. Total individual life	601		86	64		150			2,792		2,792
Group Life											
12. Whole											
13. Term											
14. Universal											
15. Variable											
16. Variable universal											
17. Credit											
18. Other											
19. Total group life											
Individual Annuities											
20. Fixed											
21. Indexed											
22. Variable with guarantees											
23. Variable without guarantees											
24. Life contingent payout											
25. Other											
26. Total individual annuities											
Group Annuities											
27. Fixed											
28. Indexed											
29. Variable with guarantees											
30. Variable without guarantees											
31. Life contingent payout											
32. Other											
33. Total group annuities											
Accident and Health											
34. Comprehensive individual (d) (f)								XXX	XXX	XXX	
35. Comprehensive group (d) (f)								XXX	XXX	XXX	
36. Medicare supplement (d) (f)								XXX	XXX	XXX	
37. Vision only (d) (f)								XXX	XXX	XXX	
38. Dental only (d) (f)								XXX	XXX	XXX	
39. Federal employees health benefits plan (d) (f)								XXX	XXX	XXX	
40. Title XVIII Medicare (d) (e, f)								XXX	XXX	XXX	
41. Title XIX Medicaid (d) (f)								XXX	XXX	XXX	
42. Credit A&H (d) (f)								XXX	XXX	XXX	
43. Disability income (d) (f)								XXX	XXX	XXX	
44. Long-term care (d) (f)								XXX	XXX	XXX	
45. Other health (d) (f)								XXX	XXX	XXX	
46. Total accident and health								XXX	XXX	XXX	
47. Total	601 (c)		86	64		150			2,792		2,792

24.HI

**ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE) (Continued)^(b)**

NAIC Group Code 0000

BUSINESS IN THE STATE OF Hawaii

DURING THE YEAR 2025

NAIC Company Code 70130

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

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

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

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

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

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

(f) For health business report Direct Premiums Earned: Comprehensive Individual \$ _____; Comprehensive 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 \$ _____.

24.1.HI



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF Idaho

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members				Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life											
1. Industrial											
2. Whole	795		109			109			3,319		3,319
3. Term											
4. Indexed											
5. Universal	1,856										
6. Universal with secondary guarantees											
7. Variable											
8. Variable universal											
9. Credit											
10. Other											
11. Total individual life	2,651		109			109			3,319		3,319
Group Life											
12. Whole											
13. Term											
14. Universal											
15. Variable											
16. Variable universal											
17. Credit											
18. Other											
19. Total group life											
Individual Annuities											
20. Fixed											
21. Indexed											
22. Variable with guarantees											
23. Variable without guarantees											
24. Life contingent payout											
25. Other											
26. Total individual annuities											
Group Annuities											
27. Fixed											
28. Indexed											
29. Variable with guarantees											
30. Variable without guarantees											
31. Life contingent payout											
32. Other											
33. Total group annuities											
Accident and Health											
34. Comprehensive individual	(d)	(f)						XXX	XXX	XXX	
35. Comprehensive group	(d)	(f)						XXX	XXX	XXX	
36. Medicare supplement	(d)	(f)						XXX	XXX	XXX	
37. Vision only	(d)	(f)						XXX	XXX	XXX	
38. Dental only	(d)	(f)						XXX	XXX	XXX	
39. Federal employees health benefits plan	(d)	(f)						XXX	XXX	XXX	
40. Title XVIII Medicare	(d)	(e, f)						XXX	XXX	XXX	
41. Title XIX Medicaid	(d)	(f)						XXX	XXX	XXX	
42. Credit A&H		(f)						XXX	XXX	XXX	
43. Disability income		(f)						XXX	XXX	XXX	
44. Long-term care	(d)	(f)						XXX	XXX	XXX	
45. Other health	(d)	(f)						XXX	XXX	XXX	
46. Total accident and health								XXX	XXX	XXX	
47. Total	2,651 (c)		109			109			3,319		3,319

24.ID

**ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE) (Continued)^(b)**

NAIC Group Code 0000

BUSINESS IN THE STATE OF Idaho

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	13 Incurred During Current Year	13 Claims Settled During Current Year								22 Unpaid December 31, Current Year	22 Policy Exhibit							
		Totals Paid				Reduction by Compromise		Amount Rejected			Total Settled During Current Year		Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount		23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount		
Individual Life																		
1. Industrial																1	1,000	
2. Whole															15	116,720		
3. Term																		
4. Indexed																		
5. Universal																		
6. Universal with secondary guarantees																9	292,740	
7. Variable																		
8. Variable universal																		
9. Credit																		
10. Other																		
11. Total individual life													(4)	(17,344)	25	410,460		
Group Life																		
12. Whole																		
13. Term																		
14. Universal																		
15. Variable																		
16. Variable universal																		
17. Credit																	(a)	
18. Other																		
19. Total group life																		
Individual Annuities																		
20. Fixed																		
21. Indexed																		
22. Variable with guarantees																		
23. Variable without guarantees																		
24. Life contingent payout																		
25. Other																		
26. Total individual annuities																		
Group Annuities																		
27. Fixed																		
28. Indexed																		
29. Variable with guarantees																		
30. Variable without guarantees																		
31. Life contingent payout																		
32. Other																		
33. Total group annuities																		
Accident and Health																		
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
36. Medicare supplement (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
42. Credit A&H (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
43. Disability income (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
44. Long-term care (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
45. Other health (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
46. Total accident and health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
47. Total													(4)	(17,344)	25	410,460		

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

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

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

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

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

(f) For health business report Direct Premiums Earned: Comprehensive Individual \$ _____; Comprehensive 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 \$ _____.

24.1.ID



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF Illinois

DURING THE YEAR 2025

NAIC Company Code 70130

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 .....	.688							4,000	1,000	1,941	
2. Whole	240,270		66,411	20,281	23,307		109,999	362,801	10,496	288,015	661,312
3. Term .....	.681							8,000		14,382	22,382
4. Indexed											
5. Universal	712,624							1,014,314		40,111	1,054,425
6. Universal with secondary guarantees											
7. Variable											
8. Variable universal											
9. Credit											
10. Other											
11. Total individual life	954,263		66,411	20,281	23,307		109,999	1,389,115	11,496	344,449	1,745,060
Group Life											
12. Whole											
13. Term .....	.659										
14. Universal											
15. Variable											
16. Variable universal											
17. Credit											
18. Other											
19. Total group life	.659										
Individual Annuities											
20. Fixed	40,527							93,831		258,604	352,435
21. Indexed											
22. Variable with guarantees											
23. Variable without guarantees											
24. Life contingent payout											
25. Other											
26. Total individual annuities	40,527							93,831		258,604	352,435
Group Annuities											
27. Fixed											
28. Indexed											
29. Variable with guarantees											
30. Variable without guarantees											
31. Life contingent payout											
32. Other											
33. Total group annuities											
Accident and Health											
34. Comprehensive individual	(d)	(f)						XXX	XXX	XXX	
35. Comprehensive group	(d)	(f)						XXX	XXX	XXX	
36. Medicare supplement	(d)	(f)						XXX	XXX	XXX	
37. Vision only	(d)	(f)						XXX	XXX	XXX	
38. Dental only	(d)	(f)						XXX	XXX	XXX	
39. Federal employees health benefits plan	(d)	(f)						XXX	XXX	XXX	
40. Title XVIII Medicare	(d)	(e, f)						XXX	XXX	XXX	
41. Title XIX Medicaid	(d)	(f)						XXX	XXX	XXX	
42. Credit A&H		(f)						XXX	XXX	XXX	
43. Disability income		(f)						XXX	XXX	XXX	
44. Long-term care		(f)						XXX	XXX	XXX	
45. Other health		(f)						XXX	XXX	XXX	
46. Total accident and health								XXX	XXX	XXX	
47. Total	995,449 (c)		66,411	20,281	23,307		109,999	1,482,946	11,496	603,053	2,097,495

24.1L

**ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE) (Continued)^(b)**

NAIC Group Code 0000

BUSINESS IN THE STATE OF Illinois

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit						
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	23 Issued During Year		25 Other Changes to In Force (Net)		27 In Force December 31, Current Year (b)		
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			24 Number of Pols/Certs	26 Amount	28 Number of Pols/Certs	29 Amount			
		14 Number of Pols/Certs	15 Amount	16 Number of Pols/Certs	17 Amount	18 Number of Pols/Certs	19 Amount	20 Number of Pols/Certs	21 Amount								
Individual Life																	
1. Industrial	4,000	5,000					7	5,000					(44)	(36,750)	621	520,366	
2. Whole	450,579	373,298					64	373,298					(158)	(3,620,726)	3,695	63,577,236	
3. Term		6,500					3	6,500					(20)	(75,387)	304	1,929,834	
4. Indexed																	
5. Universal	1,012,520	1,014,314					10	1,014,314					(50)	(4,229,987)	908	84,756,220	
6. Universal with secondary guarantees																	
7. Variable																	
8. Variable universal																	
9. Credit																	
10. Other																	
11. Total individual life	1,467,099	1,399,112					84	1,399,112					(272)	(7,962,850)	5,528	150,783,656	
Group Life																	
12. Whole																	
13. Term																	
14. Universal																	
15. Variable																	
16. Variable universal																	
17. Credit																	
18. Other																	
19. Total group life															4	40,300	
Individual Annuities																	
20. Fixed	104,241	93,831					12	93,831					(43)	(623,633)	638	5,731,960	
21. Indexed																	
22. Variable with guarantees																	
23. Variable without guarantees																	
24. Life contingent payout																	
25. Other																	
26. Total individual annuities	104,241	93,831					12	93,831					(43)	(623,633)	638	5,731,960	
Group Annuities																	
27. Fixed																	
28. Indexed																	
29. Variable with guarantees																	
30. Variable without guarantees																	
31. Life contingent payout																	
32. Other																	
33. Total group annuities																	
Accident and Health																	
34. Comprehensive individual (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
35. Comprehensive group (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
36. Medicare supplement (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
37. Vision only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
38. Dental only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
39. Federal employees health benefits plan (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
40. Title XVIII Medicare (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
41. Title XIX Medicaid (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
42. Credit A&H	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
43. Disability income (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
44. Long-term care (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
45. Other health (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
46. Total accident and health	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
47. Total	1,571,340	1,492,943	96					96	1,492,943					(315)	(8,586,483)	6,170	156,555,916

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

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

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

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

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

(f) For health business report Direct Premiums Earned: Comprehensive Individual \$ _____; Comprehensive 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 \$ _____.

24.1.1L



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF Indiana

DURING THE YEAR 2025

NAIC Company Code 70130

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	20										
2. Whole	62,304		11,166	786	1,071	13,023	74,004	12,536	72,447		158,987
3. Term	6,524								59,873		59,873
4. Indexed											
5. Universal	61,321						98,536		23,210		121,746
6. Universal with secondary guarantees											
7. Variable											
8. Variable universal											
9. Credit											
10. Other											
11. Total individual life	130,169		11,166	786	1,071	13,023	172,540	12,536	155,530		340,606
Group Life											
12. Whole											
13. Term	360										
14. Universal											
15. Variable											
16. Variable universal											
17. Credit											
18. Other											
19. Total group life	360										
Individual Annuities											
20. Fixed	21,582						59,305		15,320		74,625
21. Indexed											
22. Variable with guarantees											
23. Variable without guarantees											
24. Life contingent payout											
25. Other											
26. Total individual annuities	21,582						59,305		15,320		74,625
Group Annuities											
27. Fixed											
28. Indexed											
29. Variable with guarantees											
30. Variable without guarantees											
31. Life contingent payout											
32. Other											
33. Total group annuities											
Accident and Health											
34. Comprehensive individual (d)	1,772 (f)						XXX	XXX	XXX		
35. Comprehensive group (d)	(f)						XXX	XXX	XXX		
36. Medicare supplement (d)	(f)						XXX	XXX	XXX		
37. Vision only (d)	(f)						XXX	XXX	XXX		
38. Dental only (d)	(f)						XXX	XXX	XXX		
39. Federal employees health benefits plan (d)	(f)						XXX	XXX	XXX		
40. Title XVIII Medicare (d)	(e, f)						XXX	XXX	XXX		
41. Title XIX Medicaid (d)	(f)						XXX	XXX	XXX		
42. Credit A&H (d)	(f)						XXX	XXX	XXX		
43. Disability income (d)	(f)						XXX	XXX	XXX		
44. Long-term care (d)	(f)						XXX	XXX	XXX		
45. Other health (d)	(f)						XXX	XXX	XXX		
46. Total accident and health	1,772						XXX	XXX	XXX		
47. Total	153,883 (c)		11,166	786	1,071	13,023	231,845	12,536	170,850		415,231

24.IN

**ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE) (Continued)^(b)**

NAIC Group Code 0000

BUSINESS IN THE STATE OF Indiana

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit									
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	23 Issued During Year		25 Other Changes to In Force (Net)		27 In Force December 31, Current Year (b)					
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			24 Number of Pols/Certs	26 Amount	28 Number of Pols/Certs	29 Amount	30 Number of Pols/Certs	31 Amount				
		14 Number of Pols/Certs	15 Amount	16 Number of Pols/Certs	17 Amount	18 Number of Pols/Certs	19 Amount	20 Number of Pols/Certs	21 Amount											
Individual Life																				
1. Industrial																				
2. Whole	80,809	24	86,540					24	86,540	4,120			2	1,250	20	23,250				
3. Term	3,032	1	1,500					1	1,500	1,532			(36)	(220,843)	906	9,227,691				
4. Indexed													(7)	(89,794)	53	729,439				
5. Universal	98,536	3	98,536					3	98,536				(6)	(20,993)	150	8,846,365				
6. Universal with secondary guarantees																				
7. Variable																				
8. Variable universal																				
9. Credit																				
10. Other																				
11. Total individual life	182,377	28	186,576					28	186,576	5,652	1	100,000	(47)	(330,380)	1,129	18,826,745				
Group Life																				
12. Whole																				
13. Term																				
14. Universal																				
15. Variable																				
16. Variable universal																				
17. Credit																				
18. Other																				
19. Total group life																				
Individual Annuities																				
20. Fixed	89,162	4	59,305					4	59,305	29,857			(9)	16,409	232	2,397,632				
21. Indexed																				
22. Variable with guarantees																				
23. Variable without guarantees																				
24. Life contingent payout																				
25. Other																				
26. Total individual annuities	89,162	4	59,305					4	59,305	29,857			(9)	16,409	232	2,397,632				
Group Annuities																				
27. Fixed																				
28. Indexed																				
29. Variable with guarantees																				
30. Variable without guarantees																				
31. Life contingent payout																				
32. Other																				
33. Total group annuities																				
Accident and Health																				
34. Comprehensive individual (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			(3)	(300)	21	2,100				
35. Comprehensive group (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX										
36. Medicare supplement (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX										
37. Vision only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX										
38. Dental only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX										
39. Federal employees health benefits plan (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX										
40. Title XVIII Medicare (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX										
41. Title XIX Medicaid (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX										
42. Credit A&H	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX										
43. Disability income (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX										
44. Long-term care (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX										
45. Other health (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX										
46. Total accident and health	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			(3)	(300)	21	2,100				
47. Total	271,539	32	245,881					32	245,881	35,509	1	100,000	(59)	(314,271)	1,384	21,236,477				

(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: \$ _____ Group: \$ _____ Total: \$ _____.

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

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

(f) For health business report Direct Premiums Earned: Comprehensive Individual \$ _____; Comprehensive 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 \$ _____.

24.1.IN



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF Iowa

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members				7 Total (Col. 3+4+5+6)	Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other		8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial								100				100
2. Whole .....21,318			9,916	591	792		11,299	163,203	1,000	38,266		202,469
3. Term .....3,375										(1,045)		(1,045)
4. Indexed												
5. Universal .....137,387								552,380		1,875		554,255
6. Universal with secondary guarantees												
7. Variable												
8. Variable universal												
9. Credit												
10. Other												
11. Total individual life	162,080		9,916	591	792		11,299	715,683	1,000	39,096		755,779
Group Life												
12. Whole												
13. Term												
14. Universal												
15. Variable												
16. Variable universal												
17. Credit												
18. Other												
19. Total group life												
Individual Annuities												
20. Fixed .....21,510								58,269		43,110		101,379
21. Indexed												
22. Variable with guarantees												
23. Variable without guarantees												
24. Life contingent payout												
25. Other												
26. Total individual annuities	21,510							58,269		43,110		101,379
Group Annuities												
27. Fixed												
28. Indexed												
29. Variable with guarantees												
30. Variable without guarantees												
31. Life contingent payout												
32. Other												
33. Total group annuities												
Accident and Health												
34. Comprehensive individual .....(d) (f)								XXX	XXX	XXX		
35. Comprehensive group .....(d) (f)								XXX	XXX	XXX		
36. Medicare supplement .....(d) (f)								XXX	XXX	XXX		
37. Vision only .....(d) (f)								XXX	XXX	XXX		
38. Dental only .....(d) (f)								XXX	XXX	XXX		
39. Federal employees health benefits plan .....(d) (f)								XXX	XXX	XXX		
40. Title XVIII Medicare .....(d) (e, f)								XXX	XXX	XXX		
41. Title XIX Medicaid .....(d) (f)								XXX	XXX	XXX		
42. Credit A&H .....(d) (f)								XXX	XXX	XXX		
43. Disability income .....(d) (f)								XXX	XXX	XXX		
44. Long-term care .....(d) (f)								XXX	XXX	XXX		
45. Other health .....(d) (f)								XXX	XXX	XXX		
46. Total accident and health								XXX	XXX	XXX		
47. Total	183,590 (c)		9,916	591	792		11,299	773,952	1,000	82,206		857,158

24.1A

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF Iowa

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit						
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)		
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount	
		14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount								
Individual Life																	
1. Industrial	100	100						1	100							2	1,250
2. Whole	140,556	164,203						7	164,203	53,760			(3)	(1,100)	405	7,331,781	
3. Term	(65,200)												(15)	(271,233)	13	432,573	
4. Indexed																	
5. Universal	437,380	552,380						7	552,380						118	12,495,798	
6. Universal with secondary guarantees																	
7. Variable																	
8. Variable universal																	
9. Credit																	
10. Other																	
11. Total individual life	512,836	716,683						15	716,683	53,760			(28)	(1,123,590)	538	20,261,402	
Group Life																	
12. Whole																	
13. Term																	
14. Universal																	
15. Variable																	
16. Variable universal																	
17. Credit																	
18. Other																	
19. Total group life																	(a)
Individual Annuities																	
20. Fixed	135,727	58,269						5	58,269	98,873					338	3,128,709	
21. Indexed																	
22. Variable with guarantees																	
23. Variable without guarantees																	
24. Life contingent payout																	
25. Other																	
26. Total individual annuities	135,727	58,269						5	58,269	98,873			(18)	(13,130)	338	3,128,709	
Group Annuities																	
27. Fixed																	
28. Indexed																	
29. Variable with guarantees																	
30. Variable without guarantees																	
31. Life contingent payout																	
32. Other																	
33. Total group annuities																	
Accident and Health																	
34. Comprehensive individual (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
35. Comprehensive group (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
36. Medicare supplement (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
37. Vision only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
38. Dental only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
39. Federal employees health benefits plan (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
40. Title XVIII Medicare (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
41. Title XIX Medicaid (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
42. Credit A&H (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
43. Disability income (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
44. Long-term care (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
45. Other health (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
46. Total accident and health	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
47. Total	648,563	774,952	20					20	774,952	152,633			(46)	(1,136,720)	876	23,390,111	

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

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

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

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

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

(f) For health business report Direct Premiums Earned: Comprehensive Individual \$ _____; Comprehensive 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 \$ _____.

24.1 IA



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF Kansas

DURING THE YEAR 2025

NAIC Company Code 70130

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	230							6,008	1,672		7,680
2. Whole	23,707		3,915	405	1,833	6,153	247,226	8,054	34,569		289,849
3. Term	176,994						100,000				100,000
4. Indexed											
5. Universal	127,259						98,916			33,954	132,870
6. Universal with secondary guarantees											
7. Variable											
8. Variable universal											
9. Credit											
10. Other											
11. Total individual life	328,190		3,915	405	1,833	6,153	452,150	9,726	68,523		530,399
Group Life											
12. Whole											
13. Term											
14. Universal											
15. Variable											
16. Variable universal											
17. Credit											
18. Other											
19. Total group life											
Individual Annuities											
20. Fixed	2,535									2,268	2,268
21. Indexed											
22. Variable with guarantees											
23. Variable without guarantees											
24. Life contingent payout											
25. Other											
26. Total individual annuities	2,535									2,268	2,268
Group Annuities											
27. Fixed											
28. Indexed											
29. Variable with guarantees											
30. Variable without guarantees											
31. Life contingent payout											
32. Other											
33. Total group annuities											
Accident and Health											
34. Comprehensive individual	(d)	(f)						XXX	XXX	XXX	
35. Comprehensive group	(d)	(f)						XXX	XXX	XXX	
36. Medicare supplement	(d)	(f)						XXX	XXX	XXX	
37. Vision only	(d)	(f)						XXX	XXX	XXX	
38. Dental only	(d)	(f)						XXX	XXX	XXX	
39. Federal employees health benefits plan	(d)	(f)						XXX	XXX	XXX	
40. Title XVIII Medicare	(d)	(e, f)						XXX	XXX	XXX	
41. Title XIX Medicaid	(d)	(f)						XXX	XXX	XXX	
42. Credit A&H	(d)	(f)						XXX	XXX	XXX	
43. Disability income	(d)	(f)						XXX	XXX	XXX	
44. Long-term care	(d)	(f)						XXX	XXX	XXX	
45. Other health	(d)	(f)						XXX	XXX	XXX	21,296
46. Total accident and health								XXX	XXX	XXX	21,296
47. Total	330,725 (c)		3,915	405	1,833	6,153	452,150	9,726	70,791	21,296	553,963

24.KS

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF Kansas

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit						
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)		
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23 Number of Pols/Certs	24 Amount	25 Number of Pols/Certs	26 Amount	27 Number of Pols/Certs	28 Amount	
		14 Number of Pols/Certs	15 Amount	16 Number of Pols/Certs	17 Amount	18 Number of Pols/Certs	19 Amount	20 Number of Pols/Certs	21 Amount								
Individual Life																	
1. Industrial	3,180	7,680						13	7,680				(12)	(8,335)	382	319,392	
2. Whole	189,583	255,280						32	255,280	55,902			(47)	(227,265)	999	5,401,961	
3. Term	100,000	100,000						1	100,000				(12)	(484,266)	179	4,850,184	
4. Indexed																	
5. Universal	98,916	98,916						5	98,916				(12)	(280,327)	242	10,639,042	
6. Universal with secondary guarantees																	
7. Variable																	
8. Variable universal																	
9. Credit																	
10. Other																	
11. Total individual life	391,679	461,876	51	461,876				51	461,876	55,902			(83)	(1,000,193)	1,802	21,210,579	
Group Life																	
12. Whole																	
13. Term																	
14. Universal																	
15. Variable																	
16. Variable universal																	
17. Credit																(a)	
18. Other																	
19. Total group life																	
Individual Annuities																	
20. Fixed	19,977									19,977			(3)	(12,543)	38	490,131	
21. Indexed																	
22. Variable with guarantees																	
23. Variable without guarantees																	
24. Life contingent payout																	
25. Other																	
26. Total individual annuities	19,977									19,977			(3)	(12,543)	38	490,131	
Group Annuities																	
27. Fixed																	
28. Indexed																	
29. Variable with guarantees																	
30. Variable without guarantees																	
31. Life contingent payout																	
32. Other																	
33. Total group annuities																	
Accident and Health																	
34. Comprehensive individual (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
35. Comprehensive group (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
36. Medicare supplement (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
37. Vision only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
38. Dental only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
39. Federal employees health benefits plan (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
40. Title XVIII Medicare (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
41. Title XIX Medicaid (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
42. Credit A&H	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
43. Disability income (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
44. Long-term care (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
45. Other health (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
46. Total accident and health	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					3	1,200	
47. Total	411,656	461,876	51	461,876				51	461,876	75,879			(86)	(1,012,736)	1,843	21,701,910	

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

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

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

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

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

(f) For health business report Direct Premiums Earned: Comprehensive Individual \$ _____; Comprehensive 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 \$ _____.

24.1.KS



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF Kentucky

DURING THE YEAR 2025

NAIC Company Code 70130

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			434	693	907		2,034	525		333	858
2. Whole	9,469							30,755	450		31,205
3. Term	7,488									556	556
4. Indexed											
5. Universal	17,855										
6. Universal with secondary guarantees											
7. Variable											
8. Variable universal											
9. Credit											
10. Other											
11. Total individual life	34,812		434	693	907		2,034	31,280	450	889	32,619
Group Life											
12. Whole											
13. Term	5,857							7,500			7,500
14. Universal											
15. Variable											
16. Variable universal											
17. Credit											
18. Other											
19. Total group life	5,857							7,500			7,500
Individual Annuities											
20. Fixed	1,135									31,836	31,836
21. Indexed											
22. Variable with guarantees											
23. Variable without guarantees											
24. Life contingent payout											
25. Other											
26. Total individual annuities	1,135									31,836	31,836
Group Annuities											
27. Fixed											
28. Indexed											
29. Variable with guarantees											
30. Variable without guarantees											
31. Life contingent payout											
32. Other											
33. Total group annuities											
Accident and Health											
34. Comprehensive individual	(d) 215 (f)							XXX	XXX	XXX	
35. Comprehensive group	(d) (f)							XXX	XXX	XXX	
36. Medicare supplement	(d) (f)							XXX	XXX	XXX	
37. Vision only	(d) (f)							XXX	XXX	XXX	
38. Dental only	(d) (f)							XXX	XXX	XXX	
39. Federal employees health benefits plan	(d) (f)							XXX	XXX	XXX	
40. Title XVIII Medicare	(d) (e, f)							XXX	XXX	XXX	
41. Title XIX Medicaid	(d) (f)							XXX	XXX	XXX	
42. Credit A&H	(d) (f)							XXX	XXX	XXX	
43. Disability income	(d) (f)							XXX	XXX	XXX	
44. Long-term care	(d) (f)							XXX	XXX	XXX	
45. Other health	(d) (f)							XXX	XXX	XXX	
46. Total accident and health	215							XXX	XXX	XXX	
47. Total	42,019 (c)		434	693	907		2,034	38,780	450	32,725	71,955

24 KY

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF Kentucky

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit									
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)					
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount				
		14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount											
Individual Life																				
1. Industrial	525	1	525					1	525									12	13,770	
2. Whole	35,389	7	31,305					7	31,305	4,084			(9)	(7,805)			192	1,364,626		
3. Term	1,000									1,000			(4)	(20,050)			36	400,663		
4. Indexed																				
5. Universal																				
6. Universal with secondary guarantees																				
7. Variable																				
8. Variable universal																				
9. Credit																				
10. Other																				
11. Total individual life	36,914	8	31,830					8	31,830	5,084			(15)	(75,772)			276	4,683,721		
Group Life																				
12. Whole																				
13. Term	12,500	1	7,500					1	7,500	5,000										
14. Universal																				
15. Variable																				
16. Variable universal																				
17. Credit																				
18. Other																				
19. Total group life	12,500	1	7,500					1	7,500	5,000										
Individual Annuities																				
20. Fixed																				
21. Indexed																				
22. Variable with guarantees																				
23. Variable without guarantees																				
24. Life contingent payout																				
25. Other																				
26. Total individual annuities																				
Group Annuities																				
27. Fixed																				
28. Indexed																				
29. Variable with guarantees																				
30. Variable without guarantees																				
31. Life contingent payout																				
32. Other																				
33. Total group annuities																				
Accident and Health																				
34. Comprehensive individual (d)	XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								2	200	
35. Comprehensive group (d)	XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX										
36. Medicare supplement (d)	XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX										
37. Vision only (d)	XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX										
38. Dental only (d)	XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX										
39. Federal employees health benefits plan (d)	XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX										
40. Title XVIII Medicare (d)	XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX										
41. Title XIX Medicaid (d)	XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX										
42. Credit A&H (d)	XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX										
43. Disability income (d)	XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX										
44. Long-term care (d)	XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX										
45. Other health (d)	XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX										
46. Total accident and health	XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								2	400	
47. Total	49,414	9	39,330					9	39,330	10,084								328	5,342,700	

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

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

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

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

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

(f) For health business report Direct Premiums Earned: Comprehensive Individual \$ _____; Comprehensive 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 \$ _____.

