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

ANNUITY INVESTORS LIFE INSURANCE COMPANY

NAIC Group Code 0435 (Current) 0435 (Prior) NAIC Company Code 93661 Employer's ID Number 31-1021738

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 11/13/1981 Commenced Business 12/21/1981

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

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

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

Mail Address Post Office Box 5423 (Street and Number or P.O. Box), Cincinnati, OH, US 45201 (City or Town, State, Country and Zip Code)

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

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

Internet Website Address www.massmutualascend.com

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

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

OFFICERS

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

OTHER

Donna Marie Carrelli	Michael Harrison Haney	

DIRECTORS OR TRUSTEES

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

State of Ohio
County of Hamilton SS

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

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

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

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

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

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Alabama DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	Claims and Benefits Paid: 8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole							0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	26,630						0	31,128	0	146,717		177,845
21. Indexed	193,226						0	10,998	0	377,228		388,226
22. Variable with guarantees	9,880						0	0	0	103,797		103,797
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	8,494	0	0		8,494
25. Other							0					0
26. Total individual annuities	229,736	0	0	0	0	0	0	50,620	0	627,742	0	678,362
Group Annuities												
27. Fixed	0						0	0	0	0		0
28. Indexed							0					0
29. Variable with guarantees	19,202						0	0	0	221,526		221,526
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other							0					0
33. Total group annuities	19,202	0	0	0	0	0	0	0	0	221,526	0	221,526
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	(f)						0	XXX	XXX	XXX		0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	(f)						0	XXX	XXX	XXX		0
44. Long-term care (d)	(f)						0	XXX	XXX	XXX		0
45. Other health (d)	(f)						0	XXX	XXX	XXX		0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	248,938 (c)	0	0	0	0	0	0	50,620	0	849,268	0	899,888

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

NAIC Group Code 0435 BUSINESS IN THE STATE OF Alabama DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole								0	0						
3. Term								0	0						
4. Indexed								0	0						
5. Universal								0	0						
6. Universal with secondary guarantees								0	0						
7. Variable								0	0						
8. Variable universal								0	0						
9. Credit								0	0						
10. Other								0	0						
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life															
12. Whole								0	0						
13. Term								0	0						
14. Universal								0	0						
15. Variable								0	0						
16. Variable universal								0	0						
17. Credit								0	0						(a)
18. Other								0	0						
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities															
20. Fixed	11,515	2	11,474	0	0	0	0	2	11,474	2,095	0	0	(10)	(339,355)	179	1,684,309
21. Indexed	10,998	2	10,998	0	0	0	0	2	10,998	0	0	0	(25)	44,466	369	4,407,126
22. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	1	317,552	27	1,226,932
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0	0	0	0	0	0	0	0	0	0	0	(3,634)	1	104,023
25. Other								0	0		0	0	(1)	(18,079)	2	42,468
26. Total individual annuities	22,513	4	22,472	0	0	0	0	4	22,472	2,095	0	0	(35)	950	578	7,464,858
Group Annuities															
27. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
28. Indexed								0	0		0	0	0	0	0	0
29. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	(4)	(130,683)	33	842,328
30. Variable without guarantees								0	0							
31. Life contingent payout								0	0							
32. Other								0	0							
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0	(4)	(130,683)	33	842,328
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	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	22,513	4	22,472	0	0	0	0	4	22,472	2,095	0	0	(39)	(129,733)	611	8,307,186

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

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

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

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

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

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ ..... ; 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 $ .....

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Alaska DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	Claims and Benefits Paid: 8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole							0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	2,200						0	9,348	0	0		9,348
21. Indexed	650						0	149,962	0	134,035		283,997
22. Variable with guarantees	0						0	0	0	60		60
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	0	0	0		0
25. Other							0					0
26. Total individual annuities	2,850	0	0	0	0	0	0	159,310	0	134,095	0	293,405
Group Annuities												
27. Fixed	0						0	0	0	0		0
28. Indexed							0					0
29. Variable with guarantees	0						0	0	0	0		0
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other							0					0
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	(f)						0	XXX	XXX	XXX		0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	(f)						0	XXX	XXX	XXX		0
44. Long-term care (d)	(f)						0	XXX	XXX	XXX		0
45. Other health (d)	(f)						0	XXX	XXX	XXX		0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	2,850 (c)	0	0	0	0	0	0	159,310	0	134,095	0	293,405

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

NAIC Group Code 0435 BUSINESS IN THE STATE OF Alaska DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year								22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life																
1. Industrial								0	0							
2. Whole								0	0							
3. Term								0	0							
4. Indexed								0	0							
5. Universal								0	0							
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life																
12. Whole								0	0							
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities																
20. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	(1)	8,400	22	380,428
21. Indexed	149,962	1	149,962	0	0	0	0	1	149,962	0	0	0	(5)	(372,619)	17	221,186
22. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	0	3,285	2	29,999
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
25. Other								0	0		0	0	0	0	0	0
26. Total individual annuities	149,962	1	149,962	0	0	0	0	1	149,962	0	0	0	(6)	(360,934)	41	631,613
Group Annuities																
27. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
28. Indexed								0	0		0	0	0	0	0	0
29. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
30. Variable without guarantees								0	0							
31. Life contingent payout								0	0							
32. Other								0	0							
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health																
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
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	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	149,962	1	149,962	0	0	0	0	1	149,962	0	0	0	(6)	(360,934)	41	631,613

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

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

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

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

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

(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 $ .....

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Arizona DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	Claims and Benefits Paid: 8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole							0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	92,508						0	217,688	0	1,600,762		1,818,450
21. Indexed	113,960						0	9,725	0	1,290,740		1,300,465
22. Variable with guarantees	61,967						0	23,229	0	2,428,389		2,451,618
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	46,362	0	0		46,362
25. Other							0					0
26. Total individual annuities	268,435	0	0	0	0	0	0	297,004	0	5,319,891	0	5,616,895
Group Annuities												
27. Fixed	605						0	0	0	27,416		27,416
28. Indexed							0					0
29. Variable with guarantees	700						0	543	0	187,356		187,899
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other							0					0
33. Total group annuities	1,305	0	0	0	0	0	0	543	0	214,772	0	215,315
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	(f)						0	XXX	XXX	XXX		0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	(f)						0	XXX	XXX	XXX		0
44. Long-term care (d)	(f)						0	XXX	XXX	XXX		0
45. Other health (d)	(f)						0	XXX	XXX	XXX		0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	269,740 (c)	0	0	0	0	0	0	297,547	0	5,534,663	0	5,832,210

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

NAIC Group Code 0435 BUSINESS IN THE STATE OF Arizona DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole								0	0						
3. Term								0	0						
4. Indexed								0	0						
5. Universal								0	0						
6. Universal with secondary guarantees								0	0						
7. Variable								0	0						
8. Variable universal								0	0						
9. Credit								0	0						
10. Other								0	0						
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life															
12. Whole								0	0						
13. Term								0	0						
14. Universal								0	0						
15. Variable								0	0						
16. Variable universal								0	0						
17. Credit								0	0						(a)
18. Other								0	0						
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities															
20. Fixed	113,217	5	113,036	0	0	0	0	5	113,036	180	0	0	(42)	(1,204,537)	499	7,498,905
21. Indexed	269,524	2	59,637	0	0	0	0	2	59,637	223,657	0	0	(44)	(786,471)	381	7,561,098
22. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	(41)	(1,187,895)	289	8,264,052
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0	0	0	0	0	0	0	0	0	0	0	(28,638)	6	358,617
25. Other								0	0		2	18,190	(5)	(131,810)	11	122,410
26. Total individual annuities	382,741	7	172,673	0	0	0	0	7	172,673	223,837	2	18,190	(132)	(3,339,351)	1,186	23,805,082
Group Annuities															
27. Fixed	226	0	0	0	0	0	0	0	0	226	0	0	(5)	(16,709)	88	338,739
28. Indexed								0	0		0	0	0	0	0	0
29. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	(4)	(41,955)	156	1,503,808
30. Variable without guarantees								0	0							
31. Life contingent payout								0	0							
32. Other								0	0							
33. Total group annuities	226	0	0	0	0	0	0	0	0	226	0	0	(9)	(58,664)	244	1,842,547
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	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	382,967	7	172,673	0	0	0	0	7	172,673	224,063	2	18,190	(141)	(3,398,015)	1,430	25,647,629

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

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

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

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

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

(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 $ .....

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Arkansas DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	Claims and Benefits Paid: 8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole							0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	0						0	6,563	0	40,819		47,382
21. Indexed	53,954						0	0	0	510,918		510,918
22. Variable with guarantees	84						0	0	0	19,681		19,681
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	0	0	0		0
25. Other							0					0
26. Total individual annuities	54,038	0	0	0	0	0	0	6,563	0	571,418	0	577,981
Group Annuities												
27. Fixed	0						0	0	0	0		0
28. Indexed							0					0
29. Variable with guarantees	0						0	0	0	30		30
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other							0					0
33. Total group annuities	0	0	0	0	0	0	0	0	0	30	0	30
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	(f)						0	XXX	XXX	XXX		0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	(f)						0	XXX	XXX	XXX		0
44. Long-term care (d)	(f)						0	XXX	XXX	XXX		0
45. Other health (d)	(f)						0	XXX	XXX	XXX		0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	54,038 (c)	0	0	0	0	0	0	6,563	0	571,448	0	578,011

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

NAIC Group Code 0435 BUSINESS IN THE STATE OF Arkansas DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year								22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life																
1. Industrial								0	0							
2. Whole								0	0							
3. Term								0	0							
4. Indexed								0	0							
5. Universal								0	0							
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life																
12. Whole								0	0							
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities																
20. Fixed	(58)	1	12,758	0	0	0	0	1	12,758	0	0	0	(1)	11,514	29	245,739
21. Indexed	0	0	0	0	0	0	0	0	0	0	0	0	(20)	(429,109)	166	2,846,036
22. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	1	32,655	8	165,135
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
25. Other								0	0		0	0	0	(6,229)	2	5,532
26. Total individual annuities	(58)	1	12,758	0	0	0	0	1	12,758	0	0	0	(20)	(391,169)	205	3,262,442
Group Annuities																
27. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	0	180	3	11,742
28. Indexed								0	0		0	0	0	0	0	0
29. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	0	385	1	12,663
30. Variable without guarantees								0	0							
31. Life contingent payout								0	0							
32. Other								0	0							
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0	0	565	4	24,405
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	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	(58)	1	12,758	0	0	0	0	1	12,758	0	0	0	(20)	(390,604)	209	3,286,847

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

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

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

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

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

(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 $ .....

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF California DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	Claims and Benefits Paid: 8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole							0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	3,629,327						0	1,769,159	0	20,779,703		22,548,862
21. Indexed	2,649,733						0	424,929	0	18,494,509		18,919,438
22. Variable with guarantees	816,507						0	900,928	0	12,558,328		13,459,256
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	270,273	0	0		270,273
25. Other							0					0
26. Total individual annuities	7,095,567	0	0	0	0	0	0	3,365,289	0	51,832,540	0	55,197,829
Group Annuities												
27. Fixed	10,550						0	0	0	32,101		32,101
28. Indexed							0					0
29. Variable with guarantees	91,741						0	0	0	380,530		380,530
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other							0					0
33. Total group annuities	102,291	0	0	0	0	0	0	0	0	412,631	0	412,631
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	(f)						0	XXX	XXX	XXX		0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	(f)						0	XXX	XXX	XXX		0
44. Long-term care (d)	(f)						0	XXX	XXX	XXX		0
45. Other health (d)	(f)						0	XXX	XXX	XXX		0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	7,197,858 (c)	0	0	0	0	0	0	3,365,289	0	52,245,171	0	55,610,460

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

NAIC Group Code 0435 BUSINESS IN THE STATE OF California DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole								0	0						
3. Term								0	0						
4. Indexed								0	0						
5. Universal								0	0						
6. Universal with secondary guarantees								0	0						
7. Variable								0	0						
8. Variable universal								0	0						
9. Credit								0	0						
10. Other								0	0						
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life															
12. Whole								0	0						
13. Term								0	0						
14. Universal								0	0						
15. Variable								0	0						
16. Variable universal								0	0						
17. Credit								0	0						(a)
18. Other								0	0						
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities															
20. Fixed	632,029	27	738,071	0	0	0	0	27	738,071	652,513	0	0	(430)	(14,556,385)	5,190	151,396,751
21. Indexed	371,753	16	500,929	0	0	0	0	16	500,929	398,640	0	0	(327)	(13,226,370)	3,959	133,029,560
22. Variable with guarantees	60,002	2	60,002	0	0	0	0	2	60,002	0	0	0	(115)	(912,402)	1,221	90,994,800
23. Variable without guarantees								0	0							
24. Life contingent payout	42,696	4	42,696	0	0	0	0	4	42,696	0	5	317,113	(10)	(250,588)	49	1,766,807
25. Other								0	0		12	689,918	(18)	(923,178)	104	3,288,389
26. Total individual annuities	1,106,480	49	1,341,698	0	0	0	0	49	1,341,698	1,051,153	17	1,007,031	(900)	(29,868,923)	10,523	380,476,307
Group Annuities															
27. Fixed	88	1	6,220	0	0	0	0	1	6,220	0	0	0	(1)	(9,932)	33	548,766
28. Indexed								0	0		0	0	0	0	0	0
29. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	(8)	233,006	117	5,032,397
30. Variable without guarantees								0	0							
31. Life contingent payout								0	0							
32. Other								0	0							
33. Total group annuities	88	1	6,220	0	0	0	0	1	6,220	0	0	0	(9)	223,074	150	5,581,163
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	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	1,106,568	50	1,347,918	0	0	0	0	50	1,347,918	1,051,153	17	1,007,031	(909)	(29,645,849)	10,673	386,057,470

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

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

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

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

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

(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 $ .....

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Colorado DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	Claims and Benefits Paid: 8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole							0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	1,800						0	129,394	0	242,276		371,670
21. Indexed	59,578						0	12,184	0	478,440		490,624
22. Variable with guarantees	0						0	4,535	0	494,138		498,673
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	19,386	0	0		19,386
25. Other							0					0
26. Total individual annuities	61,378	0	0	0	0	0	0	165,499	0	1,214,854	0	1,380,353
Group Annuities												
27. Fixed	0						0	0	0	0		0
28. Indexed							0					0
29. Variable with guarantees	0						0	54,217	0	656,239		710,456
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other							0					0
33. Total group annuities	0	0	0	0	0	0	0	54,217	0	656,239	0	710,456
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	(f)						0	XXX	XXX	XXX		0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	(f)						0	XXX	XXX	XXX		0
44. Long-term care (d)	(f)						0	XXX	XXX	XXX		0
45. Other health (d)	(f)						0	XXX	XXX	XXX		0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	61,378 (c)	0	0	0	0	0	0	219,716	0	1,871,093	0	2,090,809

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

NAIC Group Code 0435 BUSINESS IN THE STATE OF Colorado DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole								0	0						
3. Term								0	0						
4. Indexed								0	0						
5. Universal								0	0						
6. Universal with secondary guarantees								0	0						
7. Variable								0	0						
8. Variable universal								0	0						
9. Credit								0	0						
10. Other								0	0						
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life															
12. Whole								0	0						
13. Term								0	0						
14. Universal								0	0						
15. Variable								0	0						
16. Variable universal								0	0						
17. Credit								0	0						(a)
18. Other								0	0						
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities															
20. Fixed	76,425	2	77,877	0	0	0	0	2	77,877	0	0	0	(14)	(170,392)	119	2,402,701
21. Indexed	11,907	2	12,184	0	0	0	0	2	12,184	0	0	0	(10)	(255,064)	177	3,815,807
22. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	(10)	(374,649)	58	2,128,616
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0	0	0	0	0	0	0	0	0	0	0	(5,503)	4	185,527
25. Other								0	0		0	0	(2)	(11,721)	2	17,646
26. Total individual annuities	88,332	4	90,061	0	0	0	0	4	90,061	0	0	0	(36)	(817,329)	360	8,550,297
Group Annuities															
27. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	(1)	902	5	66,848
28. Indexed								0	0		0	0	0	0	0	0
29. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	(19)	(115,485)	137	4,614,883
30. Variable without guarantees								0	0							
31. Life contingent payout								0	0							
32. Other								0	0							
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0	(20)	(114,583)	142	4,681,731
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	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	88,332	4	90,061	0	0	0	0	4	90,061	0	0	0	(56)	(931,912)	502	13,232,028

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

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

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

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

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

(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 $ .....

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Connecticut DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole							0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	271,096						0	38,051	0	1,974,500		2,012,551
21. Indexed	62,806						0	0	0	685,622		685,622
22. Variable with guarantees	239,331						0	302,508	0	2,596,352		2,898,860
23. Variable without guarantees							0					0
24. Life contingent payout	117,417						0	18,436	0	0		18,436
25. Other							0					0
26. Total individual annuities	690,650	0	0	0	0	0	0	358,995	0	5,256,474	0	5,615,469
Group Annuities												
27. Fixed	0						0	0	0	0		0
28. Indexed							0					0
29. Variable with guarantees	83,096						0	865	0	210,085		210,950
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other							0					0
33. Total group annuities	83,096	0	0	0	0	0	0	865	0	210,085	0	210,950
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	(f)						0	XXX	XXX	XXX		0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	(f)						0	XXX	XXX	XXX		0
44. Long-term care (d)	(f)						0	XXX	XXX	XXX		0
45. Other health (d)	(f)						0	XXX	XXX	XXX		0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	773,746 (c)	0	0	0	0	0	0	359,860	0	5,466,559	0	5,826,419

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

NAIC Group Code 0435 BUSINESS IN THE STATE OF Connecticut DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life																
1. Industrial								0	0							
2. Whole								0	0							
3. Term								0	0							
4. Indexed								0	0							
5. Universal								0	0							
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life																
12. Whole								0	0							
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities																
20. Fixed	2,181	1	2,180	0	0	0	0	1	2,180	0	0	0	(53)	(1,534,981)	368	8,716,426
21. Indexed	136,334	0	0	0	0	0	0	0	0	139,002	0	0	(9)	(731,207)	83	2,045,853
22. Variable with guarantees	201,220	1	201,220	0	0	0	0	1	201,220	0	0	0	(19)	(1,215,244)	176	14,969,411
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0	0	0	0	0	0	0	0	1	103,383	0	(2,430)	4	201,072
25. Other								0	0		0	0	(1)	(37,855)	3	182,689
26. Total individual annuities	339,735	2	203,400	0	0	0	0	2	203,400	139,002	1	103,383	(82)	(3,521,717)	634	26,115,451
Group Annuities																
27. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
28. Indexed								0	0		0	0	0	0	0	0
29. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	(3)	(58,095)	39	1,283,597
30. Variable without guarantees								0	0							
31. Life contingent payout								0	0							
32. Other								0	0							
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0	(3)	(58,095)	39	1,283,597
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	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	339,735	2	203,400	0	0	0	0	2	203,400	139,002	1	103,383	(85)	(3,579,812)	673	27,399,048

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

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

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

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

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

(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 $ .....

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Delaware DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	Claims and Benefits Paid: 8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole							0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	3,000						0	18,272	0	94,855		113,127
21. Indexed	1,200						0	0	0	105,132		105,132
22. Variable with guarantees	0						0	0	0	159,904		159,904
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	0	0	0		0
25. Other							0					0
26. Total individual annuities	4,200	0	0	0	0	0	0	18,272	0	359,891	0	378,163
Group Annuities												
27. Fixed	0						0	0	0	0		0
28. Indexed							0					0
29. Variable with guarantees	0						0	0	0	25		25
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other							0					0
33. Total group annuities	0	0	0	0	0	0	0	0	0	25	0	25
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	(f)						0	XXX	XXX	XXX		0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	(f)						0	XXX	XXX	XXX		0
44. Long-term care (d)	(f)						0	XXX	XXX	XXX		0
45. Other health (d)	(f)						0	XXX	XXX	XXX		0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	4,200 (c)	0	0	0	0	0	0	18,272	0	359,916	0	378,188

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

NAIC Group Code 0435 BUSINESS IN THE STATE OF Delaware DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year								22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life																
1. Industrial								0	0							
2. Whole								0	0							
3. Term								0	0							
4. Indexed								0	0							
5. Universal								0	0							
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life																
12. Whole								0	0							
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities																
20. Fixed	21,035	0	0	0	0	0	0	0	0	21,035	0	0	(2)	188,687	36	1,337,620
21. Indexed	9	1	443	0	0	0	0	1	443	0	0	0	(1)	(71,717)	20	1,049,951
22. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	(1)	100,386	46	2,116,693
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
25. Other								0	0		0	0	1	65,230	1	65,230
26. Total individual annuities	21,044	1	443	0	0	0	0	1	443	21,035	0	0	(3)	282,586	103	4,569,494
Group Annuities																
27. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	0	149	1	14,722
28. Indexed								0	0		0	0	0	0	0	0
29. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	0	400	1	2,605
30. Variable without guarantees								0	0							
31. Life contingent payout								0	0							
32. Other								0	0							
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0	0	549	2	17,327
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	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	21,044	1	443	0	0	0	0	1	443	21,035	0	0	(3)	283,135	105	4,586,821

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

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

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

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

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

(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 $ .....