24.1.KY



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF Louisiana

DURING THE YEAR 2025

NAIC Company Code 70130

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	14,551							33,716	12,106	3,890	49,712
2. Whole	57,125		221	115	703	1,039	72,762	1,000	7,186		80,948
3. Term	12,742						108,247		6,853		115,100
4. Indexed											
5. Universal	77,487						115,071		293		115,364
6. Universal with secondary guarantees											
7. Variable											
8. Variable universal											
9. Credit											
10. Other											
11. Total individual life	161,905		221	115	703	1,039	329,796	13,106	18,222		361,124
Group Life											
12. Whole											
13. Term											
14. Universal											
15. Variable											
16. Variable universal											
17. Credit											
18. Other											
19. Total group life											
Individual Annuities											
20. Fixed	740										
21. Indexed											
22. Variable with guarantees											
23. Variable without guarantees											
24. Life contingent payout											
25. Other											
26. Total individual annuities	740										
Group Annuities											
27. Fixed											
28. Indexed											
29. Variable with guarantees											
30. Variable without guarantees											
31. Life contingent payout											
32. Other											
33. Total group annuities											
Accident and Health											
34. Comprehensive individual	(d)	(f)						XXX	XXX	XXX	
35. Comprehensive group	(d)	(f)						XXX	XXX	XXX	
36. Medicare supplement	(d)	(f)						XXX	XXX	XXX	
37. Vision only	(d)	(f)						XXX	XXX	XXX	
38. Dental only	(d)	(f)						XXX	XXX	XXX	
39. Federal employees health benefits plan	(d)	(f)						XXX	XXX	XXX	
40. Title XVIII Medicare	(d)	(e, f)						XXX	XXX	XXX	
41. Title XIX Medicaid	(d)	(f)						XXX	XXX	XXX	
42. Credit A&H	(d)	(f)						XXX	XXX	XXX	
43. Disability income	(d)	(f)						XXX	XXX	XXX	
44. Long-term care	(d)	(f)						XXX	XXX	XXX	
45. Other health	(d)	(f)						XXX	XXX	XXX	
46. Total accident and health								XXX	XXX	XXX	
47. Total	162,645 (c)		221	115	703	1,039	329,796	13,106	18,222		361,124

24.LA

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF Louisiana

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit						
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)		
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount	
		14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount								
Individual Life																	
1. Industrial	56,422	88	45,822				88	45,822	17,600		(292)	(267,647)	7,716	6,742,507			
2. Whole	70,413	23	73,762				23	73,762	9,200		(49)	(139,496)	1,004	3,969,740			
3. Term	6,074	5	108,247				5	108,247	7,000		(27)	(168,869)	517	2,430,397			
4. Indexed																	
5. Universal	115,071	2	115,071				2	115,071			(6)	(365,276)	121	8,544,205			
6. Universal with secondary guarantees																	
7. Variable																	
8. Variable universal																	
9. Credit																	
10. Other																	
11. Total individual life	247,980	118	342,902				118	342,902	33,800		(374)	(941,288)	9,358	21,686,849			
Group Life																	
12. Whole																	
13. Term																	
14. Universal																	
15. Variable																	
16. Variable universal																	
17. Credit																	
18. Other																	
19. Total group life																	
Individual Annuities																	
20. Fixed	11,455								11,455		(2)	(9,926)	25	104,128			
21. Indexed																	
22. Variable with guarantees																	
23. Variable without guarantees																	
24. Life contingent payout																	
25. Other																	
26. Total individual annuities	11,455								11,455		(2)	(9,926)	25	104,128			
Group Annuities																	
27. Fixed																	
28. Indexed																	
29. Variable with guarantees																	
30. Variable without guarantees																	
31. Life contingent payout																	
32. Other																	
33. Total group annuities																	
Accident and Health																	
34. Comprehensive individual (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
35. Comprehensive group (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
36. Medicare supplement (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
37. Vision only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
38. Dental only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
39. Federal employees health benefits plan (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
40. Title XVIII Medicare (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
41. Title XIX Medicaid (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
42. Credit A&H (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
43. Disability income (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
44. Long-term care (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
45. Other health (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
46. Total accident and health	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
47. Total	259,435	118	342,902				118	342,902	45,255		(376)	(951,214)	9,383	21,790,977			

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

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

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

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

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

(f) For health business report Direct Premiums Earned: Comprehensive Individual \$ _____; Comprehensive 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 \$ _____

24.1.LA



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF Maine

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members				Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life											
1. Industrial											
2. Whole	69		572				572	1,473			1,473
3. Term											
4. Indexed											
5. Universal								231,332			231,332
6. Universal with secondary guarantees											
7. Variable											
8. Variable universal											
9. Credit											
10. Other											
11. Total individual life	69		572				572	232,805			232,805
Group Life											
12. Whole											
13. Term											
14. Universal											
15. Variable											
16. Variable universal											
17. Credit											
18. Other											
19. Total group life											
Individual Annuities											
20. Fixed											
21. Indexed											
22. Variable with guarantees											
23. Variable without guarantees											
24. Life contingent payout											
25. Other											
26. Total individual annuities											
Group Annuities											
27. Fixed											
28. Indexed											
29. Variable with guarantees											
30. Variable without guarantees											
31. Life contingent payout											
32. Other											
33. Total group annuities											
Accident and Health											
34. Comprehensive individual	(d)	(f)						XXX	XXX	XXX	
35. Comprehensive group	(d)	(f)						XXX	XXX	XXX	
36. Medicare supplement	(d)	(f)						XXX	XXX	XXX	
37. Vision only	(d)	(f)						XXX	XXX	XXX	
38. Dental only	(d)	(f)						XXX	XXX	XXX	
39. Federal employees health benefits plan	(d)	(f)						XXX	XXX	XXX	
40. Title XVIII Medicare	(d)	(e, f)						XXX	XXX	XXX	
41. Title XIX Medicaid	(d)	(f)						XXX	XXX	XXX	
42. Credit A&H	(d)	(f)						XXX	XXX	XXX	
43. Disability income	(d)	(f)						XXX	XXX	XXX	
44. Long-term care	(d)	(f)						XXX	XXX	XXX	
45. Other health	(d)	(f)						XXX	XXX	XXX	
46. Total accident and health								XXX	XXX	XXX	
47. Total	69 (c)		572				572	232,805			232,805

24 ME

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF Maine

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit						
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	23 Issued During Year		25 Other Changes to In Force (Net)		27 In Force December 31, Current Year (b)		
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			24 Number of Pols/ Certs	26 Amount	28 Number of Pols/ Certs	29 Amount	30 Number of Pols/ Certs	31 Amount	
		14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount								
Individual Life																	
1. Industrial																	
2. Whole	1,473	1,473							1,473					(1,473)	14	128,773	
3. Term																	
4. Indexed																	
5. Universal	231,332	231,332							231,332					(229,173)			
6. Universal with secondary guarantees																	
7. Variable																	
8. Variable universal																	
9. Credit																	
10. Other																	
11. Total individual life	232,805	232,805							232,805					(230,646)	15	133,773	
Group Life																	
12. Whole																	
13. Term																	
14. Universal																	
15. Variable																	
16. Variable universal																	
17. Credit																(a)	
18. Other																	
19. Total group life																	
Individual Annuities																	
20. Fixed																980	
21. Indexed																	
22. Variable with guarantees																	
23. Variable without guarantees																	
24. Life contingent payout																	
25. Other																	
26. Total individual annuities																980	
Group Annuities																	
27. Fixed																	
28. Indexed																	
29. Variable with guarantees																	
30. Variable without guarantees																	
31. Life contingent payout																	
32. Other																	
33. Total group annuities																	
Accident and Health																	
34. Comprehensive individual (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
35. Comprehensive group (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
36. Medicare supplement (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
37. Vision only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
38. Dental only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
39. Federal employees health benefits plan (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
40. Title XVIII Medicare (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
41. Title XIX Medicaid (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
42. Credit A&H (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
43. Disability income (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
44. Long-term care (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
45. Other health (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
46. Total accident and health	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
47. Total	232,805	232,805							232,805					(2)	(229,666)	17	166,679

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

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

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

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

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

(f) For health business report Direct Premiums Earned: Comprehensive Individual \$ _____; Comprehensive 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 \$ _____.

24.1.ME



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF Maryland

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members				7 Total (Col. 3+4+5+6)	Claims and Benefits Paid					
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other		8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)	
Individual Life													
1. Industrial	38							2,019			3,089		5,108
2. Whole	2,430		467				467	8,400		16,347			24,747
3. Term	3,676												
4. Indexed													
5. Universal	1,496												
6. Universal with secondary guarantees													
7. Variable													
8. Variable universal													
9. Credit													
10. Other													
11. Total individual life	7,640		467				467	10,419		19,436			29,855
Group Life													
12. Whole													
13. Term													
14. Universal													
15. Variable													
16. Variable universal													
17. Credit													
18. Other													
19. Total group life													
Individual Annuities													
20. Fixed	1,040									51,889			51,889
21. Indexed													
22. Variable with guarantees													
23. Variable without guarantees													
24. Life contingent payout													
25. Other													
26. Total individual annuities	1,040									51,889			51,889
Group Annuities													
27. Fixed													
28. Indexed													
29. Variable with guarantees													
30. Variable without guarantees													
31. Life contingent payout													
32. Other													
33. Total group annuities													
Accident and Health													
34. Comprehensive individual	(d)	(f)						XXX	XXX	XXX			
35. Comprehensive group	(d)	(f)						XXX	XXX	XXX			
36. Medicare supplement	(d)	(f)						XXX	XXX	XXX			
37. Vision only	(d)	(f)						XXX	XXX	XXX			
38. Dental only	(d)	(f)						XXX	XXX	XXX			
39. Federal employees health benefits plan	(d)	(f)						XXX	XXX	XXX			
40. Title XVIII Medicare	(d)	(e, f)						XXX	XXX	XXX			
41. Title XIX Medicaid	(d)	(f)						XXX	XXX	XXX			
42. Credit A&H	(d)	(f)						XXX	XXX	XXX			
43. Disability income	(d)	(f)						XXX	XXX	XXX			
44. Long-term care	(d)	(f)						XXX	XXX	XXX			
45. Other health	(d)	(f)						XXX	XXX	XXX			
46. Total accident and health								XXX	XXX	XXX			
47. Total	8,680 (c)		467				467	10,419		71,325			81,744

24-MD

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF Maryland

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	13 Incurred During Current Year	13 Claims Settled During Current Year								22 Unpaid December 31, Current Year	22 Policy Exhibit						
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)		
		14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount		23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount	
Individual Life																	
1. Industrial	19	1	2,019					1	2,019				(5)	(6,000)	40	38,997	
2. Whole	8,400	2	8,400					2	8,400				(6)	(258,723)	88	480,865	
3. Term													(1)	(50,000)	25	220,287	
4. Indexed																	
5. Universal													(1)	(50,000)	6	230,798	
6. Universal with secondary guarantees																	
7. Variable																	
8. Variable universal																	
9. Credit																	
10. Other																	
11. Total individual life	8,419	3	10,419					3	10,419				(13)	(364,723)	159	970,947	
Group Life																	
12. Whole																	
13. Term																	
14. Universal																	
15. Variable																	
16. Variable universal																	
17. Credit																(a)	
18. Other																	
19. Total group life																	
Individual Annuities																	
20. Fixed													(1)	(43,750)	10	156,708	
21. Indexed																	
22. Variable with guarantees																	
23. Variable without guarantees																	
24. Life contingent payout																	
25. Other																	
26. Total individual annuities													(1)	(43,750)	10	156,708	
Group Annuities																	
27. Fixed																	
28. Indexed																	
29. Variable with guarantees																	
30. Variable without guarantees																	
31. Life contingent payout																	
32. Other																	
33. Total group annuities																	
Accident and Health																	
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
36. Medicare supplement (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
42. Credit A&H (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
43. Disability income (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
44. Long-term care (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
45. Other health (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
46. Total accident and health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
47. Total	8,419	3	10,419					3	10,419				(14)	(408,473)	169	1,127,655	

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

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

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

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

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

(f) For health business report Direct Premiums Earned: Comprehensive Individual \$ _____; Comprehensive 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 \$ _____.

24.1.MD



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF Massachusetts

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members				7 Total (Col. 3+4+5+6)	Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other		8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial												
2. Whole	1,207		316	132			448			3,988		3,988
3. Term										1,203		1,203
4. Indexed												
5. Universal	6,039											
6. Universal with secondary guarantees												
7. Variable												
8. Variable universal												
9. Credit												
10. Other												
11. Total individual life	7,246		316	132			448			5,191		5,191
Group Life												
12. Whole												
13. Term												
14. Universal												
15. Variable												
16. Variable universal												
17. Credit												
18. Other												
19. Total group life												
Individual Annuities												
20. Fixed	160											
21. Indexed												
22. Variable with guarantees												
23. Variable without guarantees												
24. Life contingent payout												
25. Other												
26. Total individual annuities	160											
Group Annuities												
27. Fixed												
28. Indexed												
29. Variable with guarantees												
30. Variable without guarantees												
31. Life contingent payout												
32. Other												
33. Total group annuities												
Accident and Health												
34. Comprehensive individual	(d)	(f)						XXX	XXX	XXX		
35. Comprehensive group	(d)	(f)						XXX	XXX	XXX		
36. Medicare supplement	(d)	(f)						XXX	XXX	XXX		
37. Vision only	(d)	(f)						XXX	XXX	XXX		
38. Dental only	(d)	(f)						XXX	XXX	XXX		
39. Federal employees health benefits plan	(d)	(f)						XXX	XXX	XXX		
40. Title XVIII Medicare	(d)	(e, f)						XXX	XXX	XXX		
41. Title XIX Medicaid	(d)	(f)						XXX	XXX	XXX		
42. Credit A&H		(f)						XXX	XXX	XXX		
43. Disability income		(d)						XXX	XXX	XXX		
44. Long-term care		(d)						XXX	XXX	XXX		
45. Other health		(d)						XXX	XXX	XXX		
46. Total accident and health								XXX	XXX	XXX		
47. Total	7,406 (c)		316	132			448			5,191		5,191

24-MA

**ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE) (Continued)^(b)**

NAIC Group Code 0000

BUSINESS IN THE STATE OF Massachusetts

DURING THE YEAR 2025

NAIC Company Code 70130

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

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

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

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

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

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

(f) For health business report Direct Premiums Earned: Comprehensive Individual \$ _____; Comprehensive 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 \$ _____.

24.1.MA



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF Michigan

DURING THE YEAR 2025

NAIC Company Code 70130

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	164							3,003		196	3,199
2. Whole	17,364		1,576	549	194	2,319	73,150	12,000	16,657	101,807	
3. Term	10,198								2,537	2,537	
4. Indexed											
5. Universal	76,820						183,746		63,548	247,294	
6. Universal with secondary guarantees											
7. Variable											
8. Variable universal											
9. Credit											
10. Other											
11. Total individual life	104,546		1,576	549	194	2,319	259,899	12,000	82,938	354,837	
Group Life											
12. Whole											
13. Term											
14. Universal											
15. Variable											
16. Variable universal											
17. Credit											
18. Other											
19. Total group life											
Individual Annuities											
20. Fixed	297								33,528	33,528	
21. Indexed											
22. Variable with guarantees											
23. Variable without guarantees											
24. Life contingent payout											
25. Other											
26. Total individual annuities	297								33,528	33,528	
Group Annuities											
27. Fixed											
28. Indexed											
29. Variable with guarantees											
30. Variable without guarantees											
31. Life contingent payout											
32. Other											
33. Total group annuities											
Accident and Health											
34. Comprehensive individual	84 (f)							XXX	XXX	XXX	
35. Comprehensive group	(f)							XXX	XXX	XXX	
36. Medicare supplement	(f)							XXX	XXX	XXX	
37. Vision only	(f)							XXX	XXX	XXX	
38. Dental only	(f)							XXX	XXX	XXX	
39. Federal employees health benefits plan	(f)							XXX	XXX	XXX	
40. Title XVIII Medicare	(d) (e, f)							XXX	XXX	XXX	
41. Title XIX Medicaid	(d) (f)							XXX	XXX	XXX	
42. Credit A&H	(f)							XXX	XXX	XXX	
43. Disability income	(f)							XXX	XXX	XXX	
44. Long-term care	(d) (f)							XXX	XXX	XXX	
45. Other health	(d) (f)							XXX	XXX	XXX	
46. Total accident and health	84							XXX	XXX	XXX	
47. Total	104,927 (c)		1,576	549	194	2,319	259,899	12,000	116,466	388,365	

24.MI

**ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE) (Continued)^(b)**

NAIC Group Code 0000 BUSINESS IN THE STATE OF Michigan DURING THE YEAR 2025 NAIC Company Code 70130

Line of Business	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Policy Exhibit						
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)		
		14 Number of Pols/Certs	15 Amount	16 Number of Pols/Certs	17 Amount	18 Number of Pols/Certs	19 Amount	20 Number of Pols/Certs	21 Amount		23 Number of Pols/Certs	24 Amount	25 Number of Pols/Certs	26 Amount	27 Number of Pols/Certs	28 Amount	
Individual Life																	
1. Industrial	3,003	3,003					2	3,003			(6)	(5,500)	49	39,711			
2. Whole	89,038	85,150					15	85,150	9,542		(20)	(200,157)	350	1,818,592			
3. Term											(4)	23,112	31	683,995			
4. Indexed																	
5. Universal	218,047	183,746					3	183,746	34,300		(16)	(929,853)	132	6,948,848			
6. Universal with secondary guarantees																	
7. Variable																	
8. Variable universal																	
9. Credit																	
10. Other																	
11. Total individual life	310,088	271,899					20	271,899	43,842		(46)	(1,112,398)	562	9,491,146			
Group Life																	
12. Whole																	
13. Term																	
14. Universal																	
15. Variable																	
16. Variable universal																	
17. Credit																	
18. Other																	
19. Total group life																	
Individual Annuities																	
20. Fixed												(25,526)	31	255,471			
21. Indexed																	
22. Variable with guarantees																	
23. Variable without guarantees																	
24. Life contingent payout																	
25. Other																	
26. Total individual annuities												(25,526)	31	255,471			
Group Annuities																	
27. Fixed																	
28. Indexed																	
29. Variable with guarantees																	
30. Variable without guarantees																	
31. Life contingent payout																	
32. Other																	
33. Total group annuities																	
Accident and Health																	
34. Comprehensive individual (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				1	100		
35. Comprehensive group (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
36. Medicare supplement (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
37. Vision only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
38. Dental only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
39. Federal employees health benefits plan (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
40. Title XVIII Medicare (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
41. Title XIX Medicaid (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
42. Credit A&H (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
43. Disability income (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
44. Long-term care (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
45. Other health (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
46. Total accident and health	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				1	100		
47. Total	310,088	271,899					20	271,899	43,842		(46)	(1,137,924)	594	9,746,717			

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

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

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

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

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

(f) For health business report Direct Premiums Earned: Comprehensive Individual \$ _____; Comprehensive 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 \$ _____.

24.1 MI



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company

LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF Minnesota

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members				7 Total (Col. 3+4+5+6)	Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other		8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial												
2. Whole	1,532		409	31	18	458	28,992			448		448
3. Term												
4. Indexed												
5. Universal	1,754											
6. Universal with secondary guarantees												
7. Variable												
8. Variable universal												
9. Credit												
10. Other												
11. Total individual life	3,286		409	31	18	458	28,992			448		29,440
Group Life												
12. Whole												
13. Term												
14. Universal												
15. Variable												
16. Variable universal												
17. Credit												
18. Other												
19. Total group life												
Individual Annuities												
20. Fixed												
21. Indexed												
22. Variable with guarantees												
23. Variable without guarantees												
24. Life contingent payout												
25. Other												
26. Total individual annuities												
Group Annuities												
27. Fixed												
28. Indexed												
29. Variable with guarantees												
30. Variable without guarantees												
31. Life contingent payout												
32. Other												
33. Total group annuities												
Accident and Health												
34. Comprehensive individual	(d)	(f)					XXX	XXX	XXX			
35. Comprehensive group	(d)	(f)					XXX	XXX	XXX			
36. Medicare supplement	(d)	(f)					XXX	XXX	XXX			
37. Vision only	(d)	(f)					XXX	XXX	XXX			
38. Dental only	(d)	(f)					XXX	XXX	XXX			
39. Federal employees health benefits plan	(d)	(f)					XXX	XXX	XXX			
40. Title XVIII Medicare	(d)	(e, f)					XXX	XXX	XXX			
41. Title XIX Medicaid	(d)	(f)					XXX	XXX	XXX			
42. Credit A&H	(d)	(f)					XXX	XXX	XXX			
43. Disability income	(d)	(f)					XXX	XXX	XXX			
44. Long-term care	(d)	(f)					XXX	XXX	XXX			
45. Other health	(d)	(f)					XXX	XXX	XXX			
46. Total accident and health							XXX	XXX	XXX			
47. Total	3,286 (c)		409	31	18	458	28,992			448		29,440

24-MIN

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF Minnesota

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit						
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)		
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount	
		14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount								
Individual Life																	
1. Industrial																	
2. Whole	28,992	6	28,992					6	28,992				(6)	(29,696)	6	4,500	
3. Term															6	19,949	
4. Indexed																	
5. Universal																	
6. Universal with secondary guarantees																5,970	
7. Variable																	
8. Variable universal																	
9. Credit																	
10. Other																	
11. Total individual life	28,992	6	28,992					6	28,992				(6)	(23,726)	86	807,537	
Group Life																	
12. Whole																	
13. Term																	
14. Universal																	
15. Variable																	
16. Variable universal																	
17. Credit																(a)	
18. Other																	
19. Total group life																	
Individual Annuities																	
20. Fixed																1,542	
21. Indexed																	
22. Variable with guarantees																	
23. Variable without guarantees																	
24. Life contingent payout																	
25. Other																	
26. Total individual annuities																1,542	
Group Annuities																	
27. Fixed																	
28. Indexed																	
29. Variable with guarantees																	
30. Variable without guarantees																	
31. Life contingent payout																	
32. Other																	
33. Total group annuities																	
Accident and Health																	
34. Comprehensive individual (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
35. Comprehensive group (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
36. Medicare supplement (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
37. Vision only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
38. Dental only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
39. Federal employees health benefits plan (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
40. Title XVIII Medicare (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
41. Title XIX Medicaid (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
42. Credit A&H (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
43. Disability income (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
44. Long-term care (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
45. Other health (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
46. Total accident and health	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
47. Total	28,992	6	28,992					6	28,992				(6)	(22,184)	95	845,502	

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

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

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

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

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

(f) For health business report Direct Premiums Earned: Comprehensive Individual \$ _____; Comprehensive 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 \$ _____.

24.1.MN



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF Mississippi

DURING THE YEAR 2025

NAIC Company Code 70130

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	19,391							26,131	21,728	4,017	51,876
2. Whole	28,989		323	852	1,982	3,157	15,816	9,161	4,663	29,640	
3. Term	15,940						3,130			3,130	
4. Indexed											
5. Universal	39,214							33,495		34,445	67,940
6. Universal with secondary guarantees											
7. Variable											
8. Variable universal											
9. Credit											
10. Other											
11. Total individual life	103,534		323	852	1,982	3,157	78,572	30,889	43,125	152,586	
Group Life											
12. Whole											
13. Term											
14. Universal											
15. Variable											
16. Variable universal											
17. Credit											
18. Other											
19. Total group life											
Individual Annuities											
20. Fixed	704								2,100	2,100	
21. Indexed											
22. Variable with guarantees											
23. Variable without guarantees											
24. Life contingent payout											
25. Other											
26. Total individual annuities	704								2,100	2,100	
Group Annuities											
27. Fixed											
28. Indexed											
29. Variable with guarantees											
30. Variable without guarantees											
31. Life contingent payout											
32. Other											
33. Total group annuities											
Accident and Health											
34. Comprehensive individual (d) (f)							XXX	XXX	XXX		
35. Comprehensive group (d) (f)							XXX	XXX	XXX		
36. Medicare supplement (d) (f)							XXX	XXX	XXX		
37. Vision only (d) (f)							XXX	XXX	XXX		
38. Dental only (d) (f)							XXX	XXX	XXX		
39. Federal employees health benefits plan (d) (f)							XXX	XXX	XXX		
40. Title XVIII Medicare (d) (e, f)							XXX	XXX	XXX		
41. Title XIX Medicaid (d) (f)							XXX	XXX	XXX		
42. Credit A&H (d) (f)							XXX	XXX	XXX		
43. Disability income (d) (f)							XXX	XXX	XXX		
44. Long-term care (d) (f)							XXX	XXX	XXX		
45. Other health (d) (f)							XXX	XXX	XXX		
46. Total accident and health							XXX	XXX	XXX		
47. Total	104,238 (c)		323	852	1,982	3,157	78,572	30,889	45,225	154,686	

24 MS

**ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE) (Continued)^(b)**

NAIC Group Code 0000 BUSINESS IN THE STATE OF Mississippi DURING THE YEAR 2025 NAIC Company Code 70130

Line of Business	13 Incurred During Current Year	13 Claims Settled During Current Year								22 Unpaid December 31, Current Year	22 Policy Exhibit							
		Totals Paid				Reduction by Compromise		Amount Rejected			Total Settled During Current Year		Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount		23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount		
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)			
Individual Life																		
1. Industrial	50,776	321	47,858				321	47,858	4,500		(718)	(307,642)	11,611	4,588,685				
2. Whole	32,331	10	24,977				10	24,977	10,354		(18)	(143,872)	569	1,965,152				
3. Term	2,380	2	3,130				2	3,130			(33)	(162,360)	328	1,552,141				
4. Indexed																		
5. Universal	33,495	2	33,495				2	33,495			(8)	(517,900)	72	5,378,503				
6. Universal with secondary guarantees																		
7. Variable																		
8. Variable universal																		
9. Credit																		
10. Other																		
11. Total individual life	118,982	335	109,460				335	109,460	14,854		(777)	(1,131,774)	12,580	13,484,481				
Group Life																		
12. Whole																		
13. Term																		
14. Universal																		
15. Variable																		
16. Variable universal																		
17. Credit																		
18. Other																		
19. Total group life														(a)				
Individual Annuities																		
20. Fixed	40,892								40,892		(2)	(30,887)	19	272,684				
21. Indexed																		
22. Variable with guarantees																		
23. Variable without guarantees																		
24. Life contingent payout																		
25. Other																		
26. Total individual annuities	40,892								40,892		(2)	(30,887)	19	272,684				
Group Annuities																		
27. Fixed																		
28. Indexed																		
29. Variable with guarantees																		
30. Variable without guarantees																		
31. Life contingent payout																		
32. Other																		
33. Total group annuities																		
Accident and Health																		
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
36. Medicare supplement (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
43. Disability income (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
44. Long-term care (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
45. Other health (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
46. Total accident and health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
47. Total	159,874	335	109,460				335	109,460	55,746		(779)	(1,162,661)	12,599	13,757,165				

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

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

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

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

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

(f) For health business report Direct Premiums Earned: Comprehensive Individual \$ _____; Comprehensive 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 \$ _____

24.1.MS



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF Missouri

DURING THE YEAR 2025

NAIC Company Code 70130

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	1,234						7,023	3,762	1,058		11,843
2. Whole	36,872		4,733	1,351	277	6,361	191,000	7,280	156,203		354,483
3. Term	7,489						100,000		3,987		103,987
4. Indexed											
5. Universal	136,181						211,895	5,529	18,879		236,303
6. Universal with secondary guarantees											
7. Variable											
8. Variable universal											
9. Credit											
10. Other											
11. Total individual life	181,776		4,733	1,351	277	6,361	509,918	16,571	180,127		706,616
Group Life											
12. Whole											
13. Term											
14. Universal											
15. Variable											
16. Variable universal											
17. Credit											
18. Other											
19. Total group life											
Individual Annuities											
20. Fixed	5,806						70,988		8,545		79,533
21. Indexed											
22. Variable with guarantees											
23. Variable without guarantees											
24. Life contingent payout											
25. Other											
26. Total individual annuities	5,806						70,988		8,545		79,533
Group Annuities											
27. Fixed											
28. Indexed											
29. Variable with guarantees											
30. Variable without guarantees											
31. Life contingent payout											
32. Other											
33. Total group annuities											
Accident and Health											
34. Comprehensive individual	(d)	(f)					XXX	XXX	XXX		
35. Comprehensive group	(d)	(f)					XXX	XXX	XXX		
36. Medicare supplement	(d)	(f)					XXX	XXX	XXX		
37. Vision only	(d)	(f)					XXX	XXX	XXX		
38. Dental only	(d)	(f)					XXX	XXX	XXX		
39. Federal employees health benefits plan	(d)	(f)					XXX	XXX	XXX		
40. Title XVIII Medicare	(d)	(e, f)					XXX	XXX	XXX		
41. Title XIX Medicaid	(d)	(f)					XXX	XXX	XXX		
42. Credit A&H	(d)	(f)					XXX	XXX	XXX		
43. Disability income	(d)	(f)					XXX	XXX	XXX		
44. Long-term care	(d)	(f)					XXX	XXX	XXX		
45. Other health	(d)	(f)					XXX	XXX	XXX	3,600	3,600
46. Total accident and health							XXX	XXX	XXX	3,600	3,600
47. Total	187,582 (c)		4,733	1,351	277	6,361	580,906	16,571	188,672	3,600	789,749

24-MO

**ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE) (Continued)^(b)**

NAIC Group Code 0000

BUSINESS IN THE STATE OF Missouri

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	13 Incurred During Current Year	22 Claims Settled During Current Year								22 Unpaid December 31, Current Year	Policy Exhibit					
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23 Issued During Year		25 Other Changes to In Force (Net)		27 In Force December 31, Current Year (b)	
		14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount		23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount
Individual Life																
1. Industrial	10,785	22	10,785					22	10,785			(48)	(44,059)	1,161	922,428	
2. Whole	195,034	35	198,280					35	198,280	17,243		(57)	(397,914)	1,195	7,369,376	
3. Term	100,000	1	100,000					1	100,000			(10)	(111,577)	195	1,284,657	
4. Indexed																
5. Universal	297,424	6	217,425					6	217,425	80,000		(15)	(767,751)	287	16,100,817	
6. Universal with secondary guarantees																
7. Variable																
8. Variable universal																
9. Credit																
10. Other																
11. Total individual life	603,243	64	526,490					64	526,490	97,243		(130)	(1,321,301)	2,838	25,617,278	
Group Life																
12. Whole																
13. Term																
14. Universal																
15. Variable																
16. Variable universal																
17. Credit															(a)	
18. Other																
19. Total group life																
Individual Annuities																
20. Fixed	70,988	6	70,988					6	70,988			(6)	(12,689)	140	1,576,836	
21. Indexed																
22. Variable with guarantees																
23. Variable without guarantees																
24. Life contingent payout																
25. Other																
26. Total individual annuities	70,988	6	70,988					6	70,988			(6)	(12,689)	140	1,576,836	
Group Annuities																
27. Fixed																
28. Indexed																
29. Variable with guarantees																
30. Variable without guarantees																
31. Life contingent payout																
32. Other																
33. Total group annuities																
Accident and Health																
34. Comprehensive individual (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
37. Vision only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
44. Long-term care (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
45. Other health (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
46. Total accident and health	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				1	100	
47. Total	674,231	70	597,478					70	597,478	97,243		(136)	(1,333,990)	2,979	27,254,214	

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

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

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

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

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

(f) For health business report Direct Premiums Earned: Comprehensive Individual \$ _____; Comprehensive 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 \$ _____.