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF District of Columbia DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	Claims and Benefits Paid: 8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole							0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	3,900						0	0	0	94,290		94,290
21. Indexed	200						0	0	0	17,137		17,137
22. Variable with guarantees	0						0	0	0	58,873		58,873
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	0	0	0		0
25. Other							0					0
26. Total individual annuities	4,100	0	0	0	0	0	0	0	0	170,300	0	170,300
Group Annuities												
27. Fixed	0						0	0	0	0		0
28. Indexed							0					0
29. Variable with guarantees	0						0	0	0	0		0
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other							0					0
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	(f)						0	XXX	XXX	XXX		0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	(f)						0	XXX	XXX	XXX		0
44. Long-term care (d)	(f)						0	XXX	XXX	XXX		0
45. Other health (d)	(f)						0	XXX	XXX	XXX		0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	4,100 (c)	0	0	0	0	0	0	0	0	170,300	0	170,300

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

NAIC Group Code 0435 BUSINESS IN THE STATE OF District of Columbia DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year								22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life																
1. Industrial								0	0							
2. Whole								0	0							
3. Term								0	0							
4. Indexed								0	0							
5. Universal								0	0							
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life																
12. Whole								0	0							
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities																
20. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	(2)	(94,610)	11	127,878
21. Indexed	0	0	0	0	0	0	0	0	0	0	0	0	(3)	(12,336)	41	457,868
22. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	(1)	(56,298)	1	78,354
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
25. Other								0	0		0	0	0	0	0	0
26. Total individual annuities	0	0	0	0	0	0	0	0	0	0	0	0	(6)	(163,244)	53	664,100
Group Annuities																
27. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
28. Indexed								0	0		0	0	0	0	0	0
29. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0
30. Variable without guarantees								0	0							
31. Life contingent payout								0	0							
32. Other								0	0							
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0
Accident and Health																
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
44. Long-term care (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
45. Other health (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
46. Total accident and health	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	0	0	0	0	0	0	0	0	0	0	0	0	(6)	(163,244)	55	664,100

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

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

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

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

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

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ ..... ; 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 $ .....

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Florida DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	Claims and Benefits Paid: 8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole							0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	932,455						0	678,980	0	7,296,447		7,975,427
21. Indexed	1,195,146						0	274,242	0	9,995,701		10,269,943
22. Variable with guarantees	1,530,055						0	57,958	0	8,348,798		8,406,756
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	59,433	0	0		59,433
25. Other							0					0
26. Total individual annuities	3,657,656	0	0	0	0	0	0	1,070,613	0	25,640,946	0	26,711,559
Group Annuities												
27. Fixed	0						0	0	0	7,129		7,129
28. Indexed							0					0
29. Variable with guarantees	45,300						0	34,689	0	447,706		482,395
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other							0					0
33. Total group annuities	45,300	0	0	0	0	0	0	34,689	0	454,835	0	489,524
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	(f)						0	XXX	XXX	XXX		0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	(f)						0	XXX	XXX	XXX		0
44. Long-term care (d)	(f)						0	XXX	XXX	XXX		0
45. Other health (d)	(f)						0	XXX	XXX	XXX		0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	3,702,956 (c)	0	0	0	0	0	0	1,105,302	0	26,095,781	0	27,201,083

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

NAIC Group Code 0435 BUSINESS IN THE STATE OF Florida DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole								0	0						
3. Term								0	0						
4. Indexed								0	0						
5. Universal								0	0						
6. Universal with secondary guarantees								0	0						
7. Variable								0	0						
8. Variable universal								0	0						
9. Credit								0	0						
10. Other								0	0						
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life															
12. Whole								0	0						
13. Term								0	0						
14. Universal								0	0						
15. Variable								0	0						
16. Variable universal								0	0						
17. Credit								0	0						(a)
18. Other								0	0						
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities															
20. Fixed	384,149	15	621,425	0	0	0	0	15	621,425	53,116	0	0	(276)	(5,908,865)	2,766	41,458,958
21. Indexed	171,612	19	421,951	0	0	0	0	19	421,951	47,188	0	0	(234)	(7,266,939)	2,131	49,256,611
22. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	(126)	325,267	1,274	60,336,327
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0	0	0	0	0	0	0	0	1	10,729	1	19,626	23	552,043
25. Other								0	0		2	160,931	(8)	(168,937)	13	462,123
26. Total individual annuities	555,761	34	1,043,376	0	0	0	0	34	1,043,376	100,304	3	171,660	(643)	(12,999,848)	6,207	152,066,062
Group Annuities															
27. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	0	1,277	4	105,222
28. Indexed								0	0		0	0	0	0	0	0
29. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	(9)	228,714	113	4,656,538
30. Variable without guarantees								0	0							
31. Life contingent payout								0	0							
32. Other								0	0							
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0	(9)	229,991	117	4,761,760
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	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	555,761	34	1,043,376	0	0	0	0	34	1,043,376	100,304	3	171,660	(652)	(12,769,857)	6,324	156,827,822

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

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

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

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

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

(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 $ .....

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Georgia DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	Claims and Benefits Paid: 8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole							0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	33,714						0	213,745	0	188,817		402,562
21. Indexed	178,819						0	63,931	0	1,119,338		1,183,269
22. Variable with guarantees	91,670						0	0	0	121,960		121,960
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	6,072	0	0		6,072
25. Other							0					0
26. Total individual annuities	304,203	0	0	0	0	0	0	283,748	0	1,430,115	0	1,713,863
Group Annuities												
27. Fixed	0						0	0	0	0		0
28. Indexed							0					0
29. Variable with guarantees	1,950						0	0	0	34,960		34,960
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other							0					0
33. Total group annuities	1,950	0	0	0	0	0	0	0	0	34,960	0	34,960
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	(f)						0	XXX	XXX	XXX		0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	(f)						0	XXX	XXX	XXX		0
44. Long-term care (d)	(f)						0	XXX	XXX	XXX		0
45. Other health (d)	(f)						0	XXX	XXX	XXX		0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	306,153 (c)	0	0	0	0	0	0	283,748	0	1,465,075	0	1,748,823

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

NAIC Group Code 0435 BUSINESS IN THE STATE OF Georgia DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole								0	0						
3. Term								0	0						
4. Indexed								0	0						
5. Universal								0	0						
6. Universal with secondary guarantees								0	0						
7. Variable								0	0						
8. Variable universal								0	0						
9. Credit								0	0						
10. Other								0	0						
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life															
12. Whole								0	0						
13. Term								0	0						
14. Universal								0	0						
15. Variable								0	0						
16. Variable universal								0	0						
17. Credit								0	0						(a)
18. Other								0	0						
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities															
20. Fixed	364	4	152,137	0	0	0	0	4	152,137	0	0	0	(8)	64,769	234	3,069,898
21. Indexed	24,473	3	17,381	0	0	0	0	3	17,381	7,092	0	0	(25)	(563,383)	432	9,052,131
22. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	(5)	83,845	66	1,520,457
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0	0	0	0	0	0	0	0	0	0	0	(2,929)	1	78,364
25. Other								0	0		0	0	1	(25,303)	3	118,544
26. Total individual annuities	24,837	7	169,518	0	0	0	0	7	169,518	7,092	0	0	(37)	(443,001)	736	13,839,394
Group Annuities															
27. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	0	1,793	6	61,538
28. Indexed								0	0		0	0	0	0	0	0
29. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	(2)	28,072	20	472,291
30. Variable without guarantees								0	0							
31. Life contingent payout								0	0							
32. Other								0	0							
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0	(2)	29,865	26	533,829
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	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	24,837	7	169,518	0	0	0	0	7	169,518	7,092	0	0	(39)	(413,136)	762	14,373,223

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

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

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

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

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

(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 $ .....

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Hawaii DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	Claims and Benefits Paid: 8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole							0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	77,703						0	455	0	804,210		804,665
21. Indexed	111,367						0	0	0	658,138		658,138
22. Variable with guarantees	439,116						0	0	0	1,264,938		1,264,938
23. Variable without guarantees							0					0
24. Life contingent payout	17,539						0	1,241	0	0		1,241
25. Other							0					0
26. Total individual annuities	645,725	0	0	0	0	0	0	1,696	0	2,727,286	0	2,728,982
Group Annuities												
27. Fixed	0						0	0	0	0		0
28. Indexed							0					0
29. Variable with guarantees	12,097						0	0	0	0		0
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other							0					0
33. Total group annuities	12,097	0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	(f)						0	XXX	XXX	XXX		0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	(f)						0	XXX	XXX	XXX		0
44. Long-term care (d)	(f)						0	XXX	XXX	XXX		0
45. Other health (d)	(f)						0	XXX	XXX	XXX		0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	657,822 (c)	0	0	0	0	0	0	1,696	0	2,727,286	0	2,728,982

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

NAIC Group Code 0435 BUSINESS IN THE STATE OF Hawaii DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year								22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life																
1. Industrial								0	0							
2. Whole								0	0							
3. Term								0	0							
4. Indexed								0	0							
5. Universal								0	0							
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life																
12. Whole								0	0							
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities																
20. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	(15)	(542,338)	140	5,892,451
21. Indexed	6,630	0	0	0	0	0	0	0	0	6,630	0	0	(16)	(301,241)	82	2,452,303
22. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	(14)	1,522,002	172	19,185,088
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0	0	0	0	0	0	0	0	1	16,101	0	0	1	16,101
25. Other								0	0		0	0	0	0	0	0
26. Total individual annuities	6,630	0	0	0	0	0	0	0	0	6,630	1	16,101	(45)	678,423	395	27,545,943
Group Annuities																
27. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
28. Indexed								0	0		0	0	0	0	0	0
29. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	0	21,883	1	104,066
30. Variable without guarantees								0	0							
31. Life contingent payout								0	0							
32. Other								0	0							
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0	0	21,883	1	104,066
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	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	6,630	0	0	0	0	0	0	0	0	6,630	1	16,101	(45)	700,306	396	27,650,009

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

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

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

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

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

(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 ANNUITY INVESTORS LIFE INSURANCE COMPANY

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Idaho DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	Claims and Benefits Paid: 8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole							0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	61,813						0	104,367	0	479,492		583,859
21. Indexed	46,055						0	0	0	300,037		300,037
22. Variable with guarantees	41,172						0	0	0	362,901		362,901
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	1,232	0	0		1,232
25. Other							0					0
26. Total individual annuities	149,040	0	0	0	0	0	0	105,599	0	1,142,430	0	1,248,029
Group Annuities												
27. Fixed	0						0	0	0	0		0
28. Indexed							0					0
29. Variable with guarantees	0						0	0	0	0		0
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other							0					0
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	(f)						0	XXX	XXX	XXX		0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	(f)						0	XXX	XXX	XXX		0
44. Long-term care (d)	(f)						0	XXX	XXX	XXX		0
45. Other health (d)	(f)						0	XXX	XXX	XXX		0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	149,040 (c)	0	0	0	0	0	0	105,599	0	1,142,430	0	1,248,029

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

NAIC Group Code 0435 BUSINESS IN THE STATE OF Idaho DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole								0	0						
3. Term								0	0						
4. Indexed								0	0						
5. Universal								0	0						
6. Universal with secondary guarantees								0	0						
7. Variable								0	0						
8. Variable universal								0	0						
9. Credit								0	0						
10. Other								0	0						
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life															
12. Whole								0	0						
13. Term								0	0						
14. Universal								0	0						
15. Variable								0	0						
16. Variable universal								0	0						
17. Credit								0	0						(a)
18. Other								0	0						
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities															
20. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	(21)	(321,541)	229	4,152,774
21. Indexed	0	0	0	0	0	0	0	0	0	0	0	0	(9)	(217,375)	117	3,108,736
22. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	(4)	148,135	59	3,417,311
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0	0	0	0	0	0	0	0	0	0	0	(559)	1	11,991
25. Other								0	0		0	0	0	(19,432)	3	107,539
26. Total individual annuities	0	0	0	0	0	0	0	0	0	0	0	0	(34)	(410,772)	409	10,798,351
Group Annuities																
27. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
28. Indexed								0	0		0	0	0	0	0	0
29. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	(1)	(768)	0	0
30. Variable without guarantees								0	0							
31. Life contingent payout								0	0							
32. Other								0	0							
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0	(1)	(768)	0	0
Accident and Health																
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal employees health benefits plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
44. Long-term care (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
45. Other health (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
46. Total accident and health	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	0	0	0	0	0	0	0	0	0	0	0	0	(35)	(411,540)	409	10,798,351

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

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

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

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

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

(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 $ .....

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Illinois DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	Claims and Benefits Paid: 8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole							0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	169,997						0	427,872	0	723,675		1,151,547
21. Indexed	804,222						0	5,010	0	2,216,235		2,221,245
22. Variable with guarantees	460,213						0	12,522	0	6,536,872		6,549,394
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	3,803	0	0		3,803
25. Other							0					0
26. Total individual annuities	1,434,432	0	0	0	0	0	0	449,207	0	9,476,782	0	9,925,989
Group Annuities												
27. Fixed	0						0	0	0	0		0
28. Indexed							0					0
29. Variable with guarantees	31,371						0	4,847	0	1,549,867		1,554,714
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other							0					0
33. Total group annuities	31,371	0	0	0	0	0	0	4,847	0	1,549,867	0	1,554,714
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	(f)						0	XXX	XXX	XXX		0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	(f)						0	XXX	XXX	XXX		0
44. Long-term care (d)	(f)						0	XXX	XXX	XXX		0
45. Other health (d)	(f)						0	XXX	XXX	XXX		0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	1,465,803 (c)	0	0	0	0	0	0	454,054	0	11,026,649	0	11,480,703

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

NAIC Group Code 0435 BUSINESS IN THE STATE OF Illinois DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole								0	0						
3. Term								0	0						
4. Indexed								0	0						
5. Universal								0	0						
6. Universal with secondary guarantees								0	0						
7. Variable								0	0						
8. Variable universal								0	0						
9. Credit								0	0						
10. Other								0	0						
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life															
12. Whole								0	0						
13. Term								0	0						
14. Universal								0	0						
15. Variable								0	0						
16. Variable universal								0	0						
17. Credit								0	0						(a)
18. Other								0	0						
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities															
20. Fixed	347,069	6	400,071	0	0	0	0	6	400,071	6,318	0	0	(24)	(596,792)	482	9,695,371
21. Indexed	14,667	3	37,949	0	0	0	0	3	37,949	1,521	0	0	(52)	(1,248,638)	725	15,702,092
22. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	(49)	(2,179,318)	424	26,790,229
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0	0	0	0	0	0	0	0	0	0	0	(1,628)	2	22,941
25. Other								0	0		1	24,133	(4)	(36,763)	7	83,944
26. Total individual annuities	361,736	9	438,020	0	0	0	0	9	438,020	7,839	1	24,133	(129)	(4,063,139)	1,640	52,294,577
Group Annuities															
27. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	0	244	2	8,415
28. Indexed								0	0		0	0	0	0	0	0
29. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	(10)	(932,325)	86	3,923,588
30. Variable without guarantees								0	0							
31. Life contingent payout								0	0							
32. Other								0	0							
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0	(10)	(932,081)	88	3,932,003
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	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	361,736	9	438,020	0	0	0	0	9	438,020	7,839	1	24,133	(139)	(4,995,220)	1,728	56,226,580

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

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

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

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

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

(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 $ .....

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Indiana DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	Claims and Benefits Paid: 8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole							0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	26,410						0	191,169	0	534,126		725,295
21. Indexed	53,012						0	17,864	0	852,181		870,045
22. Variable with guarantees	61,063						0	102,671	0	489,846		592,517
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	30,423	0	0		30,423
25. Other							0					0
26. Total individual annuities	140,485	0	0	0	0	0	0	342,127	0	1,876,153	0	2,218,280
Group Annuities												
27. Fixed	0						0	0	0	0		0
28. Indexed							0					0
29. Variable with guarantees	7,120						0	0	0	763,288		763,288
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other							0					0
33. Total group annuities	7,120	0	0	0	0	0	0	0	0	763,288	0	763,288
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	(f)						0	XXX	XXX	XXX		0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	(f)						0	XXX	XXX	XXX		0
44. Long-term care (d)	(f)						0	XXX	XXX	XXX		0
45. Other health (d)	(f)						0	XXX	XXX	XXX		0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	147,605 (c)	0	0	0	0	0	0	342,127	0	2,639,441	0	2,981,568

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

NAIC Group Code 0435 BUSINESS IN THE STATE OF Indiana DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole								0	0						
3. Term								0	0						
4. Indexed								0	0						
5. Universal								0	0						
6. Universal with secondary guarantees								0	0						
7. Variable								0	0						
8. Variable universal								0	0						
9. Credit								0	0						
10. Other								0	0						
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life															
12. Whole								0	0						
13. Term								0	0						
14. Universal								0	0						
15. Variable								0	0						
16. Variable universal								0	0						
17. Credit								0	0						(a)
18. Other								0	0						
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities															
20. Fixed	47,371	2	230,284	0	0	0	0	2	230,284	0	0	0	(23)	(491,794)	235	4,134,916
21. Indexed	17,825	3	17,864	0	0	0	0	3	17,864	0	0	0	(40)	(583,936)	564	5,699,850
22. Variable with guarantees	103,504	2	103,504	0	0	0	0	2	103,504	0	0	0	(16)	505,720	160	7,351,325
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0	0	0	0	0	0	0	0	0	0	0	(18,259)	9	209,042
25. Other								0	0		0	0	0	(34,358)	5	167,517
26. Total individual annuities	168,700	7	351,652	0	0	0	0	7	351,652	0	0	0	(79)	(622,627)	973	17,562,650
Group Annuities															
27. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	0	56	2	1,913
28. Indexed								0	0		0	0	0	0	0	0
29. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	(6)	(430,977)	116	3,146,445
30. Variable without guarantees								0	0							
31. Life contingent payout								0	0							
32. Other								0	0							
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0	(6)	(430,921)	118	3,148,358
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	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	168,700	7	351,652	0	0	0	0	7	351,652	0	0	0	(85)	(1,053,548)	1,091	20,711,008

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

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

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

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

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

(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 ANNUITY INVESTORS LIFE INSURANCE COMPANY

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Iowa DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole							0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	78,943						0	25,335	0	524,966		550,301
21. Indexed	6,120						0	96,918	0	289,008		385,926
22. Variable with guarantees	33,407						0	0	0	493,188		493,188
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	2,750	0	0		2,750
25. Other							0					0
26. Total individual annuities	118,470	0	0	0	0	0	0	125,003	0	1,307,162	0	1,432,165
Group Annuities												
27. Fixed	0						0	0	0	0		0
28. Indexed							0					0
29. Variable with guarantees	16,430						0	0	0	451,661		451,661
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other							0					0
33. Total group annuities	16,430	0	0	0	0	0	0	0	0	451,661	0	451,661
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	(f)						0	XXX	XXX	XXX		0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	(f)						0	XXX	XXX	XXX		0
44. Long-term care (d)	(f)						0	XXX	XXX	XXX		0
45. Other health (d)	(f)						0	XXX	XXX	XXX		0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	134,900 (c)	0	0	0	0	0	0	125,003	0	1,758,823	0	1,883,826

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

NAIC Group Code 0435 BUSINESS IN THE STATE OF Iowa DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole								0	0						
3. Term								0	0						
4. Indexed								0	0						
5. Universal								0	0						
6. Universal with secondary guarantees								0	0						
7. Variable								0	0						
8. Variable universal								0	0						
9. Credit								0	0						
10. Other								0	0						
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life															
12. Whole								0	0						
13. Term								0	0						
14. Universal								0	0						
15. Variable								0	0						
16. Variable universal								0	0						
17. Credit								0	0						(a)
18. Other								0	0						
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities															
20. Fixed	6,539	2	256,134	0	0	0	0	2	256,134	0	0	0	(20)	(375,668)	198	3,254,473
21. Indexed	96,918	2	96,918	0	0	0	0	2	96,918	0	0	0	(3)	(233,668)	59	2,791,260
22. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	(6)	(144,483)	37	2,862,140
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0	0	0	0	0	0	0	0	0	0	0	(1,915)	2	14,353
25. Other								0	0		0	0	(1)	(18,205)	1	7,717
26. Total individual annuities	103,457	4	353,052	0	0	0	0	4	353,052	0	0	0	(30)	(773,939)	297	8,929,943
Group Annuities															
27. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
28. Indexed								0	0		0	0	0	0	0	0
29. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	(3)	(319,610)	20	866,466
30. Variable without guarantees								0	0							
31. Life contingent payout								0	0							
32. Other								0	0							
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0	(3)	(319,610)	20	866,466
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	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	103,457	4	353,052	0	0	0	0	4	353,052	0	0	0	(33)	(1,093,549)	317	9,796,409

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

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

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

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

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

(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 $ .....

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Kansas DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	Claims and Benefits Paid: 8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole							0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	4,140						0	100,688	0	295,585		396,273
21. Indexed	3,204						0	0	0	311,962		311,962
22. Variable with guarantees	39,752						0	0	0	324,122		324,122
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	1,148	0	0		1,148
25. Other							0					0
26. Total individual annuities	47,096	0	0	0	0	0	0	101,836	0	931,669	0	1,033,505
Group Annuities												
27. Fixed	0						0	0	0	0		0
28. Indexed							0					0
29. Variable with guarantees	0						0	42,764	0	75		42,839
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other							0					0
33. Total group annuities	0	0	0	0	0	0	0	42,764	0	75	0	42,839
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	(f)						0	XXX	XXX	XXX		0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	(f)						0	XXX	XXX	XXX		0
44. Long-term care (d)	(f)						0	XXX	XXX	XXX		0
45. Other health (d)	(f)						0	XXX	XXX	XXX		0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	47,096 (c)	0	0	0	0	0	0	144,600	0	931,744	0	1,076,344

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

NAIC Group Code 0435 BUSINESS IN THE STATE OF Kansas DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole								0	0						
3. Term								0	0						
4. Indexed								0	0						
5. Universal								0	0						
6. Universal with secondary guarantees								0	0						
7. Variable								0	0						
8. Variable universal								0	0						
9. Credit								0	0						
10. Other								0	0						
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life															
12. Whole								0	0						
13. Term								0	0						
14. Universal								0	0						
15. Variable								0	0						
16. Variable universal								0	0						
17. Credit								0	0						(a)
18. Other								0	0						
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities															
20. Fixed	592	1	96,221	0	0	0	0	1	96,221	0	0	0	(7)	(199,465)	47	1,301,271
21. Indexed	0	0	0	0	0	0	0	0	0	0	0	0	(9)	(293,160)	51	787,162
22. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	(3)	125,742	64	2,237,202
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0	0	0	0	0	0	0	0	0	0	0	(448)	1	16,112
25. Other								0	0		0	0	(1)	(6,189)	1	31,571
26. Total individual annuities	592	1	96,221	0	0	0	0	1	96,221	0	0	0	(20)	(373,520)	164	4,373,318
Group Annuities															
27. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
28. Indexed								0	0		0	0	0	0	0	0
29. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	(2)	(22,764)	4	149,923
30. Variable without guarantees								0	0							
31. Life contingent payout								0	0							
32. Other								0	0							
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0	(2)	(22,764)	4	149,923
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	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	592	1	96,221	0	0	0	0	1	96,221	0	0	0	(22)	(396,284)	168	4,523,241

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

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

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

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

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

(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 $ .....