24.1.MO



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF Montana

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	Dividends to Policyholders/Refunds to Members						Claims and Benefits Paid					
	1 Premiums and Annuities Considerations	2 Other Considerations	3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial												
2. Whole .....	.917											
3. Term												
4. Indexed												
5. Universal	22,912											
6. Universal with secondary guarantees												
7. Variable												
8. Variable universal												
9. Credit												
10. Other												
11. Total individual life	23,829											
Group Life												
12. Whole												
13. Term												
14. Universal												
15. Variable												
16. Variable universal												
17. Credit												
18. Other												
19. Total group life												
Individual Annuities												
20. Fixed	80											
21. Indexed												
22. Variable with guarantees												
23. Variable without guarantees												
24. Life contingent payout												
25. Other												
26. Total individual annuities	80											
Group Annuities												
27. Fixed												
28. Indexed												
29. Variable with guarantees												
30. Variable without guarantees												
31. Life contingent payout												
32. Other												
33. Total group annuities												
Accident and Health												
34. Comprehensive individual	(d)	(f)						XXX	XXX	XXX		
35. Comprehensive group	(d)	(f)						XXX	XXX	XXX		
36. Medicare supplement	(d)	(f)						XXX	XXX	XXX		
37. Vision only	(d)	(f)						XXX	XXX	XXX		
38. Dental only	(d)	(f)						XXX	XXX	XXX		
39. Federal employees health benefits plan	(d)	(f)						XXX	XXX	XXX		
40. Title XVIII Medicare	(d)	(e, f)						XXX	XXX	XXX		
41. Title XIX Medicaid	(d)	(f)						XXX	XXX	XXX		
42. Credit A&H	(d)	(f)						XXX	XXX	XXX		
43. Disability income	(d)	(f)						XXX	XXX	XXX		
44. Long-term care	(d)	(f)						XXX	XXX	XXX		
45. Other health	(d)	(f)						XXX	XXX	XXX		
46. Total accident and health								XXX	XXX	XXX		
47. Total	23,909 (c)											

24-MT

**ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE) (Continued)^(b)**

NAIC Group Code 0000

BUSINESS IN THE STATE OF Montana

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Policy Exhibit					
		Claims Settled During Current Year									23 Issued During Year		25 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			24 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount
		14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount		23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount
Individual Life																
1. Industrial																
2. Whole														36	241,120	
3. Term														2	11,221	
4. Indexed																
5. Universal													(1)	41	1,645,490	
6. Universal with secondary guarantees																
7. Variable																
8. Variable universal																
9. Credit																
10. Other																
11. Total individual life													(1)	79	1,897,831	
Group Life																
12. Whole																
13. Term																
14. Universal																
15. Variable																
16. Variable universal																
17. Credit															(a)	
18. Other																
19. Total group life																
Individual Annuities																
20. Fixed																
21. Indexed																
22. Variable with guarantees																
23. Variable without guarantees																
24. Life contingent payout																
25. Other																
26. Total individual annuities													1,184	2	28,856	
Group Annuities																
27. Fixed																
28. Indexed																
29. Variable with guarantees																
30. Variable without guarantees																
31. Life contingent payout																
32. Other																
33. Total group annuities													1,184	2	28,856	
Accident and Health																
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
36. Medicare supplement (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
42. Credit A&H (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
43. Disability income (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
44. Long-term care (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
45. Other health (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
46. Total accident and health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
47. Total													(1)	81	1,926,687	

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

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

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

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

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

(f) For health business report Direct Premiums Earned: Comprehensive Individual \$ _____; Comprehensive 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 \$ _____.

24.1.MT



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF Nebraska

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members				7 Total (Col. 3+4+5+6)	Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other		8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial												
2. Whole	4,628		84	119	20	223	2,001	6,010	16,399			24,410
3. Term	220											
4. Indexed												
5. Universal	40,008						50,379		66,564			116,943
6. Universal with secondary guarantees												
7. Variable												
8. Variable universal												
9. Credit												
10. Other												
11. Total individual life	44,856		84	119	20	223	52,380	6,010	82,963			141,353
Group Life												
12. Whole												
13. Term												
14. Universal												
15. Variable												
16. Variable universal												
17. Credit												
18. Other												
19. Total group life												
Individual Annuities												
20. Fixed	2,075							136	33,892			34,028
21. Indexed												
22. Variable with guarantees												
23. Variable without guarantees												
24. Life contingent payout												
25. Other												
26. Total individual annuities	2,075							136	33,892			34,028
Group Annuities												
27. Fixed												
28. Indexed												
29. Variable with guarantees												
30. Variable without guarantees												
31. Life contingent payout												
32. Other												
33. Total group annuities												
Accident and Health												
34. Comprehensive individual (d) (f)							XXX	XXX	XXX			
35. Comprehensive group (d) (f)							XXX	XXX	XXX			
36. Medicare supplement (d) (f)							XXX	XXX	XXX			
37. Vision only (d) (f)							XXX	XXX	XXX			
38. Dental only (d) (f)							XXX	XXX	XXX			
39. Federal employees health benefits plan (d) (f)							XXX	XXX	XXX			
40. Title XVIII Medicare (d) (e, f)							XXX	XXX	XXX			
41. Title XIX Medicaid (d) (f)							XXX	XXX	XXX			
42. Credit A&H (d) (f)							XXX	XXX	XXX			
43. Disability income (d) (f)							XXX	XXX	XXX			
44. Long-term care (d) (f)							XXX	XXX	XXX			
45. Other health (d) (f)							XXX	XXX	XXX			
46. Total accident and health							XXX	XXX	XXX			
47. Total	46,931 (c)		84	119	20	223	52,516	6,010	116,855			175,381

24.NE

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code 0000 BUSINESS IN THE STATE OF Nebraska DURING THE YEAR 2025 NAIC Company Code 70130

Line of Business	13 Incurred During Current Year	13 Claims Settled During Current Year								22 Unpaid December 31, Current Year	22 Policy Exhibit					
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount		23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount
Individual Life																
1. Industrial																
2. Whole	8,010		2	8,010				2	8,010						2	1,500
3. Term																
4. Indexed																
5. Universal	25,379		2	50,379				2	50,379							
6. Universal with secondary guarantees																
7. Variable																
8. Variable universal																
9. Credit																
10. Other																
11. Total individual life	33,389	4	58,389					4	58,389				(10)	(549,956)	136	6,067,331
Group Life																
12. Whole																
13. Term																
14. Universal																
15. Variable																
16. Variable universal																
17. Credit																(a)
18. Other																
19. Total group life																
Individual Annuities																
20. Fixed	22,645		136						136	22,509			(11)	(37,191)	139	979,508
21. Indexed																
22. Variable with guarantees																
23. Variable without guarantees																
24. Life contingent payout																
25. Other																
26. Total individual annuities	22,645		136						136	22,509			(11)	(37,191)	139	979,508
Group Annuities																
27. Fixed																
28. Indexed																
29. Variable with guarantees																
30. Variable without guarantees																
31. Life contingent payout																
32. Other																
33. Total group annuities																
Accident and Health																
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
36. Medicare supplement (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
43. Disability income (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
44. Long-term care (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
45. Other health (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
46. Total accident and health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
47. Total	56,034	4	58,525					4	58,525	22,509			(21)	(587,147)	275	7,046,839

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

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

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

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

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

(f) For health business report Direct Premiums Earned: Comprehensive Individual \$ _____; Comprehensive 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 \$ _____



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF Nevada

DURING THE YEAR 2025

NAIC Company Code 70130

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	34										
2. Whole	1,064		420		40	460	363				363
3. Term											
4. Indexed											
5. Universal	2,428										
6. Universal with secondary guarantees											
7. Variable											
8. Variable universal											
9. Credit											
10. Other											
11. Total individual life	3,526		420		40	460	363				363
Group Life											
12. Whole											
13. Term											
14. Universal											
15. Variable											
16. Variable universal											
17. Credit											
18. Other											
19. Total group life											
Individual Annuities											
20. Fixed											
21. Indexed											
22. Variable with guarantees											
23. Variable without guarantees											
24. Life contingent payout											
25. Other											
26. Total individual annuities											
Group Annuities											
27. Fixed											
28. Indexed											
29. Variable with guarantees											
30. Variable without guarantees											
31. Life contingent payout											
32. Other											
33. Total group annuities											
Accident and Health											
34. Comprehensive individual	(d)	(f)					XXX	XXX	XXX		
35. Comprehensive group	(d)	(f)					XXX	XXX	XXX		
36. Medicare supplement	(d)	(f)					XXX	XXX	XXX		
37. Vision only	(d)	(f)					XXX	XXX	XXX		
38. Dental only	(d)	(f)					XXX	XXX	XXX		
39. Federal employees health benefits plan	(d)	(f)					XXX	XXX	XXX		
40. Title XVIII Medicare	(d)	(e, f)					XXX	XXX	XXX		
41. Title XIX Medicaid	(d)	(f)					XXX	XXX	XXX		
42. Credit A&H	(d)	(f)					XXX	XXX	XXX		
43. Disability income	(d)	(f)					XXX	XXX	XXX		
44. Long-term care	(d)	(f)					XXX	XXX	XXX		
45. Other health	(d)	(f)					XXX	XXX	XXX		
46. Total accident and health							XXX	XXX	XXX		
47. Total	3,526 (c)		420		40	460	363				363

24. NV

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF Nevada

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Policy Exhibit					
		Claims Settled During Current Year									23 Issued During Year		25 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			24 Number of Pols/Certs	24 Amount	25 Number of Pols/Certs	26 Amount	27 Number of Pols/Certs	28 Amount
		14 Number of Pols/Certs	15 Amount	16 Number of Pols/Certs	17 Amount	18 Number of Pols/Certs	19 Amount	20 Number of Pols/Certs	21 Amount							
Individual Life																
1. Industrial																
2. Whole	363		1	363					1	363				(1,500)	8	8,000
3. Term														9,866	33	214,953
4. Indexed															3	7,000
5. Universal																
6. Universal with secondary guarantees														(2)	5	188,142
7. Variable																
8. Variable universal																
9. Credit																
10. Other																
11. Total individual life	363	1	363						1	363				(2)	49	418,095
Group Life																
12. Whole																
13. Term																
14. Universal																
15. Variable																
16. Variable universal																
17. Credit																(a)
18. Other																
19. Total group life																
Individual Annuities																
20. Fixed																
21. Indexed																
22. Variable with guarantees																
23. Variable without guarantees																
24. Life contingent payout																
25. Other																
26. Total individual annuities															4	17,278
Group Annuities																
27. Fixed																
28. Indexed																
29. Variable with guarantees																
30. Variable without guarantees																
31. Life contingent payout																
32. Other																
33. Total group annuities																
Accident and Health																
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
44. Long-term care (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
45. Other health (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
46. Total accident and health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
47. Total	363	1	363						1	363				(2)	53	435,373

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

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

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

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

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

(f) For health business report Direct Premiums Earned: Comprehensive Individual \$ _____; Comprehensive 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 \$ _____.

24.1.NV



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF New Hampshire

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members				Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life											
1. Industrial											
2. Whole	348		61		125			186			
3. Term											
4. Indexed											
5. Universal											
6. Universal with secondary guarantees											
7. Variable											
8. Variable universal											
9. Credit											
10. Other											
11. Total individual life	348		61		125			186			
Group Life											
12. Whole											
13. Term											
14. Universal											
15. Variable											
16. Variable universal											
17. Credit											
18. Other											
19. Total group life											
Individual Annuities											
20. Fixed											
21. Indexed											
22. Variable with guarantees											
23. Variable without guarantees											
24. Life contingent payout											
25. Other											
26. Total individual annuities											
Group Annuities											
27. Fixed											
28. Indexed											
29. Variable with guarantees											
30. Variable without guarantees											
31. Life contingent payout											
32. Other											
33. Total group annuities											
Accident and Health											
34. Comprehensive individual	(d)	(f)						XXX	XXX	XXX	
35. Comprehensive group	(d)	(f)						XXX	XXX	XXX	
36. Medicare supplement	(d)	(f)						XXX	XXX	XXX	
37. Vision only	(d)	(f)						XXX	XXX	XXX	
38. Dental only	(d)	(f)						XXX	XXX	XXX	
39. Federal employees health benefits plan	(d)	(f)						XXX	XXX	XXX	
40. Title XVIII Medicare	(d)	(e, f)						XXX	XXX	XXX	
41. Title XIX Medicaid	(d)	(f)						XXX	XXX	XXX	
42. Credit A&H		(f)						XXX	XXX	XXX	
43. Disability income		(f)						XXX	XXX	XXX	
44. Long-term care	(d)	(f)						XXX	XXX	XXX	
45. Other health	(d)	(f)						XXX	XXX	XXX	
46. Total accident and health								XXX	XXX	XXX	
47. Total	348 (c)		61		125			186			

24.NH

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code 0000 BUSINESS IN THE STATE OF New Hampshire DURING THE YEAR 2025 NAIC Company Code 70130

Line of Business	13 Incurred During Current Year	13 Claims Settled During Current Year								22 Unpaid December 31, Current Year	22 Policy Exhibit						
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)		
		14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount		23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount	
Individual Life																	
1. Industrial																	
2. Whole														151	10	60,767	
3. Term																	
4. Indexed																	
5. Universal															2	242,000	
6. Universal with secondary guarantees																	
7. Variable																	
8. Variable universal																	
9. Credit																	
10. Other																	
11. Total individual life														151	12	302,767	
Group Life																	
12. Whole																	
13. Term																	
14. Universal																	
15. Variable																	
16. Variable universal																	
17. Credit																(a)	
18. Other																	
19. Total group life																	
Individual Annuities																	
20. Fixed															14	2	1,566
21. Indexed																	
22. Variable with guarantees																	
23. Variable without guarantees																	
24. Life contingent payout																	
25. Other																	
26. Total individual annuities														14	2	1,566	
Group Annuities																	
27. Fixed																	
28. Indexed																	
29. Variable with guarantees																	
30. Variable without guarantees																	
31. Life contingent payout																	
32. Other																	
33. Total group annuities																	
Accident and Health																	
34. Comprehensive individual (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
35. Comprehensive group (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
36. Medicare supplement (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
37. Vision only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
38. Dental only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
39. Federal employees health benefits plan (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
40. Title XVIII Medicare (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
41. Title XIX Medicaid (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
42. Credit A&H (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
43. Disability income (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
44. Long-term care (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
45. Other health (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
46. Total accident and health	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
47. Total														165	14	304,333	

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

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

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

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

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

(f) For health business report Direct Premiums Earned: Comprehensive Individual \$ _____; Comprehensive 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 \$ _____.

24.1.NH



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF New Jersey

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members				7 Total (Col. 3+4+5+6)	Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other		8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial	33											
2. Whole	1,636		182		100	282	20,000			6,716		26,716
3. Term												
4. Indexed												
5. Universal	787											
6. Universal with secondary guarantees												
7. Variable												
8. Variable universal												
9. Credit												
10. Other												
11. Total individual life	2,456		182		100	282	20,000			6,716		26,716
Group Life												
12. Whole												
13. Term												
14. Universal												
15. Variable												
16. Variable universal												
17. Credit												
18. Other												
19. Total group life												
Individual Annuities												
20. Fixed	81						2,394			2,529		4,923
21. Indexed												
22. Variable with guarantees												
23. Variable without guarantees												
24. Life contingent payout												
25. Other												
26. Total individual annuities	81						2,394			2,529		4,923
Group Annuities												
27. Fixed												
28. Indexed												
29. Variable with guarantees												
30. Variable without guarantees												
31. Life contingent payout												
32. Other												
33. Total group annuities												
Accident and Health												
34. Comprehensive individual	(d)	(f)					XXX	XXX	XXX			
35. Comprehensive group	(d)	(f)					XXX	XXX	XXX			
36. Medicare supplement	(d)	(f)					XXX	XXX	XXX			
37. Vision only	(d)	(f)					XXX	XXX	XXX			
38. Dental only	(d)	(f)					XXX	XXX	XXX			
39. Federal employees health benefits plan	(d)	(f)					XXX	XXX	XXX			
40. Title XVIII Medicare	(d)	(e, f)					XXX	XXX	XXX			
41. Title XIX Medicaid	(d)	(f)					XXX	XXX	XXX			
42. Credit A&H	(d)	(f)					XXX	XXX	XXX			
43. Disability income	(d)	(f)					XXX	XXX	XXX			
44. Long-term care	(d)	(f)					XXX	XXX	XXX			
45. Other health	(d)	(f)					XXX	XXX	XXX			
46. Total accident and health							XXX	XXX	XXX			
47. Total	2,537 (c)		182		100	282	22,394		9,245			31,639

24 NJ

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF New Jersey

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit						
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)		
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount	
		14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount								
Individual Life																	
1. Industrial																	
2. Whole	25,000		2	20,000					2	20,000	5,000			(4)	(33,581)	4	3,500
3. Term																6	10,000
4. Indexed																	
5. Universal																	
6. Universal with secondary guarantees															122	7	237,028
7. Variable																	
8. Variable universal																	
9. Credit																	
10. Other																	
11. Total individual life	25,000		2	20,000					2	20,000	5,000			(4)	(33,459)	48	561,501
Group Life																	
12. Whole																	
13. Term																	
14. Universal																	
15. Variable																	
16. Variable universal																	
17. Credit																	(a)
18. Other																	
19. Total group life																	
Individual Annuities																	
20. Fixed	2,394		1	2,394					1	2,394				(2)	(3,404)	11	38,415
21. Indexed																	
22. Variable with guarantees																	
23. Variable without guarantees																	
24. Life contingent payout																	
25. Other																	
26. Total individual annuities	2,394		1	2,394					1	2,394				(2)	(3,404)	11	38,415
Group Annuities																	
27. Fixed																	
28. Indexed																	
29. Variable with guarantees																	
30. Variable without guarantees																	
31. Life contingent payout																	
32. Other																	
33. Total group annuities																	
Accident and Health																	
34. Comprehensive individual (d)		XXX		XXX		XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX		XXX		XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)		XXX		XXX		XXX	XXX	XXX	XXX	XXX	XXX						
37. Vision only (d)		XXX		XXX		XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX		XXX		XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX		XXX		XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX		XXX		XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX		XXX		XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H (d)		XXX		XXX		XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)		XXX		XXX		XXX	XXX	XXX	XXX	XXX	XXX						
44. Long-term care (d)		XXX		XXX		XXX	XXX	XXX	XXX	XXX	XXX						
45. Other health (d)		XXX		XXX		XXX	XXX	XXX	XXX	XXX	XXX						
46. Total accident and health		XXX		XXX		XXX	XXX	XXX	XXX	XXX	XXX						
47. Total	27,394		3	22,394					3	22,394	5,000			(6)	(36,863)	59	599,916

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

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

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

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

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

(f) For health business report Direct Premiums Earned: Comprehensive Individual \$ _____; Comprehensive 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 \$ _____

24.1.NJ



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF New Mexico

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members				7 Total (Col. 3+4+5+6)	Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other		8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial												
2. Whole	1,833		185				185	10,000				10,000
3. Term	4,060											
4. Indexed												
5. Universal	10,376									15,054		15,054
6. Universal with secondary guarantees												
7. Variable												
8. Variable universal												
9. Credit												
10. Other												
11. Total individual life	16,269		185				185	10,000		15,054		25,054
Group Life												
12. Whole												
13. Term												
14. Universal												
15. Variable												
16. Variable universal												
17. Credit												
18. Other												
19. Total group life												
Individual Annuities												
20. Fixed	869									5,254		5,254
21. Indexed												
22. Variable with guarantees												
23. Variable without guarantees												
24. Life contingent payout												
25. Other												
26. Total individual annuities	869									5,254		5,254
Group Annuities												
27. Fixed												
28. Indexed												
29. Variable with guarantees												
30. Variable without guarantees												
31. Life contingent payout												
32. Other												
33. Total group annuities												
Accident and Health												
34. Comprehensive individual	(d)	(f)						XXX	XXX	XXX		
35. Comprehensive group	(d)	(f)						XXX	XXX	XXX		
36. Medicare supplement	(d)	(f)						XXX	XXX	XXX		
37. Vision only	(d)	(f)						XXX	XXX	XXX		
38. Dental only	(d)	(f)						XXX	XXX	XXX		
39. Federal employees health benefits plan	(d)	(f)						XXX	XXX	XXX		
40. Title XVIII Medicare	(d)	(e, f)						XXX	XXX	XXX		
41. Title XIX Medicaid	(d)	(f)						XXX	XXX	XXX		
42. Credit A&H	(d)	(f)						XXX	XXX	XXX		
43. Disability income	(d)	(f)						XXX	XXX	XXX		
44. Long-term care	(d)	(f)						XXX	XXX	XXX		
45. Other health	(d)	(f)						XXX	XXX	XXX		
46. Total accident and health								XXX	XXX	XXX		
47. Total	17,138 (c)		185				185	10,000		20,308		30,308

24-NM

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code 0000 BUSINESS IN THE STATE OF New Mexico DURING THE YEAR 2025 NAIC Company Code 70130

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit						
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)		
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount	
		14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount								
Individual Life																	
1. Industrial																	
2. Whole	10,000																
3. Term																	
4. Indexed																	
5. Universal																	
6. Universal with secondary guarantees																	
7. Variable																	
8. Variable universal																	
9. Credit																	
10. Other																	
11. Total individual life	10,000	1	10,000							1	10,000			(4)	(142,984)	85	1,168,171
Group Life																	
12. Whole																	
13. Term																	
14. Universal																	
15. Variable																	
16. Variable universal																	
17. Credit																	
18. Other																	
19. Total group life																	(a)
Individual Annuities																	
20. Fixed																	
21. Indexed																	
22. Variable with guarantees																	
23. Variable without guarantees																	
24. Life contingent payout																	
25. Other																	
26. Total individual annuities																	2,975 16 131,334
Group Annuities																	
27. Fixed																	
28. Indexed																	
29. Variable with guarantees																	
30. Variable without guarantees																	
31. Life contingent payout																	
32. Other																	
33. Total group annuities																	
Accident and Health																	
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
44. Long-term care (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
45. Other health (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
46. Total accident and health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
47. Total	10,000	1	10,000							1	10,000			(4)	(140,009)	101	1,299,505

(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: \$ _____ Group: \$ _____ Total: \$ _____

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

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

(f) For health business report Direct Premiums Earned: Comprehensive Individual \$ _____; Comprehensive 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 \$ _____

24.1.NM



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF New York

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members				Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life											
1. Industrial											
2. Whole	1,714		556		32	588					
3. Term	914								723		723
4. Indexed											
5. Universal	4,443						25,082				25,082
6. Universal with secondary guarantees											
7. Variable											
8. Variable universal											
9. Credit											
10. Other											
11. Total individual life	7,071		556		32	588	25,082		723		25,805
Group Life											
12. Whole											
13. Term											
14. Universal											
15. Variable											
16. Variable universal											
17. Credit											
18. Other											
19. Total group life											
Individual Annuities											
20. Fixed	186									14,348	14,348
21. Indexed											
22. Variable with guarantees											
23. Variable without guarantees											
24. Life contingent payout											
25. Other											
26. Total individual annuities	186									14,348	14,348
Group Annuities											
27. Fixed											
28. Indexed											
29. Variable with guarantees											
30. Variable without guarantees											
31. Life contingent payout											
32. Other											
33. Total group annuities											
Accident and Health											
34. Comprehensive individual	(d)	(f)						XXX	XXX	XXX	
35. Comprehensive group	(d)	(f)						XXX	XXX	XXX	
36. Medicare supplement	(d)	(f)						XXX	XXX	XXX	
37. Vision only	(d)	(f)						XXX	XXX	XXX	
38. Dental only	(d)	(f)						XXX	XXX	XXX	
39. Federal employees health benefits plan	(d)	(f)						XXX	XXX	XXX	
40. Title XVIII Medicare	(d)	(e, f)						XXX	XXX	XXX	
41. Title XIX Medicaid	(d)	(f)						XXX	XXX	XXX	
42. Credit A&H	(d)	(f)						XXX	XXX	XXX	
43. Disability income	(d)	(f)						XXX	XXX	XXX	
44. Long-term care	(d)	(f)						XXX	XXX	XXX	
45. Other health	(d)	(f)						XXX	XXX	XXX	
46. Total accident and health								XXX	XXX	XXX	
47. Total	7,257 (c)		556		32	588	25,082		15,071		40,153

24.NY

**ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE) (Continued)^(b)**

NAIC Group Code 0000 BUSINESS IN THE STATE OF New York DURING THE YEAR 2025 NAIC Company Code 70130

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit									
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	23 Issued During Year		24 Other Changes to In Force (Net)		25 In Force December 31, Current Year (b)					
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			26 Number of Pols/ Certs	27 Amount	28 Number of Pols/ Certs	29 Amount						
		14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount											
Individual Life																				
1. Industrial																	13	15,500		
2. Whole																	83	586,426		
3. Term																	10	68,187		
4. Indexed																				
5. Universal (65,831)	1	25,082						1	25,082								9	419,885		
6. Universal with secondary guarantees																				
7. Variable																				
8. Variable universal																				
9. Credit																				
10. Other																				
11. Total individual life (65,831)	1	25,082						1	25,082								115	1,089,998		
Group Life																				
12. Whole																				
13. Term																				
14. Universal																				
15. Variable																				
16. Variable universal																				
17. Credit																		(a)		
18. Other																				
19. Total group life																				
Individual Annuities																				
20. Fixed																				
21. Indexed																				
22. Variable with guarantees																				
23. Variable without guarantees																				
24. Life contingent payout																				
25. Other																				
26. Total individual annuities																	2	16,557		
Group Annuities																				
27. Fixed																				
28. Indexed																				
29. Variable with guarantees																				
30. Variable without guarantees																				
31. Life contingent payout																				
32. Other																				
33. Total group annuities																				
Accident and Health																				
34. Comprehensive individual (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX										
35. Comprehensive group (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX										
36. Medicare supplement (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX										
37. Vision only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX										
38. Dental only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX										
39. Federal employees health benefits plan (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX										
40. Title XVIII Medicare (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX										
41. Title XIX Medicaid (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX										
42. Credit A&H (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX										
43. Disability income (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX										
44. Long-term care (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX										
45. Other health (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX										
46. Total accident and health	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX										
47. Total (65,831)	1	25,082						1	25,082								(6)	(91,124)	117	1,106,555