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Kentucky DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	Claims and Benefits Paid: 8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole							0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	217,539						0	158,003	0	1,134,575		1,292,578
21. Indexed	43,058						0	1,889	0	243,866		245,755
22. Variable with guarantees	126,081						0	0	0	712,560		712,560
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	0	0	0		0
25. Other							0					0
26. Total individual annuities	386,678	0	0	0	0	0	0	159,892	0	2,091,001	0	2,250,893
Group Annuities												
27. Fixed	0						0	0	0	0		0
28. Indexed							0					0
29. Variable with guarantees	0						0	0	0	208,608		208,608
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other							0					0
33. Total group annuities	0	0	0	0	0	0	0	0	0	208,608	0	208,608
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	(f)						0	XXX	XXX	XXX		0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	(f)						0	XXX	XXX	XXX		0
44. Long-term care (d)	(f)						0	XXX	XXX	XXX		0
45. Other health (d)	(f)						0	XXX	XXX	XXX		0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	386,678 (c)	0	0	0	0	0	0	159,892	0	2,299,609	0	2,459,501

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

NAIC Group Code 0435 BUSINESS IN THE STATE OF Kentucky DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life																
1. Industrial								0	0							
2. Whole								0	0							
3. Term								0	0							
4. Indexed								0	0							
5. Universal								0	0							
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life																
12. Whole								0	0							
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities																
20. Fixed	138,380	6	140,084	0	0	0	0	6	140,084	6,314	0	0	(44)	(850,655)	562	9,571,008
21. Indexed	0	0	0	0	0	0	0	0	0	0	0	0	(5)	(126,651)	80	3,010,039
22. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	(21)	301,947	202	7,205,852
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
25. Other								0	0		1	33,346	(2)	(12,542)	4	39,652
26. Total individual annuities	138,380	6	140,084	0	0	0	0	6	140,084	6,314	1	33,346	(72)	(687,901)	848	19,826,551
Group Annuities																
27. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	0	166	2	5,682
28. Indexed								0	0		0	0	0	0	0	0
29. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	0	132,266	27	2,551,936
30. Variable without guarantees								0	0							
31. Life contingent payout								0	0							
32. Other								0	0							
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0	0	132,432	29	2,557,618
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	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	138,380	6	140,084	0	0	0	0	6	140,084	6,314	1	33,346	(72)	(555,469)	877	22,384,169

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

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

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

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

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

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ ..... ; 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 $ .....

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Louisiana DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	Claims and Benefits Paid: 8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole							0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	118,750						0	13,421	0	316,262		329,683
21. Indexed	37,095						0	21,437	0	435,980		457,417
22. Variable with guarantees	0						0	0	0	1,617		1,617
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	0	0	0		0
25. Other							0					0
26. Total individual annuities	155,845	0	0	0	0	0	0	34,858	0	753,859	0	788,717
Group Annuities												
27. Fixed	0						0	0	0	0		0
28. Indexed							0					0
29. Variable with guarantees	6,101						0	0	0	36,539		36,539
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other							0					0
33. Total group annuities	6,101	0	0	0	0	0	0	0	0	36,539	0	36,539
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	(f)						0	XXX	XXX	XXX		0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	(f)						0	XXX	XXX	XXX		0
44. Long-term care (d)	(f)						0	XXX	XXX	XXX		0
45. Other health (d)	(f)						0	XXX	XXX	XXX		0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	161,946 (c)	0	0	0	0	0	0	34,858	0	790,398	0	825,256

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

NAIC Group Code 0435 BUSINESS IN THE STATE OF Louisiana DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year								22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life																
1. Industrial								0	0							
2. Whole								0	0							
3. Term								0	0							
4. Indexed								0	0							
5. Universal								0	0							
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life																
12. Whole								0	0							
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities																
20. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	(9)	(102,294)	195	3,456,209
21. Indexed	120	1	12,606	0	0	0	0	1	12,606	0	0	0	(12)	(555,747)	94	1,691,495
22. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	0	19,371	6	237,081
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0	0	0	0	0	0	0	0	0	0	0	(425)	1	441
25. Other								0	0		0	0	0	(9,132)	2	92,135
26. Total individual annuities	120	1	12,606	0	0	0	0	1	12,606	0	0	0	(21)	(648,227)	298	5,477,361
Group Annuities																
27. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	0	71	2	2,428
28. Indexed								0	0		0	0	0	0	0	0
29. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	(1)	(29,644)	3	42,892
30. Variable without guarantees								0	0							
31. Life contingent payout								0	0							
32. Other								0	0							
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0	(1)	(29,573)	5	45,320
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	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	120	1	12,606	0	0	0	0	1	12,606	0	0	0	(22)	(677,800)	303	5,522,681

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

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

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

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

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

(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 $ .....

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Maine DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	Claims and Benefits Paid: 8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole							0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	33,789						0	7,433	0	823,720		831,153
21. Indexed	152,549						0	0	0	423,342		423,342
22. Variable with guarantees	200,561						0	119,770	0	1,307,564		1,427,334
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	1,475	0	0		1,475
25. Other							0					0
26. Total individual annuities	386,899	0	0	0	0	0	0	128,678	0	2,554,626	0	2,683,304
Group Annuities												
27. Fixed	0						0	0	0	0		0
28. Indexed							0					0
29. Variable with guarantees	0						0	0	0	80		80
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other							0					0
33. Total group annuities	0	0	0	0	0	0	0	0	0	80	0	80
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	(f)						0	XXX	XXX	XXX		0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	(f)						0	XXX	XXX	XXX		0
44. Long-term care (d)	(f)						0	XXX	XXX	XXX		0
45. Other health (d)	(f)						0	XXX	XXX	XXX		0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	386,899 (c)	0	0	0	0	0	0	128,678	0	2,554,706	0	2,683,384

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

NAIC Group Code 0435 BUSINESS IN THE STATE OF Maine DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole								0	0						
3. Term								0	0						
4. Indexed								0	0						
5. Universal								0	0						
6. Universal with secondary guarantees								0	0						
7. Variable								0	0						
8. Variable universal								0	0						
9. Credit								0	0						
10. Other								0	0						
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life															
12. Whole								0	0						
13. Term								0	0						
14. Universal								0	0						
15. Variable								0	0						
16. Variable universal								0	0						
17. Credit								0	0						(a)
18. Other								0	0						
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities															
20. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	(12)	(761,403)	99	2,317,293
21. Indexed	0	0	0	0	0	0	0	0	0	0	0	0	(12)	(183,339)	84	2,763,685
22. Variable with guarantees	119,770	1	119,770	0	0	0	0	1	119,770	0	0	0	(18)	(624,515)	130	6,551,711
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0	0	0	0	0	0	0	0	0	0	2	34,022	2	34,022
25. Other								0	0		0	0	0	(1,716)	1	7,770
26. Total individual annuities	119,770	1	119,770	0	0	0	0	1	119,770	0	0	0	(40)	(1,536,951)	316	11,674,481
Group Annuities															
27. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
28. Indexed								0	0		0	0	0	0	0	0
29. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	0	5,317	3	38,563
30. Variable without guarantees								0	0							
31. Life contingent payout								0	0							
32. Other								0	0							
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0	0	5,317	3	38,563
Accident and Health															
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare supplement (d)		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	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	119,770	1	119,770	0	0	0	0	1	119,770	0	0	0	(40)	(1,531,634)	319	11,713,044

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

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

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

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

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

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ ..... ; 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 ANNUITY INVESTORS LIFE INSURANCE COMPANY

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Maryland DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	Claims and Benefits Paid: 8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole							0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	90,540						0	17,463	0	120,845		138,308
21. Indexed	31,055						0	14,405	0	1,074,060		1,088,465
22. Variable with guarantees	20,025						0	182	0	165,717		165,899
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	9,168	0	0		9,168
25. Other							0					0
26. Total individual annuities	141,620	0	0	0	0	0	0	41,218	0	1,360,622	0	1,401,840
Group Annuities												
27. Fixed	0						0	0	0	0		0
28. Indexed							0					0
29. Variable with guarantees	0						0	0	0	0		0
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other							0					0
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	(f)						0	XXX	XXX	XXX		0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	(f)						0	XXX	XXX	XXX		0
44. Long-term care (d)	(f)						0	XXX	XXX	XXX		0
45. Other health (d)	(f)						0	XXX	XXX	XXX		0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	141,620 (c)	0	0	0	0	0	0	41,218	0	1,360,622	0	1,401,840

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

NAIC Group Code 0435 BUSINESS IN THE STATE OF Maryland DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole								0	0						
3. Term								0	0						
4. Indexed								0	0						
5. Universal								0	0						
6. Universal with secondary guarantees								0	0						
7. Variable								0	0						
8. Variable universal								0	0						
9. Credit								0	0						
10. Other								0	0						
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life															
12. Whole								0	0						
13. Term								0	0						
14. Universal								0	0						
15. Variable								0	0						
16. Variable universal								0	0						
17. Credit								0	0						(a)
18. Other								0	0						
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities															
20. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	(2)	53,525	126	2,441,314
21. Indexed	11,538	3	19,946	0	0	0	0	3	19,946	0	0	0	(40)	(625,617)	623	7,635,886
22. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	0	91,227	23	1,411,979
23. Variable without guarantees								0	0							
24. Life contingent payout	2,309	1	2,309	0	0	0	0	1	2,309	0	0	0	0	(2,545)	2	64,464
25. Other								0	0		0	0	(1)	(16,581)	1	14,920
26. Total individual annuities	13,847	4	22,255	0	0	0	0	4	22,255	0	0	0	(43)	(499,991)	775	11,568,563
Group Annuities															
27. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	145
28. Indexed								0	0		0	0	0	0	0	0
29. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	0	582	2	4,585
30. Variable without guarantees								0	0							
31. Life contingent payout								0	0							
32. Other								0	0							
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0	0	583	3	4,730
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	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	13,847	4	22,255	0	0	0	0	4	22,255	0	0	0	(43)	(499,408)	778	11,573,293

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

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

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

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

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

(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 $ .....

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Massachusetts DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	Claims and Benefits Paid: 8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole							0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	670,865						0	258,430	0	2,129,060		2,387,490
21. Indexed	212,486						0	36,523	0	1,932,264		1,968,787
22. Variable with guarantees	746,413						0	24,970	0	6,256,553		6,281,523
23. Variable without guarantees							0					0
24. Life contingent payout	2,774						0	2,535	0	0		2,535
25. Other							0					0
26. Total individual annuities	1,632,538	0	0	0	0	0	0	322,458	0	10,317,877	0	10,640,335
Group Annuities												
27. Fixed	0						0	0	0	0		0
28. Indexed							0					0
29. Variable with guarantees	0						0	0	0	0		0
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other							0					0
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	(f)						0	XXX	XXX	XXX		0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	(f)						0	XXX	XXX	XXX		0
44. Long-term care (d)	(f)						0	XXX	XXX	XXX		0
45. Other health (d)	(f)						0	XXX	XXX	XXX		0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	1,632,538 (c)	0	0	0	0	0	0	322,458	0	10,317,877	0	10,640,335

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

NAIC Group Code 0435 BUSINESS IN THE STATE OF Massachusetts DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits: Claims Settled During Current Year: Totals Paid 14 Number of Pols/ Certs	Totals Paid 15 Amount	Reduction by Compromise 16 Number of Pols/ Certs	Reduction by Compromise 17 Amount	Amount Rejected 18 Number of Pols/ Certs	Amount Rejected 19 Amount	Total Settled During Current Year 20 Number of Pols/ Certs	Total Settled During Current Year 21 Amount	22 Unpaid December 31, Current Year	Policy Exhibit: Issued During Year 23 Number of Pols/ Certs	Issued During Year 24 Amount	Other Changes to In Force (Net) 25 Number of Pols/ Certs	Other Changes to In Force (Net) 26 Amount	In Force December 31, Current Year (b) 27 Number of Pols/ Certs	In Force December 31, Current Year (b) 28 Amount
Individual Life																
1. Industrial								0	0							
2. Whole								0	0							
3. Term								0	0							
4. Indexed								0	0							
5. Universal								0	0							
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life																
12. Whole								0	0							
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities																
20. Fixed	152,791	5	202,712	0	0	0	0	5	202,712	0	0	0	(53)	(1,109,119)	752	21,597,966
21. Indexed	3,298	2	36,523	0	0	0	0	2	36,523	0	0	0	(36)	(1,681,384)	232	10,270,101
22. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	(48)	1,377,337	629	53,745,780
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0	0	0	0	0	0	0	0	1	2,613	0	(764)	5	20,260
25. Other								0	0		1	47,366	(4)	(34,221)	4	56,773
26. Total individual annuities	156,089	7	239,235	0	0	0	0	7	239,235	0	2	49,979	(141)	(1,448,151)	1,622	85,690,880
Group Annuities																
27. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
28. Indexed								0	0		0	0	0	0	0	0
29. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	0	17,757	5	162,661
30. Variable without guarantees								0	0							
31. Life contingent payout								0	0							
32. Other								0	0							
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0	0	17,757	5	162,661
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	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	156,089	7	239,235	0	0	0	0	7	239,235	0	2	49,979	(141)	(1,430,394)	1,627	85,853,541

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

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

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

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

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

(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 $ .....

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Michigan DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	Claims and Benefits Paid: 8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole							0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	251,586						0	158,346	0	2,985,788		3,144,134
21. Indexed	876,174						0	210,982	0	6,857,068		7,068,050
22. Variable with guarantees	228,731						0	2,807	0	1,787,238		1,790,045
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	9,527	0	0		9,527
25. Other							0					0
26. Total individual annuities	1,356,491	0	0	0	0	0	0	381,662	0	11,630,094	0	12,011,756
Group Annuities												
27. Fixed	7,250						0	0	0	182,456		182,456
28. Indexed							0					0
29. Variable with guarantees	5,100						0	0	0	1,002		1,002
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other							0					0
33. Total group annuities	12,350	0	0	0	0	0	0	0	0	183,458	0	183,458
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	(f)						0	XXX	XXX	XXX		0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	(f)						0	XXX	XXX	XXX		0
44. Long-term care (d)	(f)						0	XXX	XXX	XXX		0
45. Other health (d)	(f)						0	XXX	XXX	XXX		0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	1,368,841 (c)	0	0	0	0	0	0	381,662	0	11,813,552	0	12,195,214

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

NAIC Group Code 0435 BUSINESS IN THE STATE OF Michigan DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year								22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life																
1. Industrial								0	0							
2. Whole								0	0							
3. Term								0	0							
4. Indexed								0	0							
5. Universal								0	0							
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life																
12. Whole								0	0							
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities																
20. Fixed	124,377	4	37,823	0	0	0	0	4	37,823	102,888	0	0	(67)	(2,278,134)	767	18,177,530
21. Indexed	381,324	8	213,879	0	0	0	0	8	213,879	168,549	0	0	(130)	(4,781,243)	1,454	39,507,588
22. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	(35)	761,086	492	20,445,468
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0	0	0	0	0	0	0	0	0	0	0	(3,402)	4	105,869
25. Other								0	0		0	0	(4)	(92,143)	12	258,124
26. Total individual annuities	505,701	12	251,702	0	0	0	0	12	251,702	271,437	0	0	(236)	(6,393,836)	2,729	78,494,579
Group Annuities																
27. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	(1)	(164,508)	9	202,127
28. Indexed								0	0		0	0	0	0	0	0
29. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	0	96,834	27	1,042,444
30. Variable without guarantees								0	0							
31. Life contingent payout								0	0							
32. Other								0	0							
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0	(1)	(67,674)	36	1,244,571
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	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	505,701	12	251,702	0	0	0	0	12	251,702	271,437	0	0	(237)	(6,461,510)	2,765	79,739,150

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

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

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

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

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

(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 $ .....

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Minnesota DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	Claims and Benefits Paid: 8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole							0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	26,784						0	516,944	0	765,674		1,282,618
21. Indexed	30,825						0	0	0	514,570		514,570
22. Variable with guarantees	0						0	55,617	0	1,674,680		1,730,297
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	60,815	0	93,920		154,735
25. Other							0					0
26. Total individual annuities	57,609	0	0	0	0	0	0	633,376	0	3,048,844	0	3,682,220
Group Annuities												
27. Fixed	0						0	0	0	0		0
28. Indexed							0					0
29. Variable with guarantees	5,500						0	0	0	248,659		248,659
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other							0					0
33. Total group annuities	5,500	0	0	0	0	0	0	0	0	248,659	0	248,659
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	(f)						0	XXX	XXX	XXX		0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	(f)						0	XXX	XXX	XXX		0
44. Long-term care (d)	(f)						0	XXX	XXX	XXX		0
45. Other health (d)	(f)						0	XXX	XXX	XXX		0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	63,109 (c)	0	0	0	0	0	0	633,376	0	3,297,503	0	3,930,879

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

NAIC Group Code 0435 BUSINESS IN THE STATE OF Minnesota DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole								0	0						
3. Term								0	0						
4. Indexed								0	0						
5. Universal								0	0						
6. Universal with secondary guarantees								0	0						
7. Variable								0	0						
8. Variable universal								0	0						
9. Credit								0	0						
10. Other								0	0						
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life															
12. Whole								0	0						
13. Term								0	0						
14. Universal								0	0						
15. Variable								0	0						
16. Variable universal								0	0						
17. Credit								0	0						(a)
18. Other								0	0						
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities															
20. Fixed	45,268	6	180,871	0	0	0	0	6	180,871	0	0	0	(37)	(1,273,059)	221	8,699,132
21. Indexed	159,792	1	4,037	0	0	0	0	1	4,037	155,755	0	0	(20)	(679,458)	192	3,945,545
22. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	(18)	(843,330)	137	7,180,282
23. Variable without guarantees								0	0							
24. Life contingent payout	9,035	1	9,035	0	0	0	0	1	9,035	0	0	0	(2)	(101,193)	16	270,393
25. Other								0	0		12	393,871	(11)	(311,602)	53	950,591
26. Total individual annuities	214,095	8	193,943	0	0	0	0	8	193,943	155,755	12	393,871	(88)	(3,208,642)	619	21,045,943
Group Annuities															
27. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	0	1,725	6	169,053
28. Indexed								0	0		0	0	0	0	0	0
29. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	(4)	(87,195)	37	1,206,330
30. Variable without guarantees								0	0							
31. Life contingent payout								0	0							
32. Other								0	0							
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0	(4)	(85,470)	43	1,375,383
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	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	214,095	8	193,943	0	0	0	0	8	193,943	155,755	12	393,871	(92)	(3,294,112)	662	22,421,326

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

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

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

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

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

(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 $ .....

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Mississippi DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	Claims and Benefits Paid: 8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole							0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	32,611						0	327,995	0	64,921		392,916
21. Indexed	76,277						0	43,183	0	100,897		144,080
22. Variable with guarantees	9,840						0	0	0	129,246		129,246
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	0	0	0		0
25. Other							0					0
26. Total individual annuities	118,728	0	0	0	0	0	0	371,178	0	295,064	0	666,242
Group Annuities												
27. Fixed	0						0	0	0	0		0
28. Indexed							0					0
29. Variable with guarantees	0						0	0	0	0		0
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other							0					0
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	(f)						0	XXX	XXX	XXX		0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	(f)						0	XXX	XXX	XXX		0
44. Long-term care (d)	(f)						0	XXX	XXX	XXX		0
45. Other health (d)	(f)						0	XXX	XXX	XXX		0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	118,728 (c)	0	0	0	0	0	0	371,178	0	295,064	0	666,242

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

NAIC Group Code 0435 BUSINESS IN THE STATE OF Mississippi DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole								0	0						
3. Term								0	0						
4. Indexed								0	0						
5. Universal								0	0						
6. Universal with secondary guarantees								0	0						
7. Variable								0	0						
8. Variable universal								0	0						
9. Credit								0	0						
10. Other								0	0						
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life															
12. Whole								0	0						
13. Term								0	0						
14. Universal								0	0						
15. Variable								0	0						
16. Variable universal								0	0						
17. Credit								0	0						(a)
18. Other								0	0						
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities															
20. Fixed	13,690	1	13,690	0	0	0	0	1	13,690	0	0	0	(3)	5,015	103	1,534,262
21. Indexed	35,863	1	35,863	0	0	0	0	1	35,863	0	0	0	(2)	(6,117)	158	1,934,329
22. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	(3)	(26,122)	20	926,527
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
25. Other								0	0		0	0	(1)	(46,039)	6	32,165
26. Total individual annuities	49,553	2	49,553	0	0	0	0	2	49,553	0	0	0	(9)	(73,263)	287	4,427,283
Group Annuities															
27. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
28. Indexed								0	0		0	0	0	0	0	0
29. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
30. Variable without guarantees								0	0							
31. Life contingent payout								0	0							
32. Other								0	0							
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health															
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
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	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	49,553	2	49,553	0	0	0	0	2	49,553	0	0	0	(9)	(73,263)	287	4,427,283

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

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

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

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

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

(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 $ .....