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

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

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

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

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

(f) For health business report Direct Premiums Earned: Comprehensive Individual \$; Comprehensive 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 \$

24.1.NY



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF North Carolina

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members				7 Total (Col. 3+4+5+6)	Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other		8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial	198										1,243	1,243
2. Whole	8,595		1,293	230	163	1,686	18,180			11,069		29,249
3. Term	6,562						1,000					1,000
4. Indexed												
5. Universal	94,941							187,283			24,786	212,069
6. Universal with secondary guarantees												
7. Variable												
8. Variable universal												
9. Credit												
10. Other												
11. Total individual life	110,296		1,293	230	163	1,686	206,463			37,098		243,561
Group Life												
12. Whole												
13. Term	1,125											
14. Universal												
15. Variable												
16. Variable universal												
17. Credit												
18. Other												
19. Total group life	1,125											
Individual Annuities												
20. Fixed	1,072							1,291			13,553	14,844
21. Indexed												
22. Variable with guarantees												
23. Variable without guarantees												
24. Life contingent payout												
25. Other												
26. Total individual annuities	1,072							1,291			13,553	14,844
Group Annuities												
27. Fixed												
28. Indexed												
29. Variable with guarantees												
30. Variable without guarantees												
31. Life contingent payout												
32. Other												
33. Total group annuities												
Accident and Health												
34. Comprehensive individual (d) (f)							XXX	XXX		XXX		
35. Comprehensive group (d) (f)							XXX	XXX		XXX		
36. Medicare supplement (d) (f)							XXX	XXX		XXX		
37. Vision only (d) (f)							XXX	XXX		XXX		
38. Dental only (d) (f)							XXX	XXX		XXX		
39. Federal employees health benefits plan (d) (f)							XXX	XXX		XXX		
40. Title XVIII Medicare (d) (e, f)							XXX	XXX		XXX		
41. Title XIX Medicaid (d) (f)							XXX	XXX		XXX		
42. Credit A&H							XXX	XXX		XXX		
43. Disability income (d) (f)							XXX	XXX		XXX		
44. Long-term care (d) (f)							XXX	XXX		XXX		
45. Other health (d) (f)							XXX	XXX		XXX		
46. Total accident and health							XXX	XXX		XXX		
47. Total	112,493 (c)		1,293	230	163	1,686	207,754	207,754		50,651		258,405

24 NC

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF North Carolina

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit									
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	23 Issued During Year		25 Other Changes to In Force (Net)		27 In Force December 31, Current Year (b)					
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			24 Number of Pols/ Certs	26 Amount	28 Number of Pols/ Certs	29 Amount						
		14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount											
Individual Life																				
1. Industrial	750								750				(4)	(1,750)	45	43,525				
2. Whole	14,847	4	18,180				4	18,180				(5)	(34,488)	294	1,870,839					
3. Term												(4)	(12,300)	76	737,229					
4. Indexed																				
5. Universal	147,283	7	187,283				7	187,283				(9)	(417,959)	176	8,983,810					
6. Universal with secondary guarantees																				
7. Variable																				
8. Variable universal																				
9. Credit																				
10. Other																				
11. Total individual life	162,880	11	205,463				11	205,463	750			(22)	(466,497)	591	11,635,403					
Group Life																				
12. Whole																				
13. Term															6	40,000				
14. Universal																				
15. Variable																				
16. Variable universal																				
17. Credit																(a)				
18. Other																				
19. Total group life															6	40,000				
Individual Annuities																				
20. Fixed	1,291	1	1,291				1	1,291					(4)	16,702	25	527,073				
21. Indexed																				
22. Variable with guarantees																				
23. Variable without guarantees																				
24. Life contingent payout																				
25. Other																				
26. Total individual annuities	1,291	1	1,291				1	1,291				(4)	16,702	25	527,073					
Group Annuities																				
27. Fixed																				
28. Indexed																				
29. Variable with guarantees																				
30. Variable without guarantees																				
31. Life contingent payout																				
32. Other																				
33. Total group annuities																				
Accident and Health																				
34. Comprehensive individual (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
35. Comprehensive group (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
36. Medicare supplement (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
37. Vision only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
38. Dental only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
39. Federal employees health benefits plan (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
40. Title XVIII Medicare (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
41. Title XIX Medicaid (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
42. Credit A&H (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
43. Disability income (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
44. Long-term care (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
45. Other health (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
46. Total accident and health	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
47. Total	164,171	12	206,754				12	206,754	750			(26)	(449,795)	622	12,202,476					

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

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

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

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

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

(f) For health business report Direct Premiums Earned: Comprehensive Individual \$ _____; Comprehensive 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 \$ _____.



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF North Dakota

DURING THE YEAR 2025

NAIC Company Code 70130

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

24.ND

**ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE) (Continued)^(b)**

NAIC Group Code 0000

BUSINESS IN THE STATE OF North Dakota

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit						
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)		
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount	
		14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount								
Individual Life																	
1. Industrial																1	4,865
2. Whole																	
3. Term																	
4. Indexed																	
5. Universal																3	144,342
6. Universal with secondary guarantees																	
7. Variable																	
8. Variable universal																	
9. Credit																	
10. Other																	
11. Total individual life															4	149,207	
Group Life																	
12. Whole																	
13. Term																	
14. Universal																	
15. Variable																	
16. Variable universal																	
17. Credit																	(a)
18. Other																	
19. Total group life																	
Individual Annuities																	
20. Fixed																2	9,011
21. Indexed																	
22. Variable with guarantees																	
23. Variable without guarantees																	
24. Life contingent payout																	
25. Other																	
26. Total individual annuities															302	2	9,011
Group Annuities																	
27. Fixed																	
28. Indexed																	
29. Variable with guarantees																	
30. Variable without guarantees																	
31. Life contingent payout																	
32. Other																	
33. Total group annuities																	
Accident and Health																	
34. Comprehensive individual (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
35. Comprehensive group (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
36. Medicare supplement (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
37. Vision only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
38. Dental only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
39. Federal employees health benefits plan (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
40. Title XVIII Medicare (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
41. Title XIX Medicaid (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
42. Credit A&H (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
43. Disability income (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
44. Long-term care (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
45. Other health (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
46. Total accident and health	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
47. Total															302	6	158,218

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

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

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

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

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

(f) For health business report Direct Premiums Earned: Comprehensive Individual \$ _____; Comprehensive 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 \$ _____.

24.1.ND



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF Ohio

DURING THE YEAR 2025

NAIC Company Code 70130

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	80							1,016				1,016
2. Whole	186,257		82,067	5,492	15,844	103,403	714,191	29,709	251,885		995,785	
3. Term	16,585						10,000		63,315		73,315	
4. Indexed												
5. Universal	1,480,656						3,141,018		378,098		3,519,116	
6. Universal with secondary guarantees												
7. Variable												
8. Variable universal												
9. Credit												
10. Other												
11. Total individual life	1,683,578		82,067	5,492	15,844	103,403	3,866,225	29,709	693,298		4,589,232	
Group Life												
12. Whole												
13. Term	2,925										23,216	
14. Universal												
15. Variable												
16. Variable universal												
17. Credit												
18. Other												
19. Total group life	2,925								23,216		23,216	
Individual Annuities												
20. Fixed	11,285								4,846		17,887	
21. Indexed												
22. Variable with guarantees												
23. Variable without guarantees												
24. Life contingent payout												
25. Other												
26. Total individual annuities	11,285								4,846		17,887	
Group Annuities												
27. Fixed												
28. Indexed												
29. Variable with guarantees												
30. Variable without guarantees												
31. Life contingent payout												
32. Other												
33. Total group annuities												
Accident and Health												
34. Comprehensive individual	35 (f)								XXX	XXX	XXX	
35. Comprehensive group	(f)								XXX	XXX	XXX	
36. Medicare supplement	(f)								XXX	XXX	XXX	
37. Vision only	(f)								XXX	XXX	XXX	
38. Dental only	(f)								XXX	XXX	XXX	
39. Federal employees health benefits plan	(f)								XXX	XXX	XXX	
40. Title XVIII Medicare	(d) (e, f)								XXX	XXX	XXX	
41. Title XIX Medicaid	(d) (f)								XXX	XXX	XXX	
42. Credit A&H	(f)								XXX	XXX	XXX	
43. Disability income	(f)								XXX	XXX	XXX	
44. Long-term care	(f)								XXX	XXX	XXX	
45. Other health	33 (f)								XXX	XXX	XXX	
46. Total accident and health	68								XXX	XXX	XXX	
47. Total	1,697,856 (c)		82,067	5,492	15,844	103,403	3,894,287	29,709	711,185		4,635,181	

24 OH

**ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE) (Continued)^(b)**

NAIC Group Code 0000

BUSINESS IN THE STATE OF Ohio

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit									
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	23 Issued During Year		25 Other Changes to In Force (Net)		27 In Force December 31, Current Year (b)					
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			24 Number of Pols/ Certs	26 Amount	28 Number of Pols/ Certs	29 Amount						
		14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount											
Individual Life																				
1. Industrial	1,016	1,016							2	1,016				(2)	(1,153)	45	30,993			
2. Whole	679,283	743,900							88	743,900				(163)	(3,232,672)		4,154			54,079,506
3. Term	(61,218)	10,000							1	10,000				(18)	(155,027)		372			4,003,367
4. Indexed																				
5. Universal	3,056,173	3,141,018							57	3,141,018				(157)	(10,734,455)		2,495			191,771,184
6. Universal with secondary guarantees																				
7. Variable																				
8. Variable universal																				
9. Credit																				
10. Other																				
11. Total individual life	3,675,254	3,895,934	148						148	3,895,934				(340)	(14,123,307)		7,066			249,885,050
Group Life																				
12. Whole																				
13. Term	23,216	23,216							4	23,216					(5)	(33,500)		15		100,000
14. Universal																				
15. Variable																				
16. Variable universal																				
17. Credit																				(a)
18. Other																				
19. Total group life	23,216	23,216	4						4	23,216				(5)	(33,500)		15			100,000
Individual Annuities																				
20. Fixed	6,110	4,846							3	4,846					(5)	41,391		123		1,668,424
21. Indexed																				
22. Variable with guarantees																				
23. Variable without guarantees																				
24. Life contingent payout																				
25. Other																				
26. Total individual annuities	6,110	4,846	3						3	4,846				(5)	41,391		123			1,668,424
Group Annuities																				
27. Fixed																				
28. Indexed																				
29. Variable with guarantees																				
30. Variable without guarantees																				
31. Life contingent payout																				
32. Other																				
33. Total group annuities																				
Accident and Health																				
34. Comprehensive individual (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	(2)	(200)		1			100
35. Comprehensive group (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
36. Medicare supplement (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
37. Vision only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
38. Dental only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
39. Federal employees health benefits plan (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
40. Title XVIII Medicare (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
41. Title XIX Medicaid (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
42. Credit A&H (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
43. Disability income (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
44. Long-term care (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
45. Other health (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
46. Total accident and health	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	(2)	(200)		3			300
47. Total	3,704,580	3,923,996	155						155	3,923,996				(352)	(14,115,616)		7,208			251,653,874

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

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

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

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

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

(f) For health business report Direct Premiums Earned: Comprehensive Individual \$ _____; Comprehensive 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 \$ _____.

24.1.OH



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF Oklahoma

DURING THE YEAR 2025

NAIC Company Code 70130

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	553						8,223	4,402	1,290		13,915
2. Whole	32,206		1,600	3,485		5,085	137,130	17,076	23,184		177,390
3. Term	55,948								2,157		2,157
4. Indexed											
5. Universal	23,093						139,311		30,198		169,509
6. Universal with secondary guarantees											
7. Variable											
8. Variable universal											
9. Credit											
10. Other											
11. Total individual life	111,800		1,600	3,485		5,085	284,664	21,478	56,829		362,971
Group Life											
12. Whole											
13. Term											
14. Universal											
15. Variable											
16. Variable universal											
17. Credit											
18. Other											
19. Total group life											
Individual Annuities											
20. Fixed	2,094						4,736		37,694		42,430
21. Indexed											
22. Variable with guarantees											
23. Variable without guarantees											
24. Life contingent payout											
25. Other											
26. Total individual annuities	2,094						4,736		37,694		42,430
Group Annuities											
27. Fixed											
28. Indexed											
29. Variable with guarantees											
30. Variable without guarantees											
31. Life contingent payout											
32. Other											
33. Total group annuities											
Accident and Health											
34. Comprehensive individual	(d) 57 (f)						XXX	XXX	XXX		
35. Comprehensive group	(d) (f)						XXX	XXX	XXX		
36. Medicare supplement	(d) (f)						XXX	XXX	XXX		
37. Vision only	(d) (f)						XXX	XXX	XXX		
38. Dental only	(d) (f)						XXX	XXX	XXX		
39. Federal employees health benefits plan	(d) (f)						XXX	XXX	XXX		
40. Title XVIII Medicare	(d) (e, f)						XXX	XXX	XXX		
41. Title XIX Medicaid	(d) (f)						XXX	XXX	XXX		
42. Credit A&H	(d) (f)						XXX	XXX	XXX		
43. Disability income	(d) (f)						XXX	XXX	XXX		
44. Long-term care	(d) (f)						XXX	XXX	XXX		
45. Other health	(d) (f)						XXX	XXX	XXX		
46. Total accident and health	57						XXX	XXX	XXX		
47. Total	113,951 (c)		1,600	3,485		5,085	289,400	21,478	94,523		405,401

24 OK

**ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE) (Continued)^(b)**

NAIC Group Code 0000

BUSINESS IN THE STATE OF Oklahoma

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit						
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)		
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount	
		14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount								
Individual Life																	
1. Industrial	16,625	28	12,625					28	12,625	4,000			(43)	(35,214)	680	536,255	
2. Whole	248,876	42	154,206					42	154,206	121,670			(106)	(203,793)	1,005	4,084,820	
3. Term	(500)												(12)	(252,089)	164	1,472,116	
4. Indexed																	
5. Universal	64,311	4	139,311					4	139,311				(5)	(147,451)	38	1,893,512	
6. Universal with secondary guarantees																	
7. Variable																	
8. Variable universal																	
9. Credit																	
10. Other																	
11. Total individual life	329,312	74	306,142					74	306,142	125,670			(166)	(638,547)	1,887	7,986,703	
Group Life																	
12. Whole																	
13. Term																	
14. Universal																	
15. Variable																	
16. Variable universal																	
17. Credit																(a)	
18. Other																	
19. Total group life																	
Individual Annuities																	
20. Fixed	4,736	2	4,736					2	4,736				(6)	(27,909)	30	313,446	
21. Indexed																	
22. Variable with guarantees																	
23. Variable without guarantees																	
24. Life contingent payout																	
25. Other																	
26. Total individual annuities	4,736	2	4,736					2	4,736				(6)	(27,909)	30	313,446	
Group Annuities																	
27. Fixed																	
28. Indexed																	
29. Variable with guarantees																	
30. Variable without guarantees																	
31. Life contingent payout																	
32. Other																	
33. Total group annuities																	
Accident and Health																	
34. Comprehensive individual (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					1	100	
35. Comprehensive group (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
36. Medicare supplement (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
37. Vision only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
38. Dental only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
39. Federal employees health benefits plan (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
40. Title XVIII Medicare (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
41. Title XIX Medicaid (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
42. Credit A&H (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
43. Disability income (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
44. Long-term care (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
45. Other health (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
46. Total accident and health	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					1	100	
47. Total	334,048	76	310,878					76	310,878	125,670			(172)	(666,456)	1,918	8,300,249	

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

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

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

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

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

(f) For health business report Direct Premiums Earned: Comprehensive Individual \$ _____; Comprehensive 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 \$ _____.

24.1.OK



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF Oregon

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members				Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life											
1. Industrial											
2. Whole .....578			163	100	82	345	2,000	1,000	4,115		7,115
3. Term											
4. Indexed											
5. Universal .....537											
6. Universal with secondary guarantees											
7. Variable											
8. Variable universal											
9. Credit											
10. Other											
11. Total individual life	1,115		163	100	82	345	2,000	1,000	4,115		7,115
Group Life											
12. Whole											
13. Term											
14. Universal											
15. Variable											
16. Variable universal											
17. Credit											
18. Other											
19. Total group life											
Individual Annuities											
20. Fixed									3,962		3,962
21. Indexed											
22. Variable with guarantees											
23. Variable without guarantees											
24. Life contingent payout											
25. Other											
26. Total individual annuities									3,962		3,962
Group Annuities											
27. Fixed											
28. Indexed											
29. Variable with guarantees											
30. Variable without guarantees											
31. Life contingent payout											
32. Other											
33. Total group annuities											
Accident and Health											
34. Comprehensive individual (d) (f)							XXX	XXX	XXX		
35. Comprehensive group (d) (f)							XXX	XXX	XXX		
36. Medicare supplement (d) (f)							XXX	XXX	XXX		
37. Vision only (d) (f)							XXX	XXX	XXX		
38. Dental only (d) (f)							XXX	XXX	XXX		
39. Federal employees health benefits plan (d) (f)							XXX	XXX	XXX		
40. Title XVIII Medicare (d) (e, f)							XXX	XXX	XXX		
41. Title XIX Medicaid (d) (f)							XXX	XXX	XXX		
42. Credit A&H (d) (f)							XXX	XXX	XXX		
43. Disability income (d) (f)							XXX	XXX	XXX		
44. Long-term care (d) (f)							XXX	XXX	XXX		
45. Other health (d) (f)							XXX	XXX	XXX		
46. Total accident and health							XXX	XXX	XXX		
47. Total	1,115 (c)		163	100	82	345	2,000	1,000	8,077		11,077

24. OR

**ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE) (Continued)^(b)**

NAIC Group Code 0000

BUSINESS IN THE STATE OF Oregon

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit						
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)		
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount	
		14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount								
Individual Life																	
1. Industrial																	
2. Whole	1,300																
3. Term																	
4. Indexed																	
5. Universal																	
6. Universal with secondary guarantees																	
7. Variable																	
8. Variable universal																	
9. Credit																	
10. Other																	
11. Total individual life	1,300	2	3,000						2	3,000			(3)	(14,224)	49	323,768	
Group Life																	
12. Whole																	
13. Term																	
14. Universal																	
15. Variable																	
16. Variable universal																	
17. Credit																	
18. Other																	
19. Total group life																	
Individual Annuities																	
20. Fixed																	
21. Indexed																	
22. Variable with guarantees																	
23. Variable without guarantees																	
24. Life contingent payout																	
25. Other																	
26. Total individual annuities													(2)	(3,631)	2	7,126	
Group Annuities																	
27. Fixed																	
28. Indexed																	
29. Variable with guarantees																	
30. Variable without guarantees																	
31. Life contingent payout																	
32. Other																	
33. Total group annuities													(2)	(3,631)	2	7,126	
Accident and Health																	
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
36. Medicare supplement (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
42. Credit A&H (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
43. Disability income (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
44. Long-term care (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
45. Other health (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
46. Total accident and health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
47. Total	1,300	2	3,000						2	3,000			(5)	(17,855)	51	330,894	

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

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

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

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

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

(f) For health business report Direct Premiums Earned: Comprehensive Individual \$ _____; Comprehensive 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 \$ _____.

24.1.0R



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF Pennsylvania

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members				7 Total (Col. 3+4+5+6)	Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other		8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial	139							1,000				1,000
2. Whole	42,635		1,393	412	585	2,390	134,896			6,459		141,355
3. Term	9,182						71,477			39,436		110,913
4. Indexed												
5. Universal	83,010						117,960			53,972		171,932
6. Universal with secondary guarantees												
7. Variable												
8. Variable universal												
9. Credit												
10. Other												
11. Total individual life	134,966		1,393	412	585	2,390	325,333			99,867		425,200
Group Life												
12. Whole												
13. Term												
14. Universal												
15. Variable												
16. Variable universal												
17. Credit												
18. Other												
19. Total group life												
Individual Annuities												
20. Fixed	11,007							40,861		15,206		55,867
21. Indexed												
22. Variable with guarantees												
23. Variable without guarantees												
24. Life contingent payout												
25. Other												
26. Total individual annuities	11,007							40,861		15,206		55,867
Group Annuities												
27. Fixed												
28. Indexed												
29. Variable with guarantees												
30. Variable without guarantees												
31. Life contingent payout												
32. Other												
33. Total group annuities												
Accident and Health												
34. Comprehensive individual	(d)	(f)						XXX	XXX	XXX		
35. Comprehensive group	(d)	(f)						XXX	XXX	XXX		
36. Medicare supplement	(d)	(f)						XXX	XXX	XXX		
37. Vision only	(d)	(f)						XXX	XXX	XXX		
38. Dental only	(d)	(f)						XXX	XXX	XXX		
39. Federal employees health benefits plan	(d)	(f)						XXX	XXX	XXX		
40. Title XVIII Medicare	(d)	(e, f)						XXX	XXX	XXX		
41. Title XIX Medicaid	(d)	(f)						XXX	XXX	XXX		
42. Credit A&H	(d)	(f)						XXX	XXX	XXX		
43. Disability income	(d)	(f)						XXX	XXX	XXX		
44. Long-term care	(d)	(f)						XXX	XXX	XXX		
45. Other health	(d)	(f)						XXX	XXX	XXX		
46. Total accident and health								XXX	XXX	XXX		
47. Total	145,973 (c)		1,393	412	585	2,390	365,994			115,073		481,067



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF Rhode Island

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members				Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life											
1. Industrial											
2. Whole	661		156								
3. Term											
4. Indexed											
5. Universal											
6. Universal with secondary guarantees											
7. Variable											
8. Variable universal											
9. Credit											
10. Other											
11. Total individual life	661		156				156				
Group Life											
12. Whole											
13. Term											
14. Universal											
15. Variable											
16. Variable universal											
17. Credit											
18. Other											
19. Total group life											
Individual Annuities											
20. Fixed											
21. Indexed											
22. Variable with guarantees											
23. Variable without guarantees											
24. Life contingent payout											
25. Other											
26. Total individual annuities											
Group Annuities											
27. Fixed											
28. Indexed											
29. Variable with guarantees											
30. Variable without guarantees											
31. Life contingent payout											
32. Other											
33. Total group annuities											
Accident and Health											
34. Comprehensive individual (d) (f)								XXX	XXX	XXX	
35. Comprehensive group (d) (f)								XXX	XXX	XXX	
36. Medicare supplement (d) (f)								XXX	XXX	XXX	
37. Vision only (d) (f)								XXX	XXX	XXX	
38. Dental only (d) (f)								XXX	XXX	XXX	
39. Federal employees health benefits plan (d) (f)								XXX	XXX	XXX	
40. Title XVIII Medicare (d) (e, f)								XXX	XXX	XXX	
41. Title XIX Medicaid (d) (f)								XXX	XXX	XXX	
42. Credit A&H (d) (f)								XXX	XXX	XXX	
43. Disability income (d) (f)								XXX	XXX	XXX	
44. Long-term care (d) (f)								XXX	XXX	XXX	
45. Other health (d) (f)								XXX	XXX	XXX	
46. Total accident and health								XXX	XXX	XXX	
47. Total	661 (c)		156				156				

24.RI

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF Rhode Island

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	13 Incurred During Current Year	13 Claims Settled During Current Year								22 Unpaid December 31, Current Year	22 Policy Exhibit					
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount		23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount
Individual Life																
1. Industrial																
2. Whole															7	46,974
3. Term																
4. Indexed																
5. Universal																
6. Universal with secondary guarantees																
7. Variable																
8. Variable universal																
9. Credit																
10. Other																
11. Total individual life															7	46,974
Group Life																
12. Whole																
13. Term																
14. Universal																
15. Variable																
16. Variable universal																
17. Credit																(a)
18. Other																
19. Total group life																
Individual Annuities																
20. Fixed																
21. Indexed																
22. Variable with guarantees																
23. Variable without guarantees																
24. Life contingent payout																
25. Other																
26. Total individual annuities																
Group Annuities																
27. Fixed																
28. Indexed																
29. Variable with guarantees																
30. Variable without guarantees																
31. Life contingent payout																
32. Other																
33. Total group annuities																
Accident and Health																
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
36. Medicare supplement (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
42. Credit A&H (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
43. Disability income (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
44. Long-term care (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
45. Other health (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
46. Total accident and health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
47. Total															7	46,974

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

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

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

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

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

(f) For health business report Direct Premiums Earned: Comprehensive Individual \$ _____; Comprehensive 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 \$ _____.

24.1.RI



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF South Carolina

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members				7 Total (Col. 3+4+5+6)	Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other		8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial	13											
2. Whole	5,731		1,040	200	135	1,375	31,050	3,130	2,059			36,239
3. Term	8,912						2,000					2,000
4. Indexed												
5. Universal	95,537						40,000		36,170			76,170
6. Universal with secondary guarantees												
7. Variable												
8. Variable universal												
9. Credit												
10. Other												
11. Total individual life	110,193		1,040	200	135	1,375	73,050	3,130	38,229			114,409
Group Life												
12. Whole												
13. Term	360											
14. Universal												
15. Variable												
16. Variable universal												
17. Credit												
18. Other												
19. Total group life	360											
Individual Annuities												
20. Fixed	120											
21. Indexed												
22. Variable with guarantees												
23. Variable without guarantees												
24. Life contingent payout												
25. Other												
26. Total individual annuities	120											
Group Annuities												
27. Fixed												
28. Indexed												
29. Variable with guarantees												
30. Variable without guarantees												
31. Life contingent payout												
32. Other												
33. Total group annuities												
Accident and Health												
34. Comprehensive individual (d) (f)							XXX	XXX	XXX			
35. Comprehensive group (d) (f)							XXX	XXX	XXX			
36. Medicare supplement (d) (f)							XXX	XXX	XXX			
37. Vision only (d) (f)							XXX	XXX	XXX			
38. Dental only (d) (f)							XXX	XXX	XXX			
39. Federal employees health benefits plan (d) (f)							XXX	XXX	XXX			
40. Title XVIII Medicare (d) (e, f)							XXX	XXX	XXX			
41. Title XIX Medicaid (d) (f)							XXX	XXX	XXX			
42. Credit A&H (d) (f)							XXX	XXX	XXX			
43. Disability income (d) (f)							XXX	XXX	XXX			
44. Long-term care (d) (f)							XXX	XXX	XXX			
45. Other health (d) (f)							XXX	XXX	XXX			
46. Total accident and health							XXX	XXX	XXX			
47. Total	110,673 (c)		1,040	200	135	1,375	73,050	3,130	38,229			114,409

24-SC



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF South Dakota

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members				7 Total (Col. 3+4+5+6)	Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other		8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial												
2. Whole	120											
3. Term												
4. Indexed												
5. Universal	542											
6. Universal with secondary guarantees												
7. Variable												
8. Variable universal												
9. Credit												
10. Other												
11. Total individual life	662											
Group Life												
12. Whole												
13. Term												
14. Universal												
15. Variable												
16. Variable universal												
17. Credit												
18. Other												
19. Total group life												
Individual Annuities												
20. Fixed	80											
21. Indexed												
22. Variable with guarantees												
23. Variable without guarantees												
24. Life contingent payout												
25. Other												
26. Total individual annuities	80											
Group Annuities												
27. Fixed												
28. Indexed												
29. Variable with guarantees												
30. Variable without guarantees												
31. Life contingent payout												
32. Other												
33. Total group annuities												
Accident and Health												
34. Comprehensive individual	10							XXX	XXX	XXX		
35. Comprehensive group								XXX	XXX	XXX		
36. Medicare supplement								XXX	XXX	XXX		
37. Vision only								XXX	XXX	XXX		
38. Dental only								XXX	XXX	XXX		
39. Federal employees health benefits plan								XXX	XXX	XXX		
40. Title XVIII Medicare								XXX	XXX	XXX		
41. Title XIX Medicaid								XXX	XXX	XXX		
42. Credit A&H								XXX	XXX	XXX		
43. Disability income								XXX	XXX	XXX		
44. Long-term care								XXX	XXX	XXX		
45. Other health								XXX	XXX	XXX		
46. Total accident and health	10							XXX	XXX	XXX		
47. Total	752											

24.SD

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF South Dakota

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	13 Incurred During Current Year	13 Claims Settled During Current Year								22 Unpaid December 31, Current Year	22 Policy Exhibit					
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount		23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount
Individual Life																
1. Industrial															1	1,000
2. Whole														5	21,275	
3. Term																
4. Indexed																
5. Universal														1	100,000	
6. Universal with secondary guarantees																
7. Variable																
8. Variable universal																
9. Credit																
10. Other																
11. Total individual life														7	122,275	
Group Life																
12. Whole																
13. Term																
14. Universal																
15. Variable																
16. Variable universal																
17. Credit																(a)
18. Other																
19. Total group life																
Individual Annuities																
20. Fixed															1	12,802
21. Indexed																
22. Variable with guarantees																
23. Variable without guarantees																
24. Life contingent payout																
25. Other																
26. Total individual annuities														571	1	12,802
Group Annuities																
27. Fixed																
28. Indexed																
29. Variable with guarantees																
30. Variable without guarantees																
31. Life contingent payout																
32. Other																
33. Total group annuities																
Accident and Health																
34. Comprehensive individual (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	100
35. Comprehensive group (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
36. Medicare supplement (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
37. Vision only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
38. Dental only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
39. Federal employees health benefits plan (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
40. Title XVIII Medicare (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
41. Title XIX Medicaid (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
42. Credit A&H (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
43. Disability income (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
44. Long-term care (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
45. Other health (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
46. Total accident and health	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
47. Total														571	9	135,177

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

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

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

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

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

(f) For health business report Direct Premiums Earned: Comprehensive Individual \$ _____; Comprehensive 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 \$ _____.