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Missouri DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	Claims and Benefits Paid: 8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole							0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	17,251						0	85,359	0	103,675		189,034
21. Indexed	173,448						0	0	0	403,678		403,678
22. Variable with guarantees	1,915						0	12,726	0	312,523		325,249
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	4,269	0	0		4,269
25. Other							0					0
26. Total individual annuities	192,614	0	0	0	0	0	0	102,354	0	819,876	0	922,230
Group Annuities												
27. Fixed	0						0	0	0	0		0
28. Indexed							0					0
29. Variable with guarantees	0						0	0	0	94,938		94,938
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other							0					0
33. Total group annuities	0	0	0	0	0	0	0	0	0	94,938	0	94,938
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	(f)						0	XXX	XXX	XXX		0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	(f)						0	XXX	XXX	XXX		0
44. Long-term care (d)	(f)						0	XXX	XXX	XXX		0
45. Other health (d)	(f)						0	XXX	XXX	XXX		0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	192,614 (c)	0	0	0	0	0	0	102,354	0	914,814	0	1,017,168

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

NAIC Group Code 0435 BUSINESS IN THE STATE OF Missouri DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole								0	0						
3. Term								0	0						
4. Indexed								0	0						
5. Universal								0	0						
6. Universal with secondary guarantees								0	0						
7. Variable								0	0						
8. Variable universal								0	0						
9. Credit								0	0						
10. Other								0	0						
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life															
12. Whole								0	0						
13. Term								0	0						
14. Universal								0	0						
15. Variable								0	0						
16. Variable universal								0	0						
17. Credit								0	0						(a)
18. Other								0	0						
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities															
20. Fixed	85,268	1	85,268	0	0	0	0	1	85,268	0	0	0	(4)	(83,627)	93	1,834,393
21. Indexed	314,778	0	0	0	0	0	0	0	0	314,778	0	0	(18)	(439,552)	181	3,729,127
22. Variable with guarantees	22,654	1	22,654	0	0	0	0	1	22,654	0	0	0	(4)	4,694	51	2,271,270
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0	0	0	0	0	0	0	0	0	0	0	(1,092)	1	20,565
25. Other								0	0		0	0	(1)	(90)	0	0
26. Total individual annuities	422,700	2	107,922	0	0	0	0	2	107,922	314,778	0	0	(27)	(519,667)	326	7,855,355
Group Annuities															
27. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
28. Indexed								0	0		0	0	0	0	0	0
29. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	(1)	(65,558)	33	294,735
30. Variable without guarantees								0	0							
31. Life contingent payout								0	0							
32. Other								0	0							
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0	(1)	(65,558)	33	294,735
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	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	422,700	2	107,922	0	0	0	0	2	107,922	314,778	0	0	(28)	(585,225)	359	8,150,090

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

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

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

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

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

(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 $ .....

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Montana DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	Claims and Benefits Paid: 8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole							0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	3,000						0	42,208	0	50,458		92,666
21. Indexed	224,021						0	23,560	0	494,591		518,151
22. Variable with guarantees	0						0	0	0	6,946		6,946
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	5,136	0	0		5,136
25. Other							0					0
26. Total individual annuities	227,021	0	0	0	0	0	0	70,904	0	551,995	0	622,899
Group Annuities												
27. Fixed	0						0	0	0	0		0
28. Indexed							0					0
29. Variable with guarantees	0						0	0	0	943		943
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other							0					0
33. Total group annuities	0	0	0	0	0	0	0	0	0	943	0	943
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	(f)						0	XXX	XXX	XXX		0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	(f)						0	XXX	XXX	XXX		0
44. Long-term care (d)	(f)						0	XXX	XXX	XXX		0
45. Other health (d)	(f)						0	XXX	XXX	XXX		0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	227,021 (c)	0	0	0	0	0	0	70,904	0	552,938	0	623,842

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

NAIC Group Code 0435 BUSINESS IN THE STATE OF Montana DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole								0	0						
3. Term								0	0						
4. Indexed								0	0						
5. Universal								0	0						
6. Universal with secondary guarantees								0	0						
7. Variable								0	0						
8. Variable universal								0	0						
9. Credit								0	0						
10. Other								0	0						
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life															
12. Whole								0	0						
13. Term								0	0						
14. Universal								0	0						
15. Variable								0	0						
16. Variable universal								0	0						
17. Credit								0	0						(a)
18. Other								0	0						
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities															
20. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	1	(824)	38	707,971
21. Indexed	14,732	2	23,549	0	0	0	0	2	23,549	0	0	0	(27)	(201,702)	268	4,125,786
22. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	0	32,502	8	275,409
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0	0	0	0	0	0	0	0	0	0	0	(1,907)	3	56,246
25. Other								0	0		1	46,459	0	(30,979)	6	181,495
26. Total individual annuities	14,732	2	23,549	0	0	0	0	2	23,549	0	1	46,459	(26)	(202,910)	323	5,346,907
Group Annuities															
27. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
28. Indexed								0	0		0	0	0	0	0	0
29. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	1	16,091	9	66,191
30. Variable without guarantees								0	0							
31. Life contingent payout								0	0							
32. Other								0	0							
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0	1	16,091	9	66,191
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	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	14,732	2	23,549	0	0	0	0	2	23,549	0	1	46,459	(25)	(186,819)	332	5,413,098

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

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

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

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

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

(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 $ .....

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Nebraska DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	Claims and Benefits Paid: 8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole							0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	4,100						0	5,315	0	74,488		79,803
21. Indexed	23,275						0	0	0	38,046		38,046
22. Variable with guarantees	3,000						0	0	0	248,039		248,039
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	0	0	0		0
25. Other							0					0
26. Total individual annuities	30,375	0	0	0	0	0	0	5,315	0	360,573	0	365,888
Group Annuities												
27. Fixed	0						0	0	0	0		0
28. Indexed							0					0
29. Variable with guarantees	0						0	0	0	50		50
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other							0					0
33. Total group annuities	0	0	0	0	0	0	0	0	0	50	0	50
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	(f)						0	XXX	XXX	XXX		0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	(f)						0	XXX	XXX	XXX		0
44. Long-term care (d)	(f)						0	XXX	XXX	XXX		0
45. Other health (d)	(f)						0	XXX	XXX	XXX		0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	30,375 (c)	0	0	0	0	0	0	5,315	0	360,623	0	365,938

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

NAIC Group Code 0435 BUSINESS IN THE STATE OF Nebraska DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life																
1. Industrial								0	0							
2. Whole								0	0							
3. Term								0	0							
4. Indexed								0	0							
5. Universal								0	0							
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life																
12. Whole								0	0							
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities																
20. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	(2)	(60,155)	32	453,316
21. Indexed	6	0	0	0	0	0	0	0	0	219	0	0	(1)	16,391	49	905,968
22. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	(2)	(149,644)	5	743,611
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
25. Other								0	0		0	0	0	0	0	0
26. Total individual annuities	6	0	0	0	0	0	0	0	0	219	0	0	(5)	(193,408)	86	2,102,895
Group Annuities																
27. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
28. Indexed								0	0		0	0	0	0	0	0
29. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	0	902	3	11,517
30. Variable without guarantees								0	0							
31. Life contingent payout								0	0							
32. Other								0	0							
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0	0	902	3	11,517
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	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	6	0	0	0	0	0	0	0	0	219	0	0	(5)	(192,506)	89	2,114,412

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

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

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

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

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

(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 $ .....

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Nevada DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	Claims and Benefits Paid: 8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole							0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	388,491						0	92,822	0	3,072,322		3,165,144
21. Indexed	221,780						0	127,981	0	1,990,179		2,118,160
22. Variable with guarantees	11,205						0	56,223	0	435,633		491,856
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	1,627	0	0		1,627
25. Other							0					0
26. Total individual annuities	621,476	0	0	0	0	0	0	278,653	0	5,498,134	0	5,776,787
Group Annuities												
27. Fixed	0						0	0	0	0		0
28. Indexed							0					0
29. Variable with guarantees	0						0	2,084	0	25		2,109
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other							0					0
33. Total group annuities	0	0	0	0	0	0	0	2,084	0	25	0	2,109
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	(f)						0	XXX	XXX	XXX		0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	(f)						0	XXX	XXX	XXX		0
44. Long-term care (d)	(f)						0	XXX	XXX	XXX		0
45. Other health (d)	(f)						0	XXX	XXX	XXX		0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	621,476 (c)	0	0	0	0	0	0	280,737	0	5,498,159	0	5,778,896

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

NAIC Group Code 0435 BUSINESS IN THE STATE OF Nevada DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole								0	0						
3. Term								0	0						
4. Indexed								0	0						
5. Universal								0	0						
6. Universal with secondary guarantees								0	0						
7. Variable								0	0						
8. Variable universal								0	0						
9. Credit								0	0						
10. Other								0	0						
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life															
12. Whole								0	0						
13. Term								0	0						
14. Universal								0	0						
15. Variable								0	0						
16. Variable universal								0	0						
17. Credit								0	0						(a)
18. Other								0	0						
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities															
20. Fixed	29,528	3	29,528	0	0	0	0	3	29,528	0	0	0	(75)	(2,444,388)	635	11,615,850
21. Indexed	6,982	2	14,313	0	0	0	0	2	14,313	0	0	0	(46)	(1,632,967)	419	9,439,572
22. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	(7)	(70,829)	52	2,682,301
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0	0	0	0	0	0	0	0	0	0	0	(662)	1	19,822
25. Other								0	0		0	0	(1)	(37,086)	4	85,353
26. Total individual annuities	36,510	5	43,841	0	0	0	0	5	43,841	0	0	0	(129)	(4,185,932)	1,111	23,842,898
Group Annuities															
27. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	0	32	1	1,109
28. Indexed								0	0		0	0	0	0	0	0
29. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	0	9,830	2	131,884
30. Variable without guarantees								0	0							
31. Life contingent payout								0	0							
32. Other								0	0							
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0	0	9,862	3	132,993
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	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	36,510	5	43,841	0	0	0	0	5	43,841	0	0	0	(129)	(4,176,070)	1,114	23,975,891

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

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

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

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

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

(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 $ .....

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF New Hampshire DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole							0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	62,462						0	0	0	494,683		494,683
21. Indexed	76,347						0	0	0	621,822		621,822
22. Variable with guarantees	62,301						0	0	0	441,367		441,367
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	1,134	0	0		1,134
25. Other							0					0
26. Total individual annuities	201,110	0	0	0	0	0	0	1,134	0	1,557,872	0	1,559,006
Group Annuities												
27. Fixed	0						0	0	0	0		0
28. Indexed							0					0
29. Variable with guarantees	0						0	0	0	0		0
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other							0					0
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	(f)						0	XXX	XXX	XXX		0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	(f)						0	XXX	XXX	XXX		0
44. Long-term care (d)	(f)						0	XXX	XXX	XXX		0
45. Other health (d)	(f)						0	XXX	XXX	XXX		0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	201,110 (c)	0	0	0	0	0	0	1,134	0	1,557,872	0	1,559,006

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

NAIC Group Code 0435 BUSINESS IN THE STATE OF New Hampshire DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	13 Incurred During Current Year	Claims Settled During Current Year: Totals Paid 14 Number of Pols/ Certs	Totals Paid 15 Amount	Reduction by Compromise 16 Number of Pols/ Certs	Reduction by Compromise 17 Amount	Amount Rejected 18 Number of Pols/ Certs	Amount Rejected 19 Amount	Total Settled During Current Year 20 Number of Pols/ Certs	Total Settled During Current Year 21 Amount	22 Unpaid December 31, Current Year	Policy Exhibit: Issued During Year 23 Number of Pols/ Certs	Issued During Year 24 Amount	Other Changes to In Force (Net) 25 Number of Pols/ Certs	Other Changes to In Force (Net) 26 Amount	In Force December 31, Current Year (b) 27 Number of Pols/ Certs	In Force December 31, Current Year (b) 28 Amount
Individual Life																
1. Industrial								0	0							
2. Whole								0	0							
3. Term								0								
4. Indexed								0	0							
5. Universal								0	0							
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life																
12. Whole								0	0							
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities																
20. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	(7)	(250,304)	55	2,532,768
21. Indexed	51,407	2	5,958	0	0	0	0	2	5,958	45,450	0	0	(7)	(528,909)	68	2,590,149
22. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	(2)	491,917	24	2,934,447
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0	0	0	0	0	0	0	0	0	0	0	(496)	1	8,371
25. Other								0	0		0	0	0	0	0	0
26. Total individual annuities	51,407	2	5,958	0	0	0	0	2	5,958	45,450	0	0	(16)	(287,792)	148	8,065,735
Group Annuities																
27. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
28. Indexed								0	0		0	0	0	0	0	0
29. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	0	8	1	281
30. Variable without guarantees								0	0							
31. Life contingent payout								0	0							
32. Other								0	0							
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0	0	8	1	281
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	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	51,407	2	5,958	0	0	0	0	2	5,958	45,450	0	0	(16)	(287,784)	149	8,066,016

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

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

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

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

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

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ ..... ; 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 $ .....