24.1.SD



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF Tennessee

DURING THE YEAR 2025

NAIC Company Code 70130

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	10,708							25,576	13,380	8,532	47,488
2. Whole	43,142		911	111	3,468	4,490	114,611	8,739	15,582	138,932	
3. Term	3,775							15,000		6,955	21,955
4. Indexed											
5. Universal	21,125							17,887		18,673	36,560
6. Universal with secondary guarantees											
7. Variable											
8. Variable universal											
9. Credit											
10. Other											
11. Total individual life	78,750		911	111	3,468	4,490	173,074	22,119	49,742	244,935	
Group Life											
12. Whole											
13. Term	904										
14. Universal											
15. Variable											
16. Variable universal											
17. Credit											
18. Other											
19. Total group life	904										
Individual Annuities											
20. Fixed	188										
21. Indexed											
22. Variable with guarantees											
23. Variable without guarantees											
24. Life contingent payout											
25. Other											
26. Total individual annuities	188										
Group Annuities											
27. Fixed											
28. Indexed											
29. Variable with guarantees											
30. Variable without guarantees											
31. Life contingent payout											
32. Other											
33. Total group annuities											
Accident and Health											
34. Comprehensive individual	84 (f)							XXX	XXX	XXX	
35. Comprehensive group	(f)							XXX	XXX	XXX	
36. Medicare supplement	(f)							XXX	XXX	XXX	
37. Vision only	(f)							XXX	XXX	XXX	
38. Dental only	(f)							XXX	XXX	XXX	
39. Federal employees health benefits plan	(f)							XXX	XXX	XXX	
40. Title XVIII Medicare	(e, f)							XXX	XXX	XXX	
41. Title XIX Medicaid	(f)							XXX	XXX	XXX	
42. Credit A&H	(f)							XXX	XXX	XXX	
43. Disability income	(f)							XXX	XXX	XXX	
44. Long-term care	(f)							XXX	XXX	XXX	
45. Other health	3 (f)							XXX	XXX	XXX	
46. Total accident and health	87							XXX	XXX	XXX	
47. Total	79,929 (c)		911	111	3,468	4,490	173,074	22,119	49,742	244,935	

24.TN

**ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE) (Continued)^(b)**

NAIC Group Code 0000

BUSINESS IN THE STATE OF Tennessee

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	13 Incurred During Current Year	13 Claims Settled During Current Year								22 Unpaid December 31, Current Year	22 Policy Exhibit					
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23 Issued During Year		25 Other Changes to In Force (Net)		27 In Force December 31, Current Year (b)	
		14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount		23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount
Individual Life																
1. Industrial	46,907	84	38,956					84	38,956	10,950		(243)	(205,645)	4,716	4,321,279	
2. Whole	119,441	35	123,350					35	123,350	2,202		(63)	(134,354)	1,159	3,782,815	
3. Term	14,100	8	20,100					8	20,100			(30)	(91,583)	694	2,240,871	
4. Indexed																
5. Universal	5,387	2	17,887					2	17,887					49	2,702,578	
6. Universal with secondary guarantees																
7. Variable																
8. Variable universal																
9. Credit																
10. Other																
11. Total individual life	185,835	129	200,293					129	200,293	13,152		(336)	(383,873)	6,618	13,047,543	
Group Life																
12. Whole																
13. Term													(1)	(8,000)	5	43,800
14. Universal																
15. Variable																
16. Variable universal																
17. Credit															(a)	
18. Other																
19. Total group life												(1)	(8,000)	5	43,800	
Individual Annuities																
20. Fixed																
21. Indexed																
22. Variable with guarantees																
23. Variable without guarantees																
24. Life contingent payout																
25. Other																
26. Total individual annuities																
Group Annuities																
27. Fixed																
28. Indexed																
29. Variable with guarantees																
30. Variable without guarantees																
31. Life contingent payout																
32. Other																
33. Total group annuities																
Accident and Health																
34. Comprehensive individual (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					1	100
35. Comprehensive group (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
37. Vision only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
44. Long-term care (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
45. Other health (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
46. Total accident and health	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			(1)	(100)	1	100
47. Total	185,835	129	200,293					129	200,293	13,152		(338)	(385,424)	6,639	13,257,305	

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

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

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

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

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

(f) For health business report Direct Premiums Earned: Comprehensive Individual \$ _____ ; Comprehensive 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 \$ _____

24.1.TN



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF Texas

DURING THE YEAR 2025

NAIC Company Code 70130

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	16,919							47,967	22,214	13,013	83,194
2. Whole	165,541		4,476	1,142	958	6,576	439,600	45,662	165,439		650,701
3. Term	49,462						53,000	937		76,901	130,838
4. Indexed											
5. Universal	139,072							164,353		60,602	224,955
6. Universal with secondary guarantees											
7. Variable											
8. Variable universal											
9. Credit											
10. Other											
11. Total individual life	370,994		4,476	1,142	958	6,576	704,920	68,813	315,955		1,089,688
Group Life											
12. Whole											
13. Term											
14. Universal											
15. Variable											
16. Variable universal											
17. Credit											
18. Other											
19. Total group life											
Individual Annuities											
20. Fixed	7,411							235,137		42,601	277,738
21. Indexed											
22. Variable with guarantees											
23. Variable without guarantees											
24. Life contingent payout											
25. Other											
26. Total individual annuities	7,411							235,137		42,601	277,738
Group Annuities											
27. Fixed											
28. Indexed											
29. Variable with guarantees											
30. Variable without guarantees											
31. Life contingent payout											
32. Other											
33. Total group annuities											
Accident and Health											
34. Comprehensive individual (d) (f)								XXX	XXX	XXX	
35. Comprehensive group (d) (f)								XXX	XXX	XXX	
36. Medicare supplement (d) (f)								XXX	XXX	XXX	
37. Vision only (d) (f)								XXX	XXX	XXX	
38. Dental only (d) (f)								XXX	XXX	XXX	
39. Federal employees health benefits plan (d) (f)								XXX	XXX	XXX	
40. Title XVIII Medicare (d) (e, f)								XXX	XXX	XXX	
41. Title XIX Medicaid (d) (f)								XXX	XXX	XXX	
42. Credit A&H (d) (f)								XXX	XXX	XXX	
43. Disability income (d) (f)								XXX	XXX	XXX	
44. Long-term care (d) (f)								XXX	XXX	XXX	
45. Other health (d) (f)								XXX	XXX	XXX	
46. Total accident and health								XXX	XXX	XXX	
47. Total	378,405 (c)		4,476	1,142	958	6,576	940,057	68,813	358,556		1,367,426

24.TX

**ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE) (Continued)^(b)**

NAIC Group Code 0000

BUSINESS IN THE STATE OF Texas

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit						
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)		
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount	
		14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount								
Individual Life																	
1. Industrial	74,611	142	70,181					142	70,181	13,930			(338)	(319,503)	7,880	7,230,123	
2. Whole	454,797	198	485,262					198	485,262	48,259			(269)	(908,505)	6,317	17,181,167	
3. Term	48,398	8	53,000					8	53,000	3,000			(54)	(476,566)	963	6,596,444	
4. Indexed																	
5. Universal	191,685	4	164,353					4	164,353	27,332			(16)	(1,163,517)	204	11,726,673	
6. Universal with secondary guarantees																	
7. Variable																	
8. Variable universal																	
9. Credit																	
10. Other																	
11. Total individual life	769,491	352	772,796					352	772,796	92,521			(677)	(2,868,091)	15,364	42,734,407	
Group Life																	
12. Whole																	
13. Term																	
14. Universal																	
15. Variable																	
16. Variable universal																	
17. Credit																	
18. Other																	
19. Total group life																	
Individual Annuities																	
20. Fixed	185,966	17	235,137					17	235,137	17,564			(28)	33,271	563	2,394,971	
21. Indexed																	
22. Variable with guarantees																	
23. Variable without guarantees																	
24. Life contingent payout																	
25. Other																	
26. Total individual annuities	185,966	17	235,137					17	235,137	17,564			(28)	33,271	563	2,394,971	
Group Annuities																	
27. Fixed																	
28. Indexed																	
29. Variable with guarantees																	
30. Variable without guarantees																	
31. Life contingent payout																	
32. Other																	
33. Total group annuities																	
Accident and Health																	
34. Comprehensive individual (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
35. Comprehensive group (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
36. Medicare supplement (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
37. Vision only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
38. Dental only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
39. Federal employees health benefits plan (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
40. Title XVIII Medicare (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
41. Title XIX Medicaid (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
42. Credit A&H (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
43. Disability income (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
44. Long-term care (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
45. Other health (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
46. Total accident and health	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
47. Total	955,477	369	1,007,933					369	1,007,933	110,085			(705)	(2,834,820)	15,927	45,129,378	

(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: \$ _____ Group: \$ _____ Total: \$ _____.

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

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

(f) For health business report Direct Premiums Earned: Comprehensive Individual \$ _____; Comprehensive 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 \$ _____.

24.1.TX



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF Utah

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members				Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life											
1. Industrial											
2. Whole	1,285		276		127			403			
3. Term	299										
4. Indexed											
5. Universal	3,333										
6. Universal with secondary guarantees											
7. Variable											
8. Variable universal											
9. Credit											
10. Other											
11. Total individual life	4,917		276		127			403			
Group Life											
12. Whole											
13. Term	720										
14. Universal											
15. Variable											
16. Variable universal											
17. Credit											
18. Other											
19. Total group life	720										
Individual Annuities											
20. Fixed	320									320	
21. Indexed											
22. Variable with guarantees											
23. Variable without guarantees											
24. Life contingent payout											
25. Other											
26. Total individual annuities	320									320	320
Group Annuities											
27. Fixed											
28. Indexed											
29. Variable with guarantees											
30. Variable without guarantees											
31. Life contingent payout											
32. Other											
33. Total group annuities											
Accident and Health											
34. Comprehensive individual	(d)	(f)						XXX	XXX	XXX	
35. Comprehensive group	(d)	(f)						XXX	XXX	XXX	
36. Medicare supplement	(d)	(f)						XXX	XXX	XXX	
37. Vision only	(d)	(f)						XXX	XXX	XXX	
38. Dental only	(d)	(f)						XXX	XXX	XXX	
39. Federal employees health benefits plan	(d)	(f)						XXX	XXX	XXX	
40. Title XVIII Medicare	(d)	(e, f)						XXX	XXX	XXX	
41. Title XIX Medicaid	(d)	(f)						XXX	XXX	XXX	
42. Credit A&H		(f)						XXX	XXX	XXX	
43. Disability income		(f)						XXX	XXX	XXX	
44. Long-term care		(d)						XXX	XXX	XXX	
45. Other health		(d)						XXX	XXX	XXX	
46. Total accident and health								XXX	XXX	XXX	
47. Total	5,957 (c)		276		127			403		320	320

24. UT

**ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE) (Continued)^(b)**

NAIC Group Code 0000

BUSINESS IN THE STATE OF Utah

DURING THE YEAR 2025

NAIC Company Code 70130

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

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

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

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

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

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

(f) For health business report Direct Premiums Earned: Comprehensive Individual \$ _____; Comprehensive 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 \$ _____.

24.1.UT



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF Vermont

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members				Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life											
1. Industrial											
2. Whole .....			.81								
3. Term											
4. Indexed											
5. Universal	100										
6. Universal with secondary guarantees											
7. Variable											
8. Variable universal											
9. Credit											
10. Other											
11. Total individual life	100		81				81				
Group Life											
12. Whole											
13. Term											
14. Universal											
15. Variable											
16. Variable universal											
17. Credit											
18. Other											
19. Total group life											
Individual Annuities											
20. Fixed											
21. Indexed											
22. Variable with guarantees											
23. Variable without guarantees											
24. Life contingent payout											
25. Other											
26. Total individual annuities											
Group Annuities											
27. Fixed											
28. Indexed											
29. Variable with guarantees											
30. Variable without guarantees											
31. Life contingent payout											
32. Other											
33. Total group annuities											
Accident and Health											
34. Comprehensive individual	(d)	(f)						XXX	XXX	XXX	
35. Comprehensive group	(d)	(f)						XXX	XXX	XXX	
36. Medicare supplement	(d)	(f)						XXX	XXX	XXX	
37. Vision only	(d)	(f)						XXX	XXX	XXX	
38. Dental only	(d)	(f)						XXX	XXX	XXX	
39. Federal employees health benefits plan	(d)	(f)						XXX	XXX	XXX	
40. Title XVIII Medicare	(d)	(e, f)						XXX	XXX	XXX	
41. Title XIX Medicaid	(d)	(f)						XXX	XXX	XXX	
42. Credit A&H		(f)						XXX	XXX	XXX	
43. Disability income		(f)						XXX	XXX	XXX	
44. Long-term care	(d)	(f)						XXX	XXX	XXX	
45. Other health	(d)	(f)						XXX	XXX	XXX	
46. Total accident and health								XXX	XXX	XXX	
47. Total	100 (c)		81				81				

**ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE) (Continued)^(b)**

NAIC Group Code 0000

BUSINESS IN THE STATE OF Vermont

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	13 Incurred During Current Year	13 Claims Settled During Current Year								22 Unpaid December 31, Current Year	22 Policy Exhibit							
		Totals Paid				Reduction by Compromise		Amount Rejected			Total Settled During Current Year		Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount		23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount		
Individual Life																		
1. Industrial																1	300	
2. Whole															3	12,500		
3. Term																		
4. Indexed																		
5. Universal															1	50,000		
6. Universal with secondary guarantees																		
7. Variable																		
8. Variable universal																		
9. Credit																		
10. Other																		
11. Total individual life															5	62,800		
Group Life																		
12. Whole																		
13. Term																		
14. Universal																		
15. Variable																		
16. Variable universal																		
17. Credit																	(a)	
18. Other																		
19. Total group life																		
Individual Annuities																		
20. Fixed																		
21. Indexed																		
22. Variable with guarantees																		
23. Variable without guarantees																		
24. Life contingent payout																		
25. Other																		
26. Total individual annuities																		
Group Annuities																		
27. Fixed																		
28. Indexed																		
29. Variable with guarantees																		
30. Variable without guarantees																		
31. Life contingent payout																		
32. Other																		
33. Total group annuities																		
Accident and Health																		
34. Comprehensive individual (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
35. Comprehensive group (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
36. Medicare supplement (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
37. Vision only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
38. Dental only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
39. Federal employees health benefits plan (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
40. Title XVIII Medicare (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
41. Title XIX Medicaid (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
42. Credit A&H	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
43. Disability income (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
44. Long-term care (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
45. Other health (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
46. Total accident and health	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
47. Total															5	62,800		

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

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

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

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

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

(f) For health business report Direct Premiums Earned: Comprehensive Individual \$ _____; Comprehensive 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 \$ _____.

24.1.VT



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF Virginia

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members				Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life											
1. Industrial	2,890							15,181	11,380	5,156	31,717
2. Whole	20,983		1,394	166	117	1,677	78,120	5,400	60,791	144,311	
3. Term	17,815						30,100		(269)	29,831	
4. Indexed											
5. Universal	17,445										
6. Universal with secondary guarantees											
7. Variable											
8. Variable universal											
9. Credit											
10. Other											
11. Total individual life	59,133		1,394	166	117	1,677	123,401	16,780	65,678	205,859	
Group Life											
12. Whole											
13. Term	4,056						5,125			5,125	
14. Universal											
15. Variable											
16. Variable universal											
17. Credit											
18. Other											
19. Total group life	4,056						5,125			5,125	
Individual Annuities											
20. Fixed	1,753						90,650		5,213	95,863	
21. Indexed											
22. Variable with guarantees											
23. Variable without guarantees											
24. Life contingent payout											
25. Other											
26. Total individual annuities	1,753						90,650		5,213	95,863	
Group Annuities											
27. Fixed											
28. Indexed											
29. Variable with guarantees											
30. Variable without guarantees											
31. Life contingent payout											
32. Other											
33. Total group annuities											
Accident and Health											
34. Comprehensive individual (d) (f)							XXX	XXX	XXX		
35. Comprehensive group (d) (f)							XXX	XXX	XXX		
36. Medicare supplement (d) (f)							XXX	XXX	XXX		
37. Vision only (d) (f)							XXX	XXX	XXX		
38. Dental only (d) (f)							XXX	XXX	XXX		
39. Federal employees health benefits plan (d) (f)							XXX	XXX	XXX		
40. Title XVIII Medicare (d) (e, f)							XXX	XXX	XXX		
41. Title XIX Medicaid (d) (f)							XXX	XXX	XXX		
42. Credit A&H (d) (f)							XXX	XXX	XXX		
43. Disability income (d) (f)							XXX	XXX	XXX		
44. Long-term care (d) (f)							XXX	XXX	XXX		
45. Other health (d) (f)							XXX	XXX	XXX		
46. Total accident and health							XXX	XXX	XXX		
47. Total	64,942 (c)		1,394	166	117	1,677	219,176	16,780	70,891	306,847	

24.VA

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF Virginia

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit						
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	23 Issued During Year		25 Other Changes to In Force (Net)		27 In Force December 31, Current Year (b)		
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			24 Number of Pols/ Certs	26 Amount	28 Number of Pols/ Certs	29 Amount			
		14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount								
Individual Life																	
1. Industrial	24,561	36	26,561					36	26,561	500			(123)	(118,697)	3,543	3,015,476	
2. Whole	76,329	28	83,520					28	83,520	11,950			(37)	(156,759)	1,191	6,156,527	
3. Term	26,000	4	26,000					4	26,000				(17)	(211,467)	247	1,842,132	
4. Indexed																	
5. Universal																	
6. Universal with secondary guarantees																	
7. Variable																	
8. Variable universal																	
9. Credit																	
10. Other																	
11. Total individual life	126,890	68	136,081					68	136,081	12,450			(178)	(504,020)	5,017	12,682,230	
Group Life																	
12. Whole																	
13. Term	5,125	1	5,125					1	5,125	5,000			(2)	(13,000)	23	157,800	
14. Universal																	
15. Variable																	
16. Variable universal																	
17. Credit																	
18. Other																	
19. Total group life	5,125	1	5,125					1	5,125	5,000			(2)	(13,000)	23	157,800	
Individual Annuities																	
20. Fixed	93,393	5	90,650					5	90,650	2,743			(8)	(68,004)	59	653,535	
21. Indexed																	
22. Variable with guarantees																	
23. Variable without guarantees																	
24. Life contingent payout																	
25. Other																	
26. Total individual annuities	93,393	5	90,650					5	90,650	2,743			(8)	(68,004)	59	653,535	
Group Annuities																	
27. Fixed																	
28. Indexed																	
29. Variable with guarantees																	
30. Variable without guarantees																	
31. Life contingent payout																	
32. Other																	
33. Total group annuities																	
Accident and Health																	
34. Comprehensive individual (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
35. Comprehensive group (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
36. Medicare supplement (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
37. Vision only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
38. Dental only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
39. Federal employees health benefits plan (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
40. Title XVIII Medicare (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
41. Title XIX Medicaid (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
42. Credit A&H (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
43. Disability income (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
44. Long-term care (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
45. Other health (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
46. Total accident and health	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
47. Total	225,408	74	231,856					74	231,856	20,193			(188)	(585,024)	5,099	13,493,565	

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

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

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

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

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

(f) For health business report Direct Premiums Earned: Comprehensive Individual \$ _____; Comprehensive 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 \$ _____.

24.1.VA



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF Washington

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members				7 Total (Col. 3+4+5+6)	Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other		8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial								1,000				1,000
2. Whole	2,312		235	252	5	492	6,122			1,542		7,664
3. Term												
4. Indexed												
5. Universal	4,559											
6. Universal with secondary guarantees												
7. Variable												
8. Variable universal												
9. Credit												
10. Other												
11. Total individual life	6,871		235	252	5	492	7,122			1,542		8,664
Group Life												
12. Whole												
13. Term	180											
14. Universal												
15. Variable												
16. Variable universal												
17. Credit												
18. Other												
19. Total group life	180											
Individual Annuities												
20. Fixed												
21. Indexed												
22. Variable with guarantees												
23. Variable without guarantees												
24. Life contingent payout												
25. Other												
26. Total individual annuities												
Group Annuities												
27. Fixed												
28. Indexed												
29. Variable with guarantees												
30. Variable without guarantees												
31. Life contingent payout												
32. Other												
33. Total group annuities												
Accident and Health												
34. Comprehensive individual	(d)	(f)						XXX	XXX	XXX		
35. Comprehensive group	(d)	(f)						XXX	XXX	XXX		
36. Medicare supplement	(d)	(f)						XXX	XXX	XXX		
37. Vision only	(d)	(f)						XXX	XXX	XXX		
38. Dental only	(d)	(f)						XXX	XXX	XXX		
39. Federal employees health benefits plan	(d)	(f)						XXX	XXX	XXX		
40. Title XVIII Medicare	(d)	(e, f)						XXX	XXX	XXX		
41. Title XIX Medicaid	(d)	(f)						XXX	XXX	XXX		
42. Credit A&H	(d)	(f)						XXX	XXX	XXX		
43. Disability income	(d)	(f)						XXX	XXX	XXX		
44. Long-term care	(d)	(f)						XXX	XXX	XXX		
45. Other health	(d)	(f)						XXX	XXX	XXX		
46. Total accident and health								XXX	XXX	XXX		
47. Total	7,051 (c)		235	252	5	492	7,122			1,542		8,664

24-WA

**ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE) (Continued)^(b)**

NAIC Group Code 0000

BUSINESS IN THE STATE OF Washington

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	13 Incurred During Current Year	13 Claims Settled During Current Year								22 Unpaid December 31, Current Year	22 Policy Exhibit							
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)			
		14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount		23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount		
Individual Life																		
1. Industrial	1,000	1,000						1,000								5	3,732	
2. Whole	6,122	6,122						6,122							(2)	58	282,599	
3. Term														(3)	7		60,472	
4. Indexed																		
5. Universal																		
6. Universal with secondary guarantees														(1)	12		583,822	
7. Variable																		
8. Variable universal																		
9. Credit																		
10. Other																		
11. Total individual life	7,122	7,122						7,122						(6)	82		930,625	
Group Life																		
12. Whole																		
13. Term																1	5,000	
14. Universal																		
15. Variable																		
16. Variable universal																		
17. Credit																	(a)	
18. Other																		
19. Total group life																1	5,000	
Individual Annuities																		
20. Fixed																	786	20,428
21. Indexed																		
22. Variable with guarantees																		
23. Variable without guarantees																		
24. Life contingent payout																		
25. Other																		
26. Total individual annuities																5	20,428	
Group Annuities																		
27. Fixed																		
28. Indexed																		
29. Variable with guarantees																		
30. Variable without guarantees																		
31. Life contingent payout																		
32. Other																		
33. Total group annuities																		
Accident and Health																		
34. Comprehensive individual (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
35. Comprehensive group (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
36. Medicare supplement (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
37. Vision only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
38. Dental only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
39. Federal employees health benefits plan (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
40. Title XVIII Medicare (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
41. Title XIX Medicaid (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
42. Credit A&H (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
43. Disability income (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
44. Long-term care (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
45. Other health (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
46. Total accident and health	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
47. Total	7,122	7,122						7,122						(6)	88		956,053	

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

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

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

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

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

(f) For health business report Direct Premiums Earned: Comprehensive Individual \$ _____; Comprehensive 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 \$ _____.

24.1.WA



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF West Virginia

DURING THE YEAR 2025

NAIC Company Code 70130

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	68							13,595	2,100	469	16,164
2. Whole	168,233		557		101	658	619,520	11,378	76,241	707,139	
3. Term	24,881						206,859		5,692	212,551	
4. Indexed											
5. Universal	6,805										
6. Universal with secondary guarantees											
7. Variable											
8. Variable universal											
9. Credit											
10. Other											
11. Total individual life	199,987		557		101	658	839,974	13,478	82,402	935,854	
Group Life											
12. Whole											
13. Term	25,787						66,683			66,683	
14. Universal											
15. Variable											
16. Variable universal											
17. Credit											
18. Other											
19. Total group life	25,787						66,683			66,683	
Individual Annuities											
20. Fixed	470								20,776	20,776	
21. Indexed											
22. Variable with guarantees											
23. Variable without guarantees											
24. Life contingent payout											
25. Other											
26. Total individual annuities	470								20,776	20,776	
Group Annuities											
27. Fixed											
28. Indexed											
29. Variable with guarantees											
30. Variable without guarantees											
31. Life contingent payout											
32. Other											
33. Total group annuities											
Accident and Health											
34. Comprehensive individual	(d) 785 (f)							XXX	XXX	XXX	
35. Comprehensive group	(d) (f)							XXX	XXX	XXX	
36. Medicare supplement	(d) (f)							XXX	XXX	XXX	
37. Vision only	(d) (f)							XXX	XXX	XXX	
38. Dental only	(d) (f)							XXX	XXX	XXX	
39. Federal employees health benefits plan	(d) (f)							XXX	XXX	XXX	
40. Title XVIII Medicare	(d) (e, f)							XXX	XXX	XXX	
41. Title XIX Medicaid	(d) (f)							XXX	XXX	XXX	
42. Credit A&H	(d) (f)							XXX	XXX	XXX	
43. Disability income	(d) (f)							XXX	XXX	XXX	
44. Long-term care	(d) (f)							XXX	XXX	XXX	
45. Other health	(d) 1,277 (f)							XXX	XXX	XXX	
46. Total accident and health	2,062							XXX	XXX	XXX	
47. Total	228,306 (c)		557		101	658	906,657	13,478	103,178	1,023,313	

24-WV



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF Wisconsin

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members				7 Total (Col. 3+4+5+6)	Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other		8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial												
2. Whole	8,067		1,608	1,231	171		3,010	1,000		20,614		21,614
3. Term												
4. Indexed												
5. Universal	9,299							25,026				25,026
6. Universal with secondary guarantees												
7. Variable												
8. Variable universal												
9. Credit												
10. Other												
11. Total individual life	17,366		1,608	1,231	171		3,010	26,026		20,614		46,640
Group Life												
12. Whole												
13. Term												
14. Universal												
15. Variable												
16. Variable universal												
17. Credit												
18. Other												
19. Total group life												
Individual Annuities												
20. Fixed	840									10,084		10,084
21. Indexed												
22. Variable with guarantees												
23. Variable without guarantees												
24. Life contingent payout												
25. Other												
26. Total individual annuities	840									10,084		10,084
Group Annuities												
27. Fixed												
28. Indexed												
29. Variable with guarantees												
30. Variable without guarantees												
31. Life contingent payout												
32. Other												
33. Total group annuities												
Accident and Health												
34. Comprehensive individual	(d)	(f)						XXX	XXX	XXX		
35. Comprehensive group	(d)	(f)						XXX	XXX	XXX		
36. Medicare supplement	(d)	(f)						XXX	XXX	XXX		
37. Vision only	(d)	(f)						XXX	XXX	XXX		
38. Dental only	(d)	(f)						XXX	XXX	XXX		
39. Federal employees health benefits plan	(d)	(f)						XXX	XXX	XXX		
40. Title XVIII Medicare	(d)	(e, f)						XXX	XXX	XXX		
41. Title XIX Medicaid	(d)	(f)						XXX	XXX	XXX		
42. Credit A&H	(d)	(f)						XXX	XXX	XXX		
43. Disability income	(d)	(f)						XXX	XXX	XXX		
44. Long-term care	(d)	(f)						XXX	XXX	XXX		
45. Other health	(d)	(f)						XXX	XXX	XXX		
46. Total accident and health								XXX	XXX	XXX		
47. Total	18,206 (c)		1,608	1,231	171		3,010	26,026		30,698		56,724

24.W1

**ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE) (Continued)^(b)**

NAIC Group Code 0000 BUSINESS IN THE STATE OF Wisconsin DURING THE YEAR 2025 NAIC Company Code 70130

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										Policy Exhibit						
	13 Incurred During Current Year	Claims Settled During Current Year								22 Unpaid December 31, Current Year	23 Issued During Year		24 Other Changes to In Force (Net)		25 In Force December 31, Current Year (b)		
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			26	27	28	29			
		14 Number of Pcls/ Certs	15 Amount	16 Number of Pcls/ Certs	17 Amount	18 Number of Pcls/ Certs	19 Amount	20 Number of Pcls/ Certs	21 Amount		23 Number of Pcls/ Certs	24 Amount	25 Number of Pcls/ Certs	26 Amount	27 Number of Pcls/ Certs	28 Amount	
Individual Life																	
1. Industrial																	
2. Whole	1,000	1,000						1,000									
3. Term																	
4. Indexed																	
5. Universal	25,026	25,026						25,026									
6. Universal with secondary guarantees																	
7. Variable																	
8. Variable universal																	
9. Credit																	
10. Other																	
11. Total individual life	26,026	26,026	1					26,026	1				(7)	(110,317)	186		3,490,372
Group Life																	
12. Whole																	
13. Term																	
14. Universal																	
15. Variable																	
16. Variable universal																	
17. Credit																	
18. Other																	
19. Total group life																	(a)
Individual Annuities																	
20. Fixed																	
21. Indexed																	
22. Variable with guarantees																	
23. Variable without guarantees																	
24. Life contingent payout																	
25. Other																	
26. Total individual annuities													1	366,673	38		550,460
Group Annuities																	
27. Fixed																	
28. Indexed																	
29. Variable with guarantees																	
30. Variable without guarantees																	
31. Life contingent payout																	
32. Other																	
33. Total group annuities													1	366,673	38		550,460
Accident and Health																	
34. Comprehensive individual (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
37. Vision only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
44. Long-term care (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
45. Other health (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
46. Total accident and health	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
47. Total	26,026	26,026	1					26,026	1				(6)	256,356	224		4,040,832

(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: \$ Group: \$ Total: \$

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

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

(f) For health business report Direct Premiums Earned: Comprehensive Individual \$; Comprehensive 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 \$

24.1.W1



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF Wyoming

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members				Claims and Benefits Paid					
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial												
2. Whole	1,777		108					108				
3. Term												
4. Indexed												
5. Universal	669											
6. Universal with secondary guarantees												
7. Variable												
8. Variable universal												
9. Credit												
10. Other												
11. Total individual life	2,446		108					108				
Group Life												
12. Whole												
13. Term												
14. Universal												
15. Variable												
16. Variable universal												
17. Credit												
18. Other												
19. Total group life												
Individual Annuities												
20. Fixed	80											
21. Indexed												
22. Variable with guarantees												
23. Variable without guarantees												
24. Life contingent payout												
25. Other												
26. Total individual annuities	80											
Group Annuities												
27. Fixed												
28. Indexed												
29. Variable with guarantees												
30. Variable without guarantees												
31. Life contingent payout												
32. Other												
33. Total group annuities												
Accident and Health												
34. Comprehensive individual	(d)	(f)						XXX	XXX	XXX		
35. Comprehensive group	(d)	(f)						XXX	XXX	XXX		
36. Medicare supplement	(d)	(f)						XXX	XXX	XXX		
37. Vision only	(d)	(f)						XXX	XXX	XXX		
38. Dental only	(d)	(f)						XXX	XXX	XXX		
39. Federal employees health benefits plan	(d)	(f)						XXX	XXX	XXX		
40. Title XVIII Medicare	(d)	(e, f)						XXX	XXX	XXX		
41. Title XIX Medicaid	(d)	(f)						XXX	XXX	XXX		
42. Credit A&H		(f)						XXX	XXX	XXX		
43. Disability income		(d)						XXX	XXX	XXX		
44. Long-term care		(d)						XXX	XXX	XXX		
45. Other health		(d)						XXX	XXX	XXX		
46. Total accident and health								XXX	XXX	XXX		
47. Total	2,526 (c)		108					108				

24.WY

**ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE) (Continued)^(b)**

NAIC Group Code 0000

BUSINESS IN THE STATE OF Wyoming

DURING THE YEAR 2025

NAIC Company Code 70130

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

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

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

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

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

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

(f) For health business report Direct Premiums Earned: Comprehensive Individual \$ _____; Comprehensive 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 \$ _____.

24.1.WY



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0000

BUSINESS IN THE STATE OF Grand Total

DURING THE YEAR 2025

NAIC Company Code 70130

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members				7 Total (Col. 3+4+5+6)	Claims and Benefits Paid					
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other		8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)	
Individual Life													
1. Industrial	70,852							212,973	97,548		49,057		359,578
2. Whole	1,284,998		211,313	41,341	72,848		325,502	4,090,134	206,215		1,401,310		5,697,659
3. Term	460,535							738,914	5,575		372,768		1,117,257
4. Indexed													
5. Universal	3,734,006							6,797,549	5,529		1,066,933		7,870,011
6. Universal with secondary guarantees													
7. Variable													
8. Variable universal													
9. Credit													
10. Other													
11. Total individual life	5,550,391		211,313	41,341	72,848		325,502	11,839,570	314,867		2,890,068		15,044,505
Group Life													
12. Whole													
13. Term	43,630												
14. Universal													
15. Variable													
16. Variable universal													
17. Credit													
18. Other													
19. Total group life	43,630							107,526					107,526
Individual Annuities													
20. Fixed	143,788										870,370		1,570,676
21. Indexed													
22. Variable with guarantees													
23. Variable without guarantees													
24. Life contingent payout													
25. Other													
26. Total individual annuities	143,788							700,306			870,370		1,570,676
Group Annuities													
27. Fixed													
28. Indexed													
29. Variable with guarantees													
30. Variable without guarantees													
31. Life contingent payout													
32. Other													
33. Total group annuities													
Accident and Health													
34. Comprehensive individual	3,042 (f)							XXX	XXX		XXX		
35. Comprehensive group	(f)							XXX	XXX		XXX		
36. Medicare supplement	(f)							XXX	XXX		XXX		
37. Vision only	(f)							XXX	XXX		XXX		
38. Dental only	(f)							XXX	XXX		XXX		
39. Federal employees health benefits plan	(f)							XXX	XXX		XXX		
40. Title XVIII Medicare	(d) (e, f)							XXX	XXX		XXX		
41. Title XIX Medicaid	(d) (f)							XXX	XXX		XXX		
42. Credit A&H	(f)							XXX	XXX		XXX		
43. Disability income	(f)							XXX	XXX		XXX		
44. Long-term care	(f)							XXX	XXX		XXX		
45. Other health	1,336 (f)							XXX	XXX		XXX		24,896
46. Total accident and health	4,378							XXX	XXX		XXX		24,896
47. Total	5,742,187 (c)		211,313	41,341	72,848		325,502	12,647,402	314,867		3,760,438	24,896	16,747,603

24.GT

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
FORM FOR CALCULATING THE INTEREST MAINTENANCE RESERVE

INTEREST MAINTENANCE RESERVE

	1 Amount
1. Reserve as of December 31, Prior Year	7,775,030
2. Current year's realized pre-tax capital gains/(losses) of \$412 transferred into the reserve net of taxes of \$ 87	325
3. Adjustment for current year's liability gains/(losses) released from the reserve	
4. Balance before reduction for amount transferred to Summary of Operations (Line 1 + Line 2 + Line 3)	7,775,355
5. Current year's amortization released to Summary of Operations (Amortization, Line 1, Column 4)	472,246
6. Reserve as of December 31, current year (Line 4 minus Line 5)	7,303,109

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	471,921	325		472,246
2. 2026	480,397			480,397
3. 2027	483,419			483,419
4. 2028	502,249			502,249
5. 2029	519,442			519,442
6. 2030	534,106			534,106
7. 2031	533,697			533,697
8. 2032	534,171			534,171
9. 2033	522,177			522,177
10. 2034	504,550			504,550
11. 2035	503,630			503,630
12. 2036	515,598			515,598
13. 2037	498,739			498,739
14. 2038	430,010			430,010
15. 2039	331,549			331,549
16. 2040	234,280			234,280
17. 2041	127,540			127,540
18. 2042	32,449			32,449
19. 2043	4,878			4,878
20. 2044	6,438			6,438
21. 2045	2,753			2,753
22. 2046	568			568
23. 2047	345			345
24. 2048	122			122
25. 2049				
26. 2050	3			3
27. 2051				
28. 2052				
29. 2053				
30. 2054				
31. 2055 and Later				
32. Total (Lines 1 to 31)	7,775,030	325		7,775,355

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company

ASSET VALUATION RESERVE

	Default Component			Equity Component			7 Total Amount (Cols. 3 + 6)
	1 Other Than Mortgage Loans	2 Mortgage Loans	3 Total (Cols. 1 + 2)	4 Common Stock	5 Real Estate and Other Invested Assets	6 Total (Cols. 4 + 5)	
1. Reserve as of December 31, prior year	910,259	118,527	1,028,785	4,085,757	24,160,811	28,246,568	29,275,353
2. Realized capital gains/(losses) net of taxes - General Account				1,300,518	(917,161)	383,357	383,357
3. Realized capital gains/(losses) net of taxes - Separate Accounts							
4. Unrealized capital gains/(losses) net of deferred taxes - General Account				10,708,754	4,363,445	15,072,199	15,072,199
5. Unrealized capital gains/(losses) net of deferred taxes - Separate Accounts							
6. Capital gains credited/(losses charged) to contract benefits, payments or reserves							
7. Basic contribution	152,755	16,750	169,505				169,505
8. Accumulated balances (Lines 1 through 5 - 6 + 7)	1,063,013	135,277	1,198,290	16,095,029	27,607,095	43,702,124	44,900,414
9. Maximum reserve	755,285	104,626	859,911	5,457,337	25,306,052	30,763,390	31,623,301
10. Reserve objective	444,451	80,389	524,840	5,456,187	25,306,052	30,762,239	31,287,079
11. 20% of (Line 10 - Line 8)	(123,713)	(10,977)	(134,690)	(2,127,769)	(460,208)	(2,587,977)	(2,722,667)
12. Balance before transfers (Lines 8 + 11)	939,301	124,299	1,063,600	13,967,261	27,146,886	41,114,147	42,177,747
13. Transfers							
14. Voluntary contribution							
15. Adjustment down to maximum/up to zero	(184,016)	(19,673)	(203,689)	(8,509,923)	(1,840,834)	(10,350,757)	(10,554,446)
16. Reserve as of December 31, current year (Lines 12 + 13 + 14 + 15)	755,285	104,626	859,911	5,457,337	25,306,052	30,763,390	31,623,301

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

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution		Reserve Objective		Maximum Reserve	
							5 Factor	6 Amount (Cols. 4 x 5)	7 Factor	8 Amount (Cols. 4 x 7)	9 Factor	10 Amount (Cols. 4 x 9)
LONG-TERM BONDS												
1.		Exempt obligations	22,839,422	XXX	XXX	22,839,422	0.0000		0.0000		0.0000	
2.1	1	NAIC Designation Category 1.A	15,784,267	XXX	XXX	15,784,267	0.0002	3,157	0.0007	11,049	0.0013	20,520
2.2	1	NAIC Designation Category 1.B		XXX	XXX		0.0004		0.0011		0.0023	
2.3	1	NAIC Designation Category 1.C		XXX	XXX		0.0006		0.0018		0.0035	
2.4	1	NAIC Designation Category 1.D	4,050,986	XXX	XXX	4,050,986	0.0007	2,836	0.0022	8,912	0.0044	17,824
2.5	1	NAIC Designation Category 1.E	2,988,042	XXX	XXX	2,988,042	0.0009	2,689	0.0027	8,068	0.0055	16,434
2.6	1	NAIC Designation Category 1.F	27,711,304	XXX	XXX	27,711,304	0.0011	30,482	0.0034	94,218	0.0068	188,437
2.7	1	NAIC Designation Category 1.G	6,668,093	XXX	XXX	6,668,093	0.0014	9,335	0.0042	28,006	0.0085	56,679
2.8		Subtotal NAIC 1 (2.1+2.2+2.3+2.4+2.5+2.6+2.7)	57,202,692	XXX	XXX	57,202,692	XXX	48,500	XXX	150,253	XXX	299,894
3.1	2	NAIC Designation Category 2.A	15,955,011	XXX	XXX	15,955,011	0.0021	33,506	0.0063	100,517	0.0105	167,528
3.2	2	NAIC Designation Category 2.B	5,977,462	XXX	XXX	5,977,462	0.0025	14,944	0.0076	45,429	0.0127	75,914
3.3	2	NAIC Designation Category 2.C		XXX	XXX		0.0036		0.0108		0.0180	
3.4		Subtotal NAIC 2 (3.1+3.2+3.3)	21,932,473	XXX	XXX	21,932,473	XXX	48,449	XXX	145,945	XXX	243,441
4.1	3	NAIC Designation Category 3.A		XXX	XXX		0.0069		0.0183		0.0262	
4.2	3	NAIC Designation Category 3.B		XXX	XXX		0.0099		0.0264		0.0377	
4.3	3	NAIC Designation Category 3.C		XXX	XXX		0.0131		0.0350		0.0500	
4.4		Subtotal NAIC 3 (4.1+4.2+4.3)		XXX	XXX		XXX		XXX		XXX	
5.1	4	NAIC Designation Category 4.A		XXX	XXX		0.0184		0.0430		0.0615	
5.2	4	NAIC Designation Category 4.B		XXX	XXX		0.0238		0.0555		0.0793	
5.3	4	NAIC Designation Category 4.C		XXX	XXX		0.0310		0.0724		0.1034	
5.4		Subtotal NAIC 4 (5.1+5.2+5.3)		XXX	XXX		XXX		XXX		XXX	
6.1	5	NAIC Designation Category 5.A		XXX	XXX		0.0472		0.0846		0.1410	
6.2	5	NAIC Designation Category 5.B		XXX	XXX		0.0663		0.1188		0.1980	
6.3	5	NAIC Designation Category 5.C		XXX	XXX		0.0836		0.1498		0.2496	
6.4		Subtotal NAIC 5 (6.1+6.2+6.3)		XXX	XXX		XXX		XXX		XXX	
7.	6	NAIC 6		XXX	XXX		0.0000		0.2370		0.2370	
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)	101,974,587	XXX	XXX	101,974,587	XXX	96,949	XXX	296,199	XXX	543,335
PREFERRED STOCKS												
10.	1	Highest quality		XXX	XXX		0.0005		0.0016		0.0033	
11.	2	High quality		XXX	XXX		0.0021		0.0064		0.0106	
12.	3	Medium quality	5,636,964	XXX	XXX	5,636,964	0.0099	55,806	0.0263	148,252	0.0376	211,950
13.	4	Low quality		XXX	XXX		0.0245		0.0572		0.0817	
14.	5	Lower quality		XXX	XXX		0.0630		0.1128		0.1880	
15.	6	In or near default		XXX	XXX		0.0000		0.2370		0.2370	
16.		Affiliated life with AVR		XXX	XXX		0.0000		0.0000		0.0000	
17.		Total preferred stocks (Sum of Lines 10 through 16)	5,636,964	XXX	XXX	5,636,964	XXX	55,806	XXX	148,252	XXX	211,950

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)
SHORT-TERM BONDS												
18.		Exempt obligations		XXX	XXX		0.0000		0.0000		0.0000	
19.1	1	NAIC Designation Category 1.A		XXX	XXX		0.0002		0.0007		0.0013	
19.2	1	NAIC Designation Category 1.B		XXX	XXX		0.0004		0.0011		0.0023	
19.3	1	NAIC Designation Category 1.C		XXX	XXX		0.0006		0.0018		0.0035	
19.4	1	NAIC Designation Category 1.D		XXX	XXX		0.0007		0.0022		0.0044	
19.5	1	NAIC Designation Category 1.E		XXX	XXX		0.0009		0.0027		0.0055	
19.6	1	NAIC Designation Category 1.F		XXX	XXX		0.0011		0.0034		0.0068	
19.7	1	NAIC Designation Category 1.G		XXX	XXX		0.0014		0.0042		0.0085	
19.8		Subtotal NAIC 1 (19.1+19.2+19.3+19.4+19.5+19.6+19.7)		XXX	XXX		XXX		XXX		XXX	
20.1	2	NAIC Designation Category 2.A		XXX	XXX		0.0021		0.0063		0.0105	
20.2	2	NAIC Designation Category 2.B		XXX	XXX		0.0025		0.0076		0.0127	
20.3	2	NAIC Designation Category 2.C		XXX	XXX		0.0036		0.0108		0.0180	
20.4		Subtotal NAIC 2 (20.1+20.2+20.3)		XXX	XXX		XXX		XXX		XXX	
21.1	3	NAIC Designation Category 3.A		XXX	XXX		0.0069		0.0183		0.0262	
21.2	3	NAIC Designation Category 3.B		XXX	XXX		0.0099		0.0264		0.0377	
21.3	3	NAIC Designation Category 3.C		XXX	XXX		0.0131		0.0350		0.0500	
21.4		Subtotal NAIC 3 (21.1+21.2+21.3)		XXX	XXX		XXX		XXX		XXX	
22.1	4	NAIC Designation Category 4.A		XXX	XXX		0.0184		0.0430		0.0615	
22.2	4	NAIC Designation Category 4.B		XXX	XXX		0.0238		0.0555		0.0793	
22.3	4	NAIC Designation Category 4.C		XXX	XXX		0.0310		0.0724		0.1034	
22.4		Subtotal NAIC 4 (22.1+22.2+22.3)		XXX	XXX		XXX		XXX		XXX	
23.1	5	NAIC Designation Category 5.A		XXX	XXX		0.0472		0.0846		0.1410	
23.2	5	NAIC Designation Category 5.B		XXX	XXX		0.0663		0.1188		0.1980	
23.3	5	NAIC Designation Category 5.C		XXX	XXX		0.0836		0.1498		0.2496	
23.4		Subtotal NAIC 5 (23.1+23.2+23.3)		XXX	XXX		XXX		XXX		XXX	
24.	6	NAIC 6		XXX	XXX		0.0000		0.2370		0.2370	
25.		Total short-term bonds (18+19.8+20.4+21.4+22.4+23.4+24)		XXX	XXX		XXX		XXX		XXX	
DERIVATIVE INSTRUMENTS												
26.		Exchange traded		XXX	XXX		0.0005		0.0016		0.0033	
27.	1	Highest quality		XXX	XXX		0.0005		0.0016		0.0033	
28.	2	High quality		XXX	XXX		0.0021		0.0064		0.0106	
29.	3	Medium quality		XXX	XXX		0.0099		0.0263		0.0376	
30.	4	Low quality		XXX	XXX		0.0245		0.0572		0.0817	
31.	5	Lower quality		XXX	XXX		0.0630		0.1128		0.1880	
32.	6	In or near default		XXX	XXX		0.0000		0.2370		0.2370	
33.		Total derivative instruments		XXX	XXX		XXX		XXX		XXX	
34.		Total (Lines 9 + 17 + 25 + 33)	107,611,551	XXX	XXX	107,611,551	XXX	152,755	XXX	444,451	XXX	755,285

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	311,780		XXX	311,780	0.0011	343	0.0057	1,777	0.0074	2,307
36.		Farm mortgages - CM2 - high quality			XXX		0.0040		0.0114		0.0149	
37.		Farm mortgages - CM3 - medium quality			XXX		0.0069		0.0200		0.0257	
38.		Farm mortgages - CM4 - low Medium quality			XXX		0.0120		0.0343		0.0428	
39.		Farm mortgages - CM5 - low quality			XXX		0.0183		0.0486		0.0628	
40.		Residential mortgages - insured or guaranteed			XXX		0.0003		0.0007		0.0011	
41.		Residential mortgages - all other	1,382,190		XXX	1,382,190	0.0015	2,073	0.0034	4,699	0.0046	6,358
42.		Commercial mortgages - insured or guaranteed			XXX		0.0003		0.0007		0.0011	
43.		Commercial mortgages - all other - CM1 - highest quality	12,889,515		XXX	12,889,515	0.0011	14,178	0.0057	73,470	0.0074	95,382
44.		Commercial mortgages - all other - CM2 - high quality	38,819		XXX	38,819	0.0040	155	0.0114	443	0.0149	578
45.		Commercial mortgages - all other - CM3 - medium quality			XXX		0.0069		0.0200		0.0257	
46.		Commercial mortgages - all other - CM4 - low medium quality			XXX		0.0120		0.0343		0.0428	
47.		Commercial mortgages - all other - CM5 - low quality			XXX		0.0183		0.0486		0.0628	
Overdue, Not in Process:												
48.		Farm mortgages			XXX		0.0480		0.0868		0.1371	
49.		Residential mortgages - insured or guaranteed			XXX		0.0006		0.0014		0.0023	
50.		Residential mortgages - all other			XXX		0.0029		0.0066		0.0103	
51.		Commercial mortgages - insured or guaranteed			XXX		0.0006		0.0014		0.0023	
52.		Commercial mortgages - all other			XXX		0.0480		0.0868		0.1371	
In Process of Foreclosure:												
53.		Farm mortgages			XXX		0.0000		0.1942		0.1942	
54.		Residential mortgages - insured or guaranteed			XXX		0.0000		0.0046		0.0046	
55.		Residential mortgages - all other			XXX		0.0000		0.0149		0.0149	
56.		Commercial mortgages - insured or guaranteed			XXX		0.0000		0.0046		0.0046	
57.		Commercial mortgages - all other			XXX		0.0000		0.1942		0.1942	
58.		Total Schedule B mortgages (Sum of Lines 35 through 57)	14,622,304		XXX	14,622,304	XXX	16,750	XXX	80,389	XXX	104,626

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

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution		Reserve Objective		Maximum Reserve	
							5 Factor	6 Amount (Cols. 4 x 5)	7 Factor	8 Amount (Cols. 4 x 7)	9 Factor	10 Amount (Cols. 4 x 9)
COMMON STOCK												
1.		Unaffiliated - public	49,950,575	XXX	XXX	49,950,575	0.0000		0.1000 (a)	4,995,058	0.1000 (a)	4,995,058
2.		Unaffiliated - private		XXX	XXX		0.0000		0.1945		0.1945	
3.		Federal Home Loan Bank	319,600	XXX	XXX	319,600	0.0000		0.0061	1,950	0.0097	3,100
4.		Affiliated - life with AVR		XXX	XXX		0.0000		0.0000		0.0000	
Affiliated - Investment Subsidiary:												
5.		Fixed income - exempt obligations					XXX		XXX		XXX	
6.		Fixed income - highest quality					XXX		XXX		XXX	
7.		Fixed income - high quality					XXX		XXX		XXX	
8.		Fixed income - medium quality					XXX		XXX		XXX	
9.		Fixed income - low quality					XXX		XXX		XXX	
10.		Fixed income - lower quality					XXX		XXX		XXX	
11.		Fixed income - in or near default					XXX		XXX		XXX	
12.		Unaffiliated common stock - public					0.0000		0.1580 (a)		0.1580 (a)	
13.		Unaffiliated common stock - private					0.0000		0.1945		0.1945	
14.		Real estate					(b)		(b)		(b)	
15.		Affiliated - certain other (See SVO Purposes and Procedures Manual)		XXX	XXX		0.0000		0.1580		0.1580	
16.		Affiliated - all other	2,360,821	XXX	XXX	2,360,821	0.0000		0.1945	459,180	0.1945	459,180
17.		Total common stock (Sum of Lines 1 through 16)	52,630,996			52,630,996	XXX		XXX	5,456,187	XXX	5,457,337
REAL ESTATE												
18.		Home office property (General Account only)					0.0000		0.0912		0.0912	
19.		Investment properties	23,843,663			23,843,663	0.0000		0.0912	2,174,542	0.0912	2,174,542
20.		Properties acquired in satisfaction of debt					0.0000		0.1337		0.1337	
21.		Total real estate (Sum of Lines 18 through 20)	23,843,663			23,843,663	XXX		XXX	2,174,542	XXX	2,174,542
OTHER INVESTED ASSETS												
INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF BONDS												
22.		Exempt obligations		XXX	XXX		0.0000		0.0000		0.0000	
23.	1	Highest quality		XXX	XXX		0.0005		0.0016		0.0033	
24.	2	High quality		XXX	XXX		0.0021		0.0064		0.0106	
25.	3	Medium quality		XXX	XXX		0.0099		0.0263		0.0376	
26.	4	Low quality		XXX	XXX		0.0245		0.0572		0.0817	
27.	5	Lower quality		XXX	XXX		0.0630		0.1128		0.1880	
28.	6	In or near default		XXX	XXX		0.0000		0.2370		0.2370	
29.		Total with bond characteristics (Sum of Lines 22 through 28)		XXX	XXX		XXX		XXX		XXX	

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

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution		Reserve Objective		Maximum Reserve	
							5 Factor	6 Amount (Cols. 4 x 5)	7 Factor	8 Amount (Cols. 4 x 7)	9 Factor	10 Amount (Cols. 4 x 9)
INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF PREFERRED STOCKS												
30.	1	Highest quality		XXX	XXX		0.0005		0.0016		0.0033	
31.	2	High quality		XXX	XXX		0.0021		0.0064		0.0106	
32.	3	Medium quality		XXX	XXX		0.0099		0.0263		0.0376	
33.	4	Low quality		XXX	XXX		0.0245		0.0572		0.0817	
34.	5	Lower quality		XXX	XXX		0.0630		0.1128		0.1880	
35.	6	In or near default		XXX	XXX		0.0000		0.2370		0.2370	
36.		Affiliated life with AVR		XXX	XXX		0.0000		0.0000		0.0000	
37.		Total with preferred stock characteristics (Sum of Lines 30 through 36)		XXX	XXX		XXX		XXX		XXX	
INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF MORTGAGE LOANS												
In Good Standing Affiliated:												
38.		Mortgages - CM1 - highest quality			XXX		0.0011		0.0057		0.0074	
39.		Mortgages - CM2 - high quality			XXX		0.0040		0.0114		0.0149	
40.		Mortgages - CM3 - medium quality			XXX		0.0069		0.0200		0.0257	
41.		Mortgages - CM4 - low medium quality			XXX		0.0120		0.0343		0.0428	
42.		Mortgages - CM5 - low quality			XXX		0.0183		0.0486		0.0628	
43.		Residential Mortgages - insured or guaranteed			XXX		0.0003		0.0007		0.0011	
44.		Residential Mortgages - all other		XXX	XXX		0.0015		0.0034		0.0046	
45.		Commercial Mortgages - insured or guaranteed			XXX		0.0003		0.0007		0.0011	
Overdue, Not in Process Affiliated:												
46.		Farm mortgages			XXX		0.0480		0.0868		0.1371	
47.		Residential mortgages - insured or guaranteed			XXX		0.0006		0.0014		0.0023	
48.		Residential mortgages - all other			XXX		0.0029		0.0066		0.0103	
49.		Commercial mortgages - insured or guaranteed			XXX		0.0006		0.0014		0.0023	
50.		Commercial mortgages - all other			XXX		0.0480		0.0868		0.1371	
In Process of Foreclosure Affiliated:												
51.		Farm mortgages			XXX		0.0000		0.1942		0.1942	
52.		Residential mortgages - insured or guaranteed			XXX		0.0000		0.0046		0.0046	
53.		Residential mortgages - all other			XXX		0.0000		0.0149		0.0149	
54.		Commercial mortgages - insured or guaranteed			XXX		0.0000		0.0046		0.0046	
55.		Commercial mortgages - all other			XXX		0.0000		0.1942		0.1942	
56.		Total affiliated (Sum of Lines 38 through 55)			XXX		XXX		XXX		XXX	
57.		Unaffiliated - in good standing with covenants			XXX		(c)		(c)		(c)	
58.		Unaffiliated - in good standing defeased with government securities			XXX		0.0011		0.0057		0.0074	
59.		Unaffiliated - in good standing primarily senior			XXX		0.0040		0.0114		0.0149	
60.		Unaffiliated - in good standing all other			XXX		0.0069		0.0200		0.0257	
61.		Unaffiliated - overdue, not in process			XXX		0.0480		0.0868		0.1371	
62.		Unaffiliated - in process of foreclosure			XXX		0.0000		0.1942		0.1942	
63.		Total unaffiliated (Sum of Lines 57 through 62)			XXX		XXX		XXX		XXX	
64.		Total with mortgage loan characteristics (Lines 56 + 63)			XXX		XXX		XXX		XXX	

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company

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

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution		Reserve Objective		Maximum Reserve	
							5 Factor	6 Amount (Cols.4 x 5)	7 Factor	8 Amount (Cols. 4 x 7)	9 Factor	10 Amount (Cols. 4 x 9)
INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF COMMON STOCK												
65.		Unaffiliated public		XXX	XXX		0.0000		0.1580 (a)		0.1580 (a)	
66.		Unaffiliated private	8,686,996	XXX	XXX	8,686,996	0.0000		0.1945	1,689,621	0.1945	1,689,621
67.		Affiliated life with AVR		XXX	XXX		0.0000		0.0000		0.0000	
68.		Affiliated certain other (See SVO Purposes & Procedures Manual)		XXX	XXX		0.0000		0.1580		0.1580	
69.		Affiliated other - all other		XXX	XXX		0.0000		0.1945		0.1945	
70.		Total with common stock characteristics (Sum of Lines 65 through 69)	8,686,996	XXX	XXX	8,686,996	XXX		XXX	1,689,621	XXX	1,689,621
INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF REAL ESTATE												
71.		Home office property (General Account only)					0.0000		0.0912		0.0912	
72.		Investment properties	8,262,986			8,262,986	0.0000		0.0912	753,584	0.0912	753,584
73.		Properties acquired in satisfaction of debt					0.0000		0.1337		0.1337	
74.		Total with real estate characteristics (Sum of Lines 71 through 73)	8,262,986			8,262,986	XXX		XXX	753,584	XXX	753,584
INVESTMENTS IN TAX CREDIT STRUCTURES												
75.		Yield guaranteed state tax credit investments					0.0003		0.0006		0.0010	
76.		Qualifying federal tax credit investments					0.0063		0.0120		0.0190	
77.		Qualifying state tax credit investments					0.0063		0.0120		0.0190	
78.		Other tax credit investments					0.0273		0.0600		0.0975	
79.		Total tax credit investments (Sum of Lines 75 through 78)					XXX		XXX		XXX	
RESIDUAL TRANCHES OR INTERESTS												
80.		Bonds - unaffiliated		XXX	XXX		0.0000		0.1580		0.1580	
81.		Bonds - affiliated		XXX	XXX		0.0000		0.1580		0.1580	
82.		Common stock - unaffiliated		XXX	XXX		0.0000		0.1580		0.1580	
83.		Common stock - affiliated		XXX	XXX		0.0000		0.1580		0.1580	
84.		Preferred stock - unaffiliated		XXX	XXX		0.0000		0.1580		0.1580	
85.		Preferred stock - affiliated		XXX	XXX		0.0000		0.1580		0.1580	
86.		Real estate - unaffiliated					0.0000		0.1580		0.1580	
87.		Real estate - affiliated					0.0000		0.1580		0.1580	
88.		Mortgage loans - unaffiliated		XXX	XXX		0.0000		0.1580		0.1580	
89.		Mortgage loans - affiliated		XXX	XXX		0.0000		0.1580		0.1580	
90.		Other - unaffiliated		XXX	XXX		0.0000		0.1580		0.1580	
91.		Other - affiliated		XXX	XXX		0.0000		0.1580		0.1580	
92.		Total residual tranches or interests (Sum of Lines 80 through 91)					XXX		XXX		XXX	
SURPLUS NOTES AND CAPITAL NOTES												
93.	1	Highest quality		XXX	XXX		0.0005		0.0016		0.0033	
94.	2	High quality		XXX	XXX		0.0021		0.0064		0.0106	
95.	3	Medium quality		XXX	XXX		0.0099		0.0263		0.0376	
96.	4	Low quality		XXX	XXX		0.0245		0.0572		0.0817	
97.	5	Lower quality		XXX	XXX		0.0630		0.1128		0.1880	
98.	6	In or near default		XXX	XXX		0.0000		0.2370		0.2370	
99.		Total surplus notes and capital notes (Sum of Lines 93 through 98)		XXX	XXX		XXX		XXX		XXX	
ALL OTHER INVESTMENTS												
100.		NAIC 1 working capital finance investments		XXX			0.0000		0.0042		0.0042	
101.		NAIC 2 working capital finance investments		XXX			0.0000		0.0137		0.0137	
102.		Other invested assets - Schedule BA	130,938,641	XXX		130,938,641	0.0000		0.1580	20,688,305	0.1580	20,688,305
103.		Other short-term invested assets - Schedule DA		XXX			0.0000		0.1580		0.1580	
104.		Total all other (Sum of Lines 100 through 103)	130,938,641	XXX		130,938,641	XXX		XXX	20,688,305	XXX	20,688,305
105.		Total other invested assets - Schedules BA & DA (Sum of Lines 29, 37, 64, 70, 74, 79, 92, 99 and 104)	147,888,623			147,888,623	XXX		XXX	23,131,510	XXX	23,131,510

(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

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company

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

	Total		Comprehensive (Hospital and Medical) Individual		Comprehensive (Hospital and Medical) Group		Medicare Supplement		Vision Only		Dental Only		Federal Employees Health Benefits Plan	
	1 Amount	2 %	3 Amount	4 %	5 Amount	6 %	7 Amount	8 %	9 Amount	10 %	11 Amount	12 %	13 Amount	14 %
1. Premiums written	3,328	XXX	412	XXX		XXX		XXX		XXX		XXX		XXX
2. Premiums earned	3,328	XXX	412	XXX		XXX		XXX		XXX		XXX		XXX
3. Incurred claims	11,200	336.5												
4. Cost containment expenses														
5. Incurred claims and cost containment expenses (Lines 3 and 4)	11,200	336.5												
6. Increase in contract reserves	2,807	84.3	(56)	(13.6)										
7. Commissions (a)	(207)	(6.2)												
8. Other general insurance expenses	88,325	2,654.0	10,934	2,653.9										
9. Taxes, licenses and fees	1,446	43.4	179	43.4										
10. Total other expenses incurred	89,564	2,691.2	11,113	2,697.3										
11. Aggregate write-ins for deductions														
12. Gain from underwriting before dividends or refunds	(100,243)	(3,012.1)	(10,645)	(2,583.7)										
13. Dividends or refunds														
14. Gain from underwriting after dividends or refunds	(100,243)	(3,012.1)	(10,645)	(2,583.7)										
DETAILS OF WRITE-INS														
1101.														
1102.														
1103.														
1198. Summary of remaining write-ins for Line 11 from overflow page														
1199. Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)														

	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	148	XXX		XXX	2,768	XXX
2. Premiums earned		XXX		XXX		XXX	148	XXX		XXX	2,768	XXX
3. Incurred claims							(589)	(398.0)			11,789	425.9
4. Cost containment expenses												
5. Incurred claims and cost containment expenses (Lines 3 and 4)							(589)	(398.0)			11,789	425.9
6. Increase in contract reserves											2,863	103.4
7. Commissions (a)											(207)	(7.5)
8. Other general insurance expenses							3,928	2,654.1			73,463	2,654.0
9. Taxes, licenses and fees							64	43.2			1,203	43.5
10. Total other expenses incurred							3,992	2,697.3			74,459	2,690.0
11. Aggregate write-ins for deductions												
12. Gain from underwriting before dividends or refunds							(3,255)	(2,199.3)			(86,343)	(3,119.3)
13. Dividends or refunds												
14. Gain from underwriting after dividends or refunds							(3,255)	(2,199.3)			(86,343)	(3,119.3)
DETAILS OF WRITE-INS												
1101.												
1102.												
1103.												
1198. Summary of remaining write-ins for Line 11 from overflow page												
1199. Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)												

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

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT (Continued)

PART 2. - RESERVES AND LIABILITIES

	1	2	3	4	5	6	7	8	9	10	11	12	13
	Total	Comprehensive (Hospital and Medical) Individual	Comprehensive (Hospital and Medical) Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Medicare Title XVIII	Medicaid Title XIX	Credit A&H	Disability Income	Long-Term Care	Other Health
A. Premium Reserves:													
1. Unearned premiums													
2. Advance premiums													
3. Reserve for rate credits													
4. Total premium reserves, current year													
5. Total premium reserves, prior year													
6. Increase in total premium reserves													
B. Contract Reserves:													
1. Additional reserves (a)	7,430	432									74		6,924
2. Reserve for future contingent benefits													
3. Total contract reserves, current year	7,430	432									74		6,924
4. Total contract reserves, prior year	4,623	488									74		4,061
5. Increase in contract reserves	2,807	(56)											2,863
C. Claim Reserves and Liabilities:													
1. Total current year	74,919										27,954		46,965
2. Total prior year	76,058										28,543		47,515
3. Increase	(1,139)										(589)		(550)

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

	1	2	3	4	5	6	7	8	9	10	11	12	13
	Total	Comprehensive (Hospital and Medical) Individual	Comprehensive (Hospital and Medical) Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Medicare Title XVIII	Medicaid Title XIX	Credit A&H	Disability Income	Long-Term Care	Other Health
1. Claims paid during the year:													
1.1 On claims incurred prior to current year													
1.2 On claims incurred during current year	12,339												12,339
2. Claim reserves and liabilities, December 31, current year:													
2.1 On claims incurred prior to current year	73,860										26,895		46,965
2.2 On claims incurred during current year													
3. Test:													
3.1 Lines 1.1 and 2.1	73,860										26,895		46,965
3.2 Claim reserves and liabilities, December 31, prior year	76,058										28,543		47,515
3.3 Line 3.1 minus Line 3.2	(2,198)										(1,648)		(550)

PART 4. - REINSURANCE

	1	2	3	4	5	6	7	8	9	10	11	12	13
	Total	Comprehensive (Hospital and Medical) Individual	Comprehensive (Hospital and Medical) Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Medicare Title XVIII	Medicaid Title XIX	Credit A&H	Disability Income	Long-Term Care	Other Health
A. Reinsurance Assumed:													
1. Premiums written													
2. Premiums earned													
3. Incurred claims													
4. Commissions													
B. Reinsurance Ceded:													
1. Premiums written													
2. Premiums earned													
3. Incurred claims	9,016										1,648		7,368
4. Commissions	207												207

(a) Includes \$ premium deficiency reserve.

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company

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												20,216	20,216
2. Beginning claim reserves and liabilities												121,639	121,639
3. Ending claim reserves and liabilities												116,959	116,959
4. Claims paid												24,896	24,896
B. Assumed Reinsurance:													
1. Incurred claims													
2. Beginning claim reserves and liabilities													
3. Ending claim reserves and liabilities													
4. Claims paid													
C. Ceded Reinsurance:													
1. Incurred claims										1,648		7,368	9,016
2. Beginning claim reserves and liabilities												46,640	46,640
3. Ending claim reserves and liabilities												43,099	43,099
4. Claims paid										1,648		10,909	12,557
D. Net:													
1. Incurred claims										(1,648)		12,848	11,200
2. Beginning claim reserves and liabilities												74,999	74,999
3. Ending claim reserves and liabilities												73,860	73,860
4. Claims paid										(1,648)		13,987	12,339
E. Net Incurred Claims and Cost Containment Expenses:													
1. Incurred claims and cost containment expenses										(589)		11,789	11,200
2. Beginning reserves and liabilities												74,999	74,999
3. Ending reserves and liabilities													
4. Paid claims and cost containment expenses										(589)		86,788	86,199

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company

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									
0699999			Total General Account - non-U.S. affiliates									
0799999			Total General Account - affiliates									
1099999			Total General Account - non-affiliates									
1199999			Total General Account									
1499999			Total Separate Accounts - U.S. affiliates									
1799999			Total Separate Accounts - non-U.S. affiliates									
1899999			Total Separate Accounts - affiliates									
2199999			Total Separate Accounts - non-affiliates									
2299999			Total Separate Accounts									
2399999			Total U.S. (Sum of 0399999, 0899999, 1499999 and 1999999)									
2499999			Total non-U.S. (Sum of 0699999, 0999999, 1799999 and 2099999)									
9999999			Totals									

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company

SCHEDULE S - PART 1 - SECTION 2

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

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	ID Number	Effective Date	Name of Reinsured	Domiciliary Jurisdiction	Type of Reinsurance Assumed	Type of Business Assumed	Premiums	Unearned Premiums	Reserve Liability Other Than for Unearned Premiums	Reinsurance Payable on Paid and Unpaid Losses	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
0399999. Total - U.S. affiliates												
0699999. Total - non-U.S. affiliates												
0799999. Total - affiliates												
1099999. Total - non-affiliates												
1199999. Total U.S. (Sum of 0399999 and 0899999)												
1299999. Total non-U.S. (Sum of 0699999 and 0999999)												
9999999 - Totals												

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company

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						
0699999. Total life and annuity - non-U.S. affiliates						
0799999. Total life and annuity - affiliates						
.....65676 .....	..35-0472300 ..	..02/01/1971 ..	LINCOLN NATIONAL LIFE INSURANCE COMPANY	IN.....	.....12,042 .....	.....3,500
.....88099 .....	..75-1608507 ..	..08/01/1991 ..	OPTIMUM RE INSURANCE COMPANY	TX.....	.....904 .....	.....77,631
.....60003 .....	..04-2350154 ..	..09/30/1996 ..	PARK AVENUE LIFE INSURANCE COMPANY	DE.....	.....	.....152,051
.....64688 .....	..75-6020048 ..	..01/10/1991 ..	SCOR GLOBAL LIFE AMERICAS REINSURANCE CO	DE.....	.....	.....9,281
.....82627 .....	..06-0839705 ..	..09/30/1996 ..	SWISS RE LIFE & HEALTH AMERICAN, INC	MO.....	.....124,566 .....	.....152,528
0899999. Life and annuity - U.S. non-affiliates						
1099999. Total life and annuity - non-affiliates						
1199999. Total life and annuity						
1499999. Total accident and health - U.S. affiliates						
1799999. Total accident and health - non-U.S. affiliates						
1899999. Total accident and health - affiliates						
.....65676 .....	..35-0472300 ..	..09/01/1969 ..	LINCOLN NATIONAL LIFE INSURANCE COMPANY	IN.....	.....2,208 .....	.....1,209
1999999. Accident and health - U.S. non-affiliates						
2199999. Total accident and health - non-affiliates						
2299999. Total accident and health						
2399999. Total U.S. (Sum of 0399999, 0899999, 1499999 and 1999999)						
2499999. Total non-U.S. (Sum of 0699999, 0999999, 1799999 and 2099999)						
9999999 Totals - Life, Annuity and Accident and Health						

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company

SCHEDULE S - PART 3 - SECTION 1

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

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domi- ciliary Juris- diction	6 Type of Reinsurance Ceded	7 Type of Business Ceded	8 Amount in Force at End of Year	Reserve Credit Taken		11 Premiums	Outstanding Surplus Relief		14 Modified Coinsurance Reserve	15 Funds Withheld Under Coinsurance
								9 Current Year	10 Prior Year		12 Current Year	13 Prior Year		
0399999. Total General Account - authorized U.S. affiliates														
0699999. Total General Account - authorized non-U.S. affiliates														
0799999. Total General Account - authorized affiliates														
..86258	..13-2572994	..05/01/1975	GENERAL RE LIFE CORP	CT	YRT/I		25,000	975	904		1,825			
..65676	..35-0472300	..02/01/1971	LINCOLN NATIONAL LIFE INSURANCE COMPANY	IN	CO/I		1,346,380	498,957	515,269		24,267			
..65676	..35-0472300	..02/01/1971	LINCOLN NATIONAL LIFE INSURANCE COMPANY	IN	YRT/I		140,361	2,865	2,580					
..88099	..75-1608507	..08/01/1991	OPTIMUM RE INSURANCE COMPANY	TX	CO/I		1,691,397	249,443	242,649		19,764			
..88099	..75-1608507	..08/01/1991	OPTIMUM RE INSURANCE COMPANY	TX	OTH/I						7,755			
..88099	..75-1608507	..08/01/1991	OPTIMUM RE INSURANCE COMPANY	TX	YRT/I		60,140,894	646,000	639,268		1,312,424			
..60003	..04-2350154	..09/30/1996	PARK AVENUE LIFE INSURANCE COMPANY	DE	CO/I		21,108,985	13,184,796	13,557,425		(695)			
..60003	..04-2350154	..09/30/1996	PARK AVENUE LIFE INSURANCE COMPANY	DE	CO/I			374,865	369,411					
..60003	..04-2350154	..09/30/1996	PARK AVENUE LIFE INSURANCE COMPANY	DE	OTH/I			3,469,705	3,480,496					
..64688	..75-6020048	..01/10/1991	SCOR GLOBAL LIFE AMERICAS REINSURANCE COMPANY	DE	CO/I		20,365,170	5,428,016	5,479,116		203,984			
..64688	..75-6020048	..01/10/1991	SCOR GLOBAL LIFE AMERICAS REINSURANCE COMPANY	DE	YRT/I		148,963	1,238	1,147		647			
..82627	..06-0839705	..11/15/1976	SWISS RE LIFE & HEALTH AMERICA INC	MO	CO/I		14,629,128	2,795,837	2,706,198		44,296			
..82627	..06-0839705	..11/15/1976	SWISS RE LIFE & HEALTH AMERICA INC	MO	YRT/I		30,751,093	122,537	109,187		748,952			
..86231	..39-0989781	..10/01/1988	TRANSAMERICA LIFE INSURANCE CO	IA	YRT/I		3,355,000	93,173	87,046		140,384			
0899999. General Account - authorized U.S. non-affiliates							153,702,371	26,868,407	27,190,696		2,503,603			
1099999. Total General Account - authorized non-affiliates							153,702,371	26,868,407	27,190,696		2,503,603			
1199999. Total General Account authorized							153,702,371	26,868,407	27,190,696		2,503,603			
1499999. Total General Account - unauthorized U.S. affiliates														
1799999. Total General Account - unauthorized non-U.S. affiliates														
1899999. Total General Account - unauthorized affiliates														
2199999. Total General Account - unauthorized non-affiliates														
2299999. Total General Account unauthorized														
2599999. Total General Account - certified U.S. affiliates														
2899999. Total General Account - certified non-U.S. affiliates														
2999999. Total General Account - certified affiliates														
3299999. Total General Account - certified non-affiliates														
3399999. Total General Account certified														
3699999. Total General Account - reciprocal jurisdiction U.S. affiliates														
3999999. Total General Account - reciprocal jurisdiction non-U.S. affiliates														
4099999. Total General Account - reciprocal jurisdiction affiliates														
4399999. Total General Account - reciprocal jurisdiction non-affiliates														
4499999. Total General Account reciprocal jurisdiction														
4599999. Total General Account authorized, unauthorized, reciprocal jurisdiction and certified							153,702,371	26,868,407	27,190,696		2,503,603			
4899999. Total Separate Accounts - authorized U.S. affiliates														
5199999. Total Separate Accounts - authorized non-U.S. affiliates														
5299999. Total Separate Accounts - authorized affiliates														
5599999. Total Separate Accounts - authorized non-affiliates														
5699999. Total Separate Accounts authorized														
5999999. Total Separate Accounts - unauthorized U.S. affiliates														
6299999. Total Separate Accounts - unauthorized non-U.S. affiliates														
6399999. Total Separate Accounts - unauthorized affiliates														
6699999. Total Separate Accounts - unauthorized non-affiliates														
6799999. Total Separate Accounts unauthorized														
7099999. Total Separate Accounts - certified U.S. affiliates														
7399999. Total Separate Accounts - certified non-U.S. affiliates														
7499999. Total Separate Accounts - certified affiliates														
7799999. Total Separate Accounts - certified non-affiliates														
7899999. Total Separate Accounts certified														
8199999. Total Separate Accounts - reciprocal jurisdiction U.S. affiliates														
8499999. Total Separate Accounts - reciprocal jurisdiction non-U.S. affiliates														

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company

SCHEDULE S - PART 3 - SECTION 1

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

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domi- ciliary Juris- diction	6 Type of Reinsurance Ceded	7 Type of Business Ceded	8 Amount in Force at End of Year	Reserve Credit Taken		11 Premiums	Outstanding Surplus Relief		14 Modified Coinsurance Reserve	15 Funds Withheld Under Coinsurance
								9 Current Year	10 Prior Year		12 Current Year	13 Prior Year		
8599999. Total Separate Accounts - reciprocal jurisdiction affiliates														
8899999. Total Separate Accounts - reciprocal jurisdiction non-affiliates														
8999999. Total Separate Accounts reciprocal jurisdiction														
9099999. Total Separate Accounts authorized, unauthorized, reciprocal jurisdiction and certified														
9199999. Total U.S. (Sum of 0399999, 0899999, 1499999, 1999999, 2599999, 3099999, 3699999, 4199999, 4899999, 5399999, 5999999, 6499999, 7099999, 7599999, 8199999 and 8699999)							153,702,371	26,868,407	27,190,696	2,503,603				
9299999. Total non-U.S. (Sum of 0699999, 0999999, 1799999, 2099999, 2899999, 3199999, 3999999, 4299999, 5199999, 5499999, 6299999, 6599999, 7399999, 7699999, 8499999 and 8799999)														
9999999 - Totals							153,702,371	26,868,407	27,190,696	2,503,603				

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company

SCHEDULE S - PART 3 - SECTION 2

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

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domi- ciliary Juris- diction	6 Type of Reinsurance Ceded	7 Type of Business Ceded	8 Premiums	9 Unearned Premiums (Estimated)	10 Reserve Credit Taken Other than for Unearned Premiums	Outstanding Surplus Relief		13 Modified Coinsurance Reserve	14 Funds Withheld Under Coinsurance
										11 Current Year	12 Prior Year		
0399999. Total General Account - authorized U.S. affiliates													
0699999. Total General Account - authorized non-U.S. affiliates													
0799999. Total General Account - authorized affiliates													
65676	35-0472300	09/01/1969	LINCOLN NATIONAL LIFE INSURANCE COMPANY	IN		OH		102	30,546				
	81-0170040	11/15/1976	UNION SECURITY INSURANCE COMPANY	KS		OH	1,964						
86258	13-2572994	09/19/1989	GENERAL RE LIFE CORP	CT		OH		487	3,998				
0899999. General Account - authorized U.S. non-affiliates													
1099999. Total General Account - authorized non-affiliates													
1199999. Total General Account authorized													
1499999. Total General Account - unauthorized U.S. affiliates													
1799999. Total General Account - unauthorized non-U.S. affiliates													
1899999. Total General Account - unauthorized affiliates													
2199999. Total General Account - unauthorized non-affiliates													
2299999. Total General Account unauthorized													
2599999. Total General Account - certified U.S. affiliates													
2899999. Total General Account - certified non-U.S. affiliates													
2999999. Total General Account - certified affiliates													
3299999. Total General Account - certified non-affiliates													
3399999. Total General Account certified													
3699999. Total General Account - reciprocal jurisdiction U.S. affiliates													
3999999. Total General Account - reciprocal jurisdiction non-U.S. affiliates													
4099999. Total General Account - reciprocal jurisdiction affiliates													
4399999. Total General Account - reciprocal jurisdiction non-affiliates													
4499999. Total General Account reciprocal jurisdiction													
4599999. Total General Account authorized, unauthorized, reciprocal jurisdiction and certified													
4899999. Total Separate Accounts - authorized U.S. affiliates													
5199999. Total Separate Accounts - authorized non-U.S. affiliates													
5299999. Total Separate Accounts - authorized affiliates													
5599999. Total Separate Accounts - authorized non-affiliates													
5699999. Total Separate Accounts authorized													
5999999. Total Separate Accounts - unauthorized U.S. affiliates													
6299999. Total Separate Accounts - unauthorized non-U.S. affiliates													
6399999. Total Separate Accounts - unauthorized affiliates													
6699999. Total Separate Accounts - unauthorized non-affiliates													
6799999. Total Separate Accounts unauthorized													
7099999. Total Separate Accounts - certified U.S. affiliates													
7399999. Total Separate Accounts - certified non-U.S. affiliates													
7499999. Total Separate Accounts - certified affiliates													
7799999. Total Separate Accounts - certified non-affiliates													
7899999. Total Separate Accounts certified													
8199999. Total Separate Accounts - reciprocal jurisdiction U.S. affiliates													
8499999. Total Separate Accounts - reciprocal jurisdiction non-U.S. affiliates													
8599999. Total Separate Accounts - reciprocal jurisdiction affiliates													
8899999. Total Separate Accounts - reciprocal jurisdiction non-affiliates													
8999999. Total Separate Accounts reciprocal jurisdiction													
9099999. Total Separate Accounts authorized, unauthorized, reciprocal jurisdiction and certified													
9199999. Total U.S. (Sum of 0399999, 0899999, 1499999, 1999999, 2599999, 3099999, 3699999, 4199999, 4899999, 5399999, 5999999, 6499999, 7099999, 7599999, 8199999 and 8699999)													
9299999. Total non-U.S. (Sum of 0699999, 0999999, 1799999, 2099999, 2899999, 3199999, 3999999, 4299999, 5199999, 5499999, 6299999, 6599999, 7399999, 7699999, 8499999 and 8799999)													
9999999 - Totals													

Schedule S - Part 4

NONE

Schedule S - Part 4 - Bank Footnote

NONE

Schedule S - Part 5

NONE

Schedule S - Part 5 - Bank Footnote

NONE

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company

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	2,506	2,278	2,542	2,691	2,649
2. Commissions and reinsurance expense allowances	109	112	109	132	131
3. Contract claims	1,610	2,304	3,069	2,593	2,534
4. Surrender benefits and withdrawals for life contracts	383	328	299	222	336
5. Dividends to policyholders and refunds to members	43	44	44	46	46
6. Reserve adjustments on reinsurance ceded					
7. Increase in aggregate reserve for life and accident and health contracts	(315)	(326)	(475)	428	(534)
B. BALANCE SHEET ITEMS					
8. Premiums and annuity considerations for life and accident and health contracts deferred and uncollected	230	597	150	134	264
9. Aggregate reserves for life and accident and health contracts	26,904	27,229	27,530	28,016	28,421
10. Liability for deposit-type contracts	3,470	3,480	3,455	3,466	3,424
11. Contract claims unpaid	406	649	773	1,146	567
12. Amounts recoverable on reinsurance	140	351	506	26	436
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					
17. Offset for reinsurance with certified reinsurers					
C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)					
18. Funds deposited by and withheld from (F)					
19. Letters of credit (L)					
20. Trust agreements (T)					
21. Other (O)					
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)					

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company

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)	368,060,834		368,060,834
2. Reinsurance (Line 16)	260,383	(260,383)	
3. Premiums and considerations (Line 15)	196,027	229,522	425,549
4. Net credit for ceded reinsurance	XXX	23,870,463	23,870,463
5. All other admitted assets (balance)	1,413,678		1,413,678
6. Total assets excluding Separate Accounts (Line 26)	369,930,922	23,839,602	393,770,524
7. Separate Account assets (Line 27)			
8. Total assets (Line 28)	369,930,922	23,839,602	393,770,524
LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
9. Contract reserves (Lines 1 and 2)	191,679,437	23,433,836	215,113,273
10. Liability for deposit-type contracts (Line 3)	11,250,995		11,250,995
11. Claim reserves (Line 4)	3,050,234	405,766	3,456,000
12. Policyholder dividends/member refunds/reserves (Lines 5 through 7)	297,425		297,425
13. Premium & annuity considerations received in advance (Line 8)	24,557		24,557
14. Other contract liabilities (Line 9)	7,303,109		7,303,109
15. Reinsurance in unauthorized companies (Line 24.02 minus inset amount)			
16. Funds held under reinsurance treaties with unauthorized reinsurers (Line 24.03 minus inset amount)			
17. Reinsurance with certified reinsurers (Line 24.02 inset amount)			
18. Funds held under reinsurance treaties with certified reinsurers (Line 24.03 inset amount)			
19. All other liabilities (balance)	48,021,315		48,021,315
20. Total liabilities excluding Separate Accounts (Line 26)	261,627,072	23,839,602	285,466,674
21. Separate Account liabilities (Line 27)			
22. Total liabilities (Line 28)	261,627,072	23,839,602	285,466,674
23. Capital & surplus (Line 38)	108,303,850	XXX	108,303,850
24. Total liabilities, capital & surplus (Line 39)	369,930,922	23,839,602	393,770,524
NET CREDIT FOR CEDED REINSURANCE			
25. Contract reserves	23,433,836		
26. Claim reserves	405,766		
27. Policyholder dividends/reserves			
28. Premium & annuity considerations received in advance			
29. Liability for deposit-type contracts			
30. Other contract liabilities			
31. Reinsurance ceded assets	260,383		
32. Other ceded reinsurance recoverables			
33. Total ceded reinsurance recoverables	24,099,985		
34. Premiums and considerations	229,522		
35. Reinsurance in unauthorized companies			
36. Funds held under reinsurance treaties with unauthorized reinsurers			
37. Reinsurance with certified reinsurers			
38. Funds held under reinsurance treaties with certified reinsurers			
39. Other ceded reinsurance payables/offsets			
40. Total ceded reinsurance payable/offsets	229,522		
41. Total net credit for ceded reinsurance	23,870,463		

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company

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
NONE												
LONG-TERM BONDS												
1. Exempt obligations												
2.1 NAIC Designation Category 1.A												
2.2 NAIC Designation Category 1.B												
2.3 NAIC Designation Category 1.C												
2.4 NAIC Designation Category 1.D												
2.5 NAIC Designation Category 1.E												
2.6 NAIC Designation Category 1.F												
2.7 NAIC Designation Category 1.G												
2.8 Subtotal NAIC 1 (2.1+2.2+2.3+2.4+2.5+2.6+2.7)												
3.1 NAIC Designation Category 2.A												
3.2 NAIC Designation Category 2.B												
3.3 NAIC Designation Category 2.C												
3.4 Subtotal NAIC 2 (3.1+3.2+3.3)												
4.1 NAIC Designation Category 3.A												
4.2 NAIC Designation Category 3.B												
4.3 NAIC Designation Category 3.C												
4.4 Subtotal NAIC 3 (4.1+4.2+4.3)												
5.1 NAIC Designation Category 4.A												
5.2 NAIC Designation Category 4.B												
5.3 NAIC Designation Category 4.C												
5.4 Subtotal NAIC 4 (5.1+5.2+5.3)												
6.1 NAIC Designation Category 5.A												
6.2 NAIC Designation Category 5.B												
6.3 NAIC Designation Category 5.C												
6.4 Subtotal NAIC 5 (6.1+6.2+6.3)												
7. NAIC 6												
8. Total long-term bonds (Sum of Lines 1+2.8+3.4+4.4+5.4+6.4+7)												
PREFERRED STOCKS												
9. Highest quality												
10. High quality												
11. Medium quality												
12. Low quality												
13. Lower quality												
14. In or near default												
15. Affiliated life with AVR												
16. Total preferred stocks (Sum of Lines 9 through 15)												

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company

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
SHORT-TERM BONDS												
17. Exempt obligations												
18.1 NAIC Designation Category 1.A												
18.2 NAIC Designation Category 1.B												
18.3 NAIC Designation Category 1.C												
18.4 NAIC Designation Category 1.D												
18.5 NAIC Designation Category 1.E												
18.6 NAIC Designation Category 1.F												
18.7 NAIC Designation Category 1.G												
18.8 Subtotal NAIC 1 (18.1+18.2+18.3+18.4+18.5+18.6+18.7)												
19.1 NAIC Designation Category 2.A												
19.2 NAIC Designation Category 2.B												
19.3 NAIC Designation Category 2.C												
19.4 Subtotal NAIC 2 (19.1+19.2+19.3)												
20.1 NAIC Designation Category 3.A												
20.2 NAIC Designation Category 3.B												
20.3 NAIC Designation Category 3.C												
20.4 Subtotal NAIC 3 (20.1+20.2+20.3)												
21.1 NAIC Designation Category 4.A												
21.2 NAIC Designation Category 4.B												
21.3 NAIC Designation Category 4.C												
21.4 Subtotal NAIC 4 (21.1+21.2+21.3)												
22.1 NAIC Designation Category 5.A												
22.2 NAIC Designation Category 5.B												
22.3 NAIC Designation Category 5.C												
22.4 Subtotal NAIC 5 (22.1+22.2+22.3)												
23. NAIC 6												
24. Total short-term bonds (17+18.8+19.4+20.4+21.4+22.4+23)												
DERIVATIVE INSTRUMENTS												
25. Exchange traded												
26. Highest quality												
27. High quality												
28. Medium quality												
29. Low quality												
30. Lower quality												
31. In or near default												
32. Total derivative instruments												
33. Total (Lines 8+16+24+32)												

NONE

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company

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.												
35.												
36.												
37.												
38.												
39.												
40.												
41.												
42.												
43.												
44.												
45.												
46.												
Overdue, Not in Process:												
47.												
48.												
49.												
50.												
51.												
In Process of Foreclosure:												
52.												
53.												
54.												
55.												
56.												
57.												
COMMON STOCK												
58.												
59.												
60.												
61.												
Affiliated Investment Subsidiary:												
62.												
63.												
64.												
65.												
66.												
67.												
68.												
69.												
70.												
71.												
72.												
73.												
74.												

NONE

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company

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)											
76.	Investment properties											
77.	Properties acquired in satisfaction of debt.....											
78.	Total real estate (Sum of Lines 75 through 77)											
OTHER INVESTED ASSETS												
INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF BONDS												
79.	Exempt obligations											
80.	Highest quality											
81.	High quality											
82.	Medium quality											
83.	Low quality											
84.	Lower quality											
85.	In or near default											
86.	Total with bond characteristics (Sum of Lines 79 through 85)											
INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF PREFERRED STOCKS												
87.	Highest quality											
88.	High quality.....											
89.	Medium quality											
90.	Low quality											
91.	Lower quality											
92.	In or near default											
93.	Affiliated life with AVR											
94.	Total with preferred stock characteristics (Sum of Lines 87 through 93)											

NONE

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company

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
INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF MORTGAGE LOANS												
In Good Standing Affiliated:												
95. Mortgages - CM1 - highest quality												
96. Mortgages - CM2 - high quality												
97. Mortgages - CM3 - medium quality												
98. Mortgages - CM4 - low medium quality												
99. Mortgages - CM5 - low quality												
100. Residential mortgages - insured or guaranteed												
101. Residential mortgages - all other												
102. Commercial mortgages - insured or guaranteed												
Overdue, Not in Process Affiliated:												
103. Farm mortgages												
104. Residential mortgages - insured or guaranteed												
105. Residential mortgages - all other												
106. Commercial mortgages - insured or guaranteed												
107. Commercial mortgages - all other												
In Process of Foreclosure Affiliated:												
108. Farm mortgages												
109. Residential mortgages - insured or guaranteed												
110. Residential mortgages - all other												
111. Commercial mortgages - insured or guaranteed												
112. Commercial mortgages - all other												
113. Total affiliated (Sum of Lines 95 through 112).....												
114. Unaffiliated - in good standing with covenants												
115. Unaffiliated - in good standing defeased with government securities												
116. Unaffiliated - in good standing primarily senior												
117. Unaffiliated - in good standing all other												
118. Unaffiliated - overdue, not in process												
119. Unaffiliated - in process of foreclosure												
120. Total unaffiliated (Sum of Lines 114 through 119)												
121. Total with mortgage loan characteristics (Lines 113 + 120)												
INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF COMMON STOCK												
122. Unaffiliated public												
123. Unaffiliated private												
124. Affiliated life with AVR.....												
125. Affiliated certain other (See SVO Purposes & Procedures Manual)												
126. Affiliated other - all other												
127. Total with common stock characteristics (Sum of Lines 122 through 126)												

NONE

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company

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
INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF REAL ESTATE												
128.												
129.												
130.												
131.												
INVESTMENTS IN TAX CREDIT STRUCTURES												
132.												
133.												
134.												
135.												
136.												
RESIDUAL TRanches OR INTERESTS												
137.												
138.												
139.												
140.												
141.												
142.												
143.												
144.												
145.												
146.												
147.												
148.												
149.												
SURPLUS NOTES AND CAPITAL NOTES												
150.												
151.												
152.												
153.												
154.												
155.												
156.												
ALL OTHER INVESTMENTS												
157.												
158.												
159.												
160.												
161.												
162.												
163.												
164.	XXX	XXX	XXX	XXX			XXX	XXX	XXX	XXX		
165.	XXX	XXX	XXX	XXX			XXX	XXX	XXX	XXX		

NONE

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company

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

Allocated by States and Territories

		Direct Business Only					6 Totals
		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	
States, Etc.							
1. Alabama	AL	34,945	1,945				36,890
2. Alaska	AK	160	80				240
3. Arizona	AZ	13,657	780				14,437
4. Arkansas	AR	36,725	80				36,805
5. California	CA	16,848	104				16,952
6. Colorado	CO	29,000	540				29,540
7. Connecticut	CT	652	800				1,452
8. Delaware	DE	840	9				849
9. District of Columbia	DC	1,250					1,250
10. Florida	FL	168,522	2,428				170,950
11. Georgia	GA	72,224	975				73,199
12. Hawaii	HI	601					601
13. Idaho	ID	2,651					2,651
14. Illinois	IL	954,922	40,527				995,449
15. Indiana	IN	130,529	21,582				152,111
16. Iowa	IA	162,080	21,510				183,590
17. Kansas	KS	328,190	2,535				330,725
18. Kentucky	KY	40,669	1,135				41,804
19. Louisiana	LA	161,905	740				162,645
20. Maine	ME	69					69
21. Maryland	MD	7,640	1,040				8,680
22. Massachusetts	MA	7,246	160				7,406
23. Michigan	MI	104,546	297				104,843
24. Minnesota	MN	3,286					3,286
25. Mississippi	MS	103,534	704				104,238
26. Missouri	MO	181,776	5,806				187,582
27. Montana	MT	23,829	80				23,909
28. Nebraska	NE	44,856	2,075				46,931
29. Nevada	NV	3,526					3,526
30. New Hampshire	NH	348					348
31. New Jersey	NJ	2,456	81				2,537
32. New Mexico	NM	16,269	869				17,138
33. New York	NY	7,071	186				7,257
34. North Carolina	NC	111,421	1,072				112,493
35. North Dakota	ND	1,307					1,307
36. Ohio	OH	1,686,503	11,285				1,697,788
37. Oklahoma	OK	111,800	2,094				113,894
38. Oregon	OR	1,115					1,115
39. Pennsylvania	PA	134,966	11,007				145,973
40. Rhode Island	RI	661					661
41. South Carolina	SC	110,553	120				110,673
42. South Dakota	SD	662	80				742
43. Tennessee	TN	79,654	188				79,842
44. Texas	TX	370,994	7,411				378,405
45. Utah	UT	5,637	320				5,957
46. Vermont	VT	100					100
47. Virginia	VA	63,189	1,753				64,942
48. Washington	WA	7,051					7,051
49. West Virginia	WV	225,774	470				226,244
50. Wisconsin	WI	17,366	840				18,206
51. Wyoming	WY	2,446	80				2,526
52. American Samoa	AS						
53. Guam	GU						
54. Puerto Rico	PR						
55. U.S. Virgin Islands	VI						
56. Northern Mariana Islands	MP						
57. Canada	CAN						
58. Aggregate other alien	OT						
59. Total		5,594,021	143,788				5,737,809

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company

SCHEDULE Y

PART 1A - DETAILS OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Location	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
			61-1129777				First Southern Bancorp, Inc.	.. KY.....	..UIP.....	Jesse T. Correll	Ownership.....	..63.310	Jesse T. Correll	...YES.....	
			61-1233349				First Southern Funding, LLC	.. KY.....	..NIA.....	Jesse T. Correll	Ownership.....	..81.840	Jesse T. Correll	...NO.....	
			61-1396135				First Southern Holdings, LLC	.. KY.....	..UIP.....	First Southern Bancorp, Inc.	Ownership.....	..99.000	Jesse T. Correll	...NO.....	
			33-4269345				First Southern National Bancshares, Inc.	.. KY.....	..NIA.....	First Southern Bancorp, Inc.	Ownership.....	..95.100	Jesse T. Correll	...NO.....	
			61-0290000	702612			First Southern National Bank	.. KY.....	..NIA.....	First Southern National Bancshares, Inc.	Ownership.....	..100.000	Jesse T. Correll	...YES.....	
			20-2907892		832480	OTC	UTG, Inc.	.. DE.....	..DS.....	First Southern Holdings, LLC	Ownership.....	..38.250	Jesse T. Correll	...NO.....	
		70130	31-0727974				Universal Guaranty Life Insurance Co.	.. OH.....	..RE.....	UTG, Inc.	Ownership.....	..100.000	Jesse T. Correll	...NO.....	
			76-0293391				Imperial Plan, Inc.	.. TX.....	..DS.....	Universal Guaranty Life Insurance Co.	Ownership.....	..100.000	Jesse T. Correll	...NO.....	
			46-2793973				BCG Land, LLC	.. KY.....	..DS.....	Universal Guaranty Life Insurance Co.	Ownership.....	..100.000	Jesse T. Correll	...NO.....	
			45-2035659				Collier Beach, LLC	.. SC.....	..DS.....	Universal Guaranty Life Insurance Co.	Ownership.....	..100.000	Jesse T. Correll	...NO.....	
			81-3717960				Consolidated Timberlands, LLC	.. GA.....	..DS.....	Universal Guaranty Life Insurance Co.	Ownership.....	..50.000	Jesse T. Correll	...NO.....	
			26-1700910				Cumberland Woodlands, LLC	.. KY.....	..DS.....	Universal Guaranty Life Insurance Co.	Ownership.....	..100.000	Jesse T. Correll	...NO.....	
			61-1697704				Red River Gorge Properties, LLC	.. KY.....	..DS.....	Cumberland Woodlands, LLC	Ownership.....	..100.000	Jesse T. Correll	...NO.....	
			46-5378135				Midland Superblock Partners, LLC	.. TX.....	..DS.....	Universal Guaranty Life Insurance Co.	Ownership.....	..74.120	Jesse T. Correll	...NO.....	
			83-2303037				Bluegrass Land & Minerals	.. KY.....	..DS.....	Universal Guaranty Life Insurance Co.	Ownership.....	..100.000	Jesse T. Correll	...NO.....	
			20-3705703				Stanford Wilderness Road, LLC	.. KY.....	..DS.....	Universal Guaranty Life Insurance Co.	Ownership.....	..100.000	Jesse T. Correll	...NO.....	
			86-1183773				Universal Guaranty Flight Enterprises, LLC	.. KY.....	..DS.....	Universal Guaranty Life Insurance Co.	Ownership.....	..100.000	Jesse T. Correll	...NO.....	
			84-1770616				Esther's Wellhouse, LLC	.. KY.....	..DS.....	Stanford Wilderness Road, LLC	Ownership.....	..100.000	Jesse T. Correll	...NO.....	
			84-1770616				The Inn at Wilderness Road, LLC	.. KY.....	..DS.....	Stanford Wilderness Road, LLC	Ownership.....	..100.000	Jesse T. Correll	...NO.....	
			81-3717960				Bella Terra, LLC	.. AL.....	..DS.....	Universal Guaranty Life Insurance Co.	Ownership.....	..50.000	Jesse T. Correll	...NO.....	
			45-4192747				Bluebird, Ltd Co	.. KY.....	..DS.....	Stanford Wilderness Road, LLC	Ownership.....	..100.000	Jesse T. Correll	...NO.....	
			83-1669198				Cerulean at the Bluebird, LLC	.. KY.....	..DS.....	Stanford Wilderness Road, LLC	Ownership.....	..100.000	Jesse T. Correll	...NO.....	
			83-1652834				Mama Devechio's Pizzeria, LLC	.. KY.....	..DS.....	Stanford Wilderness Road, LLC	Ownership.....	..100.000	Jesse T. Correll	...NO.....	
			61-1190262				The River Foundation	.. KY.....	..OTH.....	Jesse T. Correll	Board of Directors.....		Jesse T. Correll	...NO.....	1
			33-2003378				Franklin Forest, LLC	.. TN.....	..DS.....	Universal Guaranty Life Insurance Co.	Ownership.....	..100.000	Jesse T. Correll	...NO.....	

Asterisk	Explanation
1	The River Foundation is a non-profit charitable entity.

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company

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)
	20-3705703	Stanford Wilderness Road, LLC		1,000,000							1,000,000	
	61-0290000	First Southern National Bank					18,726				18,726	
	20-2907892	UTG, Inc					8,025,341				8,025,341	
	46-2793973	BCG Land, LLC		(60,000)							(60,000)	
70130	31-0727974	Universal Guaranty Life Insurance Company										
			.907,931	(940,000)			(8,044,067)				(8,076,136)	
	46-5378135	Midland Superblock Partners, LLC	(277,931)								(277,931)	
	26-1700910	Cumberland Woodlands, LLC	(630,000)								(630,000)	
9999999	Control Totals								XXX			

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company

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)
Universal Guaranty Life Insurance Company	First Southern Holdings, LLC	38.250	..... NO.....	Jesse T. Correll	Universal Guaranty Life Insurance Company	69.270	..... NO.....
Universal Guaranty Life Insurance Company	First Southern Funding, LLC	15.500	..... NO.....	Jesse T. Correll	Universal Guaranty Life Insurance Company	69.270	..... NO.....

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

REQUIRED FILINGS

The following supplemental reports are required to be filed as part of your annual 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?	WAIVED
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?	NO
12. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?	NO
13. Will the Actuarial Opinion on Participating and Non-participating Policies as required in Interrogatories 1 and 2 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1?	YES
14. Will the Actuarial Opinion on Non-guaranteed Elements as required in interrogatory #3 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1?	YES
15. Will the Actuarial Opinion on X-Factors be filed with the state of domicile and electronically with the NAIC by March 1?	NO
16. Will the Actuarial Opinion on Separate Accounts Funding Guaranteed Minimum Benefit be filed with the state of domicile and electronically with the NAIC by March 1?	NO
17. Will the Actuarial Opinion on Synthetic Guaranteed Investment Contracts be filed with the state of domicile and electronically with the NAIC by March 1?	NO
18. Will the Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1?	NO
19. Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1?	NO
20. Will the Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI be filed with the state of domicile and electronically with the NAIC by March 1?	NO
21. Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Average Market Value) be filed with the state of domicile and electronically with the NAIC by March 1?	NO
22. Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value) be filed with the state of domicile and electronically with the NAIC by March 1?	NO
23. Will the C-3 RBC Certifications required under C-3 Phase I be filed with the state of domicile and electronically with the NAIC by March 1?	NO
24. Will the C-3 RBC Certifications required under C-3 Phase II be filed with the state of domicile and electronically with the NAIC by March 1?	NO
25. Will the Actuarial Certifications Related to Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities be filed with the state of domicile and electronically with the NAIC by March 1?	NO

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
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? NO
- 36. Will the Market Conduct Annual Statement (MCAS) Premium Exhibit for Year be filed with appropriate jurisdictions and with the NAIC by March 1? YES

APRIL FILING

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


AUGUST FILING

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























Explanations:

- 10. The data for this supplement is not required to be filed.
- 11. The data for this supplement is not required to be filed.
- 12. The data for this supplement is not required to be filed.
- 15. 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.
- 19. 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.
- 23. The data for this supplement is not required to be filed.
- 24. 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.
- 35. The data for this supplement is not required to be filed.
- 38. 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.
- 43. The data for this supplement is not required to be filed.
- 44. The data for this supplement is not required to be filed.
- 45. The data for this supplement is not required to be filed.
- 46. The data for this supplement is not required to be filed.
- 47. The data for this supplement is not required to be filed.

Bar Codes:

- 3. Risk-based Capital Report [Document Identifier 390] 
- 10. SIS Stockholder Information Supplement [Document Identifier 420] 
- 11. Medicare Supplement Insurance Experience Exhibit [Document Identifier 360] 
- 12. Trusteed Surplus Statement [Document Identifier 490] 
- 15. Actuarial Opinion on X-Factors [Document Identifier 442] 
- 16. Actuarial Opinion on Separate Accounts Funding Guaranteed Minimum Benefit [Document Identifier 443] 
- 17. Actuarial Opinion on Synthetic Guaranteed Investment Contracts [Document Identifier 444] 
- 18. Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV [Document Identifier 445] 
- 19. Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXV [Document Identifier 446] 

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

20.	Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI [Document Identifier 447]	 7 0 1 3 0 2 0 2 5 4 4 7 0 0 0 0 0
21.	Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI [Document Identifier 448]	 7 0 1 3 0 2 0 2 5 4 4 8 0 0 0 0 0
22.	Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value) [Document Identifier 449]	 7 0 1 3 0 2 0 2 5 4 4 9 0 0 0 0 0
23.	C-3 RBC Certifications Required Under C-3 Phase I [Document Identifier 450]	 7 0 1 3 0 2 0 2 5 4 5 0 0 0 0 0 0
24.	C-3 RBC Certifications Required Under C-3 Phase II [Document Identifier 451]	 7 0 1 3 0 2 0 2 5 4 5 1 0 0 0 0 0
25.	Actuarial Certifications Related to Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities [Document Identifier 452]	 7 0 1 3 0 2 0 2 5 4 5 2 0 0 0 0 0
26.	Modified Guaranteed Annuity Model Regulation [Document Identifier 453]	 7 0 1 3 0 2 0 2 5 4 5 3 0 0 0 0 0
27.	Actuarial Certification regarding the use of 2001 Preferred Class Tables required by the Model Regulation Permitting the Recognition of Preferred Mortality Tables for Use in Determining Minimum Reserve Liabilities [Document Identifier 454]	 7 0 1 3 0 2 0 2 5 4 5 4 0 0 0 0 0
28.	Workers' Compensation Carve-Out Supplement [Document Identifier 495]	 7 0 1 3 0 2 0 2 5 4 9 5 0 0 0 0 0
30.	Medicare Part D Coverage Supplement [Document Identifier 365]	 7 0 1 3 0 2 0 2 5 3 6 5 0 0 0 0 0
31.	Relief from the five-year rotation requirement for lead audit partner [Document Identifier 224]	 7 0 1 3 0 2 0 2 5 2 2 4 0 0 0 0 0
32.	Relief from the one-year cooling off period for independent CPA [Document Identifier 225]	 7 0 1 3 0 2 0 2 5 2 2 5 0 0 0 0 0
33.	Relief from the Requirements for Audit Committees [Document Identifier 226]	 7 0 1 3 0 2 0 2 5 2 2 6 0 0 0 0 0
35.	Health Care Receivables Supplement [Document Identifier 475]	 7 0 1 3 0 2 0 2 5 4 7 5 0 0 0 0 0
38.	Long-Term Care Experience Reporting Forms [Document Identifier 306]	 7 0 1 3 0 2 0 2 5 3 0 6 0 0 0 0 0
39.	Credit Insurance Experience Exhibit [Document Identifier 230]	 7 0 1 3 0 2 0 2 5 2 3 0 0 0 0 0 0
41.	Supplemental Health Care Exhibit (Parts 1 and 2) [Document Identifier 216]	 7 0 1 3 0 2 0 2 5 2 1 6 0 0 0 0 0
43.	Supplemental Term and Universal Life Insurance Reinsurance Exhibit [Document Identifier 345]	 7 0 1 3 0 2 0 2 5 3 4 5 0 0 0 0 0
44.	Variable Annuities Supplement [Document Identifier 286]	 7 0 1 3 0 2 0 2 5 2 8 6 0 0 0 0 0
45.	Executive Summary of the PBR Actuarial Report [Document Identifier 457]	 7 0 1 3 0 2 0 2 5 4 5 7 0 0 0 0 0
46.	Life Summary of the PBR Actuarial Report [Document Identifier 458]	 7 0 1 3 0 2 0 2 5 4 5 8 0 0 0 0 0
47.	Variable Annuities Summary of the PBR Actuarial Report [Document Identifier 459]	 7 0 1 3 0 2 0 2 5 4 5 9 0 0 0 0 0

OVERFLOW PAGE FOR WRITE-INS

NONE

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 Universal Guaranty 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 []



SUPPLEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company

SCHEDULE O SUPPLEMENT

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

Of The Universal Guaranty Life Insurance Company ADDRESS (City, State and Zip Code) Columbus, OH 43215-4260 NAIC Group Code 0000 NAIC Company Code 70130 Employer's Identification Number (FEIN) 31-0727974

SUPPLEMENTAL SCHEDULE O - PART 1

Development of Incurred Losses (\$000 Omitted)

Section A - Group Accident and Health

Table with 5 columns: Years in Which Losses Were Incurred, 1 2021, 2 2022, 3 2023, 4 2024, 5 2025(a). Rows 1-6 showing cumulative net amounts paid policyholders.

Section B - Other Accident and Health

Table with 5 columns: Years in Which Losses Were Incurred, 1 2021, 2 2022, 3 2023, 4 2024, 5 2025(a). Rows 1-6 showing cumulative net amounts paid policyholders.

Section C - Credit Accident and Health

Table with 5 columns: Years in Which Losses Were Incurred, 1 2021, 2 2022, 3 2023, 4 2024, 5 2025(a). Rows 1-6 showing cumulative net amounts paid policyholders. Large 'NONE' watermark across the table.

Section D -

Table with 5 columns: Years in Which Losses Were Incurred, 1 2021, 2 2022, 3 2023, 4 2024, 5 2025(a). Rows 1-6 showing cumulative net amounts paid policyholders. Large 'NONE' watermark across the table.

Section E -

Table with 5 columns: Years in Which Losses Were Incurred, 1 2021, 2 2022, 3 2023, 4 2024, 5 2025(a). Rows 1-6 showing cumulative net amounts paid policyholders. Large 'NONE' watermark across the table.

Section F -

Table with 5 columns: Years in Which Losses Were Incurred, 1 2021, 2 2022, 3 2023, 4 2024, 5 2025(a). Rows 1-6 showing cumulative net amounts paid policyholders. Large 'NONE' watermark across the table.

Section G -

Table with 5 columns: Years in Which Losses Were Incurred, 1 2021, 2 2022, 3 2023, 4 2024, 5 2025(a). Rows 1-6 showing cumulative net amounts paid policyholders. Large 'NONE' watermark across the table.

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

SUPPLEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
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					
4. 2023					
5. 2024					
6. 2025					

Section B - Other Accident and Health

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

Section C - Credit Accident and Health

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

Section D -

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

Section E -

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

Section F -

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

Section G -

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

SUPPLEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
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	4 2024	5 2025
1. 2021	NONE				
2. 2022	XXX			XXX	XXX
3. 2023	XXX	XXX			XXX
4. 2024	XXX	XXX	XXX		
5. 2025	XXX	XXX	XXX	XXX	

Section B - Other Accident and Health

1. 2021	40			XXX	XXX
2. 2022	XXX	39			XXX
3. 2023	XXX	XXX			
4. 2024	XXX	XXX	XXX		
5. 2025	XXX	XXX	XXX	XXX	

Section C - Credit Accident and Health

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

Section D -

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

Section E -

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

Section F -

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

Section G -

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

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	NONE				
2. 2022					
3. 2023					
4. 2024					
5. 2025					

Section B - Other Accident and Health

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

Section C - Other Accident and Health

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

Section D -

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

Section E -

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

Section F -

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

Section G -

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

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	Other	
2. Ordinary Life	Other	2,907
3. Individual Annuity	Other	80
4. Supplementary Contracts		
5. Credit Life		
6. Group Life	Other	25
7. Group Annuities		
8. Group Accident and Health	Standard Valuation	40
9. Credit Accident and Health		
10. Other Accident and Health	Standard Valuation	25
11. Total		3,077



SUPPLEMENT FOR THE YEAR 2025 OF THE Universal Guaranty 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 0000

NAIC Company Code 70130

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



SUPPLEMENT FOR THE YEAR 2025 OF THE Universal Guaranty 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 0000

NAIC Company Code 70130

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



SUPPLEMENT FOR THE YEAR 2025 OF THE Universal Guaranty 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 0000

NAIC Company Code 70130

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



SUPPLEMENT FOR THE YEAR 2025 OF THE Universal Guaranty 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 0000

NAIC Company Code 70130

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



SUPPLEMENT FOR THE YEAR 2025 OF THE Universal Guaranty 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 0000

NAIC Company Code 70130

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



SUPPLEMENT FOR THE YEAR 2025 OF THE Universal Guaranty 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 0000

NAIC Company Code 70130

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



SUPPLEMENT FOR THE YEAR 2025 OF THE Universal Guaranty 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 0000

NAIC Company Code 70130

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



SUPPLEMENT FOR THE YEAR 2025 OF THE Universal Guaranty Life Insurance Company
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 (To Be Filed by March 1)

FOR THE STATE OF: Michigan

NAIC Group Code 0000

NAIC Company Code 70130

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



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

FOR THE STATE OF: Mississippi

NAIC Group Code 0000

NAIC Company Code 70130

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



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FOR THE STATE OF: Missouri

NAIC Group Code 0000

NAIC Company Code 70130

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



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For The Year Ended December 31, 2025
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FOR THE STATE OF: North Carolina

NAIC Group Code 0000

NAIC Company Code 70130

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



SUPPLEMENT FOR THE YEAR 2025 OF THE Universal Guaranty 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 0000

NAIC Company Code 70130

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



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MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
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FOR THE STATE OF: Oklahoma

NAIC Group Code 0000

NAIC Company Code 70130

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



SUPPLEMENT FOR THE YEAR 2025 OF THE Universal Guaranty 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 0000

NAIC Company Code 70130

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



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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 0000

NAIC Company Code 70130

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



SUPPLEMENT FOR THE YEAR 2025 OF THE Universal Guaranty 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 0000

NAIC Company Code 70130

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



SUPPLEMENT FOR THE YEAR 2025 OF THE Universal Guaranty 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 0000

NAIC Company Code 70130

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



SUPPLEMENT FOR THE YEAR 2025 OF THE Universal Guaranty 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 0000

NAIC Company Code 70130

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



SUPPLEMENT FOR THE YEAR 2025 OF THE Universal Guaranty 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 0000

NAIC Company Code 70130

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