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF New Jersey DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	Claims and Benefits Paid: 8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole							0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	623,434						0	336,567	0	5,044,374		5,380,941
21. Indexed	505,099						0	128,186	0	5,103,126		5,231,312
22. Variable with guarantees	61,512						0	64,054	0	1,651,996		1,716,050
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	190,855	0	0		190,855
25. Other							0					0
26. Total individual annuities	1,190,045	0	0	0	0	0	0	719,662	0	11,799,496	0	12,519,158
Group Annuities												
27. Fixed	1,300						0	0	0	0		0
28. Indexed							0					0
29. Variable with guarantees	15,000						0	0	0	30		30
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other							0					0
33. Total group annuities	16,300	0	0	0	0	0	0	0	0	30	0	30
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	(f)						0	XXX	XXX	XXX		0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	(f)						0	XXX	XXX	XXX		0
44. Long-term care (d)	(f)						0	XXX	XXX	XXX		0
45. Other health (d)	(f)						0	XXX	XXX	XXX		0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	1,206,345 (c)	0	0	0	0	0	0	719,662	0	11,799,526	0	12,519,188

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

NAIC Group Code 0435 BUSINESS IN THE STATE OF New Jersey DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole								0	0						
3. Term								0	0						
4. Indexed								0	0						
5. Universal								0	0						
6. Universal with secondary guarantees								0	0						
7. Variable								0	0						
8. Variable universal								0	0						
9. Credit								0	0						
10. Other								0	0						
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life															
12. Whole								0	0						
13. Term								0	0						
14. Universal								0	0						
15. Variable								0	0						
16. Variable universal								0	0						
17. Credit								0	0						(a)
18. Other								0	0						
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities															
20. Fixed	84,087	8	147,584	0	0	0	0	8	147,584	0	0	0	(101)	(3,707,694)	1,223	28,481,868
21. Indexed	134,109	5	130,656	0	0	0	0	5	130,656	66,170	0	0	(70)	(3,895,699)	679	16,425,649
22. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	(11)	(785,434)	109	8,652,546
23. Variable without guarantees								0	0							
24. Life contingent payout	166,601	1	166,601	0	0	0	0	1	166,601	0	0	0	(1)	(171,499)	5	138,159
25. Other								0	0		1	7,936	(1)	(73,662)	9	92,170
26. Total individual annuities	384,797	14	444,841	0	0	0	0	14	444,841	66,170	1	7,936	(184)	(8,633,988)	2,025	53,790,392
Group Annuities															
27. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	0	1,509	1	21,664
28. Indexed								0	0		0	0	0	0	0	0
29. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	0	44,232	10	766,697
30. Variable without guarantees								0	0							
31. Life contingent payout								0	0							
32. Other								0	0							
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0	0	45,741	11	788,361
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	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	384,797	14	444,841	0	0	0	0	14	444,841	66,170	1	7,936	(184)	(8,588,247)	2,036	54,578,753

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

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

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

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

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

(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 $ .....

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF New Mexico DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	Claims and Benefits Paid: 8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole							0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	122,810						0	6,383	0	164,808		171,191
21. Indexed	54,883						0	0	0	291,622		291,622
22. Variable with guarantees	0						0	0	0	3,283		3,283
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	383	0	0		383
25. Other							0					0
26. Total individual annuities	177,693	0	0	0	0	0	0	6,766	0	459,713	0	466,479
Group Annuities												
27. Fixed	0						0	0	0	0		0
28. Indexed							0					0
29. Variable with guarantees	0						0	56,203	0	11,500		67,703
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other							0					0
33. Total group annuities	0	0	0	0	0	0	0	56,203	0	11,500	0	67,703
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	(f)						0	XXX	XXX	XXX		0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	(f)						0	XXX	XXX	XXX		0
44. Long-term care (d)	(f)						0	XXX	XXX	XXX		0
45. Other health (d)	(f)						0	XXX	XXX	XXX		0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	177,693 (c)	0	0	0	0	0	0	62,969	0	471,213	0	534,182

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

NAIC Group Code 0435 BUSINESS IN THE STATE OF New Mexico DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole								0	0						
3. Term								0	0						
4. Indexed								0	0						
5. Universal								0	0						
6. Universal with secondary guarantees								0	0						
7. Variable								0	0						
8. Variable universal								0	0						
9. Credit								0	0						
10. Other								0	0						
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life															
12. Whole								0	0						
13. Term								0	0						
14. Universal								0	0						
15. Variable								0	0						
16. Variable universal								0	0						
17. Credit								0	0						(a)
18. Other								0	0						
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities															
20. Fixed	6,696	2	6,696	0	0	0	0	2	6,696	0	0	0	(8)	3,760	91	1,668,177
21. Indexed	0	0	0	0	0	0	0	0	0	0	0	0	(5)	(182,090)	114	2,496,027
22. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	1	94,616	20	932,743
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0	0	0	0	0	0	0	0	0	0	0	(152)	1	3,215
25. Other								0	0		0	0	0	0	0	0
26. Total individual annuities	6,696	2	6,696	0	0	0	0	2	6,696	0	0	0	(12)	(83,866)	226	5,100,162
Group Annuities															
27. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
28. Indexed								0	0		0	0	0	0	0	0
29. Variable with guarantees	56,203	1	56,203	0	0	0	0	1	56,203	0	0	0	(1)	38,919	21	1,223,647
30. Variable without guarantees								0	0							
31. Life contingent payout								0	0							
32. Other								0	0							
33. Total group annuities	56,203	1	56,203	0	0	0	0	1	56,203	0	0	0	(1)	38,919	21	1,223,647
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	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	62,899	3	62,899	0	0	0	0	3	62,899	0	0	0	(13)	(44,947)	247	6,323,809

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

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

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

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

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

(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 $ .....

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF New York DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	Claims and Benefits Paid: 8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole							0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	12,537						0	95,313	0	373,053		468,366
21. Indexed	10,400						0	46,823	0	59,408		106,231
22. Variable with guarantees	25,950						0	0	0	87,053		87,053
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	11,141	0	0		11,141
25. Other							0					0
26. Total individual annuities	48,887	0	0	0	0	0	0	153,277	0	519,514	0	672,791
Group Annuities												
27. Fixed	0						0	0	0	0		0
28. Indexed							0					0
29. Variable with guarantees	0						0	0	0	11,364		11,364
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other							0					0
33. Total group annuities	0	0	0	0	0	0	0	0	0	11,364	0	11,364
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	(f)						0	XXX	XXX	XXX		0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	(f)						0	XXX	XXX	XXX		0
44. Long-term care (d)	(f)						0	XXX	XXX	XXX		0
45. Other health (d)	(f)						0	XXX	XXX	XXX		0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	48,887 (c)	0	0	0	0	0	0	153,277	0	530,878	0	684,155

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

NAIC Group Code 0435 BUSINESS IN THE STATE OF New York DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole								0	0						
3. Term								0	0						
4. Indexed								0	0						
5. Universal								0	0						
6. Universal with secondary guarantees								0	0						
7. Variable								0	0						
8. Variable universal								0	0						
9. Credit								0	0						
10. Other								0	0						
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life															
12. Whole								0	0						
13. Term								0	0						
14. Universal								0	0						
15. Variable								0	0						
16. Variable universal								0	0						
17. Credit								0	0						(a)
18. Other								0	0						
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities															
20. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	(1)	133,876	96	1,841,612
21. Indexed	0	0	0	0	0	0	0	0	0	0	0	0	6	1,185,243	56	2,063,938
22. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	(3)	22,649	30	1,125,902
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0	0	0	0	0	0	0	0	0	0	0	(6,926)	1	82,975
25. Other								0	0		0	0	(1)	(50,334)	2	11,365
26. Total individual annuities	0	0	0	0	0	0	0	0	0	0	0	0	1	1,284,508	185	5,125,792
Group Annuities															
27. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	0	122	1	12,286
28. Indexed								0	0		0	0	0	0	0	0
29. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	1	39,894	8	387,915
30. Variable without guarantees								0	0							
31. Life contingent payout								0	0							
32. Other								0	0							
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0	1	40,016	9	400,201
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	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	0	0	0	0	0	0	0	0	0	0	0	0	2	1,324,524	194	5,525,993

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

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

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

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

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

(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 $ .....

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF North Carolina DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	Claims and Benefits Paid: 8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole							0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	128,934						0	181,870	0	2,086,064		2,267,934
21. Indexed	90,227						0	180,145	0	451,935		632,080
22. Variable with guarantees	236,232						0	11,471	0	1,644,589		1,656,060
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	12,757	0	0		12,757
25. Other							0					0
26. Total individual annuities	455,393	0	0	0	0	0	0	386,243	0	4,182,588	0	4,568,831
Group Annuities												
27. Fixed	191,949						0	0	0	748,410		748,410
28. Indexed							0					0
29. Variable with guarantees	0						0	0	0	111,978		111,978
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other							0					0
33. Total group annuities	191,949	0	0	0	0	0	0	0	0	860,388	0	860,388
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	(f)						0	XXX	XXX	XXX		0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	(f)						0	XXX	XXX	XXX		0
44. Long-term care (d)	(f)						0	XXX	XXX	XXX		0
45. Other health (d)	(f)						0	XXX	XXX	XXX		0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	647,342 (c)	0	0	0	0	0	0	386,243	0	5,042,976	0	5,429,219

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

NAIC Group Code 0435 BUSINESS IN THE STATE OF North Carolina DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life																
1. Industrial								0	0							
2. Whole								0	0							
3. Term								0	0							
4. Indexed								0	0							
5. Universal								0	0							
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life																
12. Whole								0	0							
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities																
20. Fixed	80,700	5	111,609	0	0	0	0	5	111,609	0	0	0	(51)	(1,656,289)	555	9,767,016
21. Indexed	142,947	2	180,145	0	0	0	0	2	180,145	0	0	0	(15)	(39,803)	234	5,051,498
22. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	(19)	234,686	183	11,396,858
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0	0	0	0	0	0	0	0	0	0	0	(6,589)	3	92,657
25. Other								0	0		0	0	(1)	(42,772)	8	59,195
26. Total individual annuities	223,647	7	291,754	0	0	0	0	7	291,754	0	0	0	(86)	(1,510,767)	983	26,367,224
Group Annuities																
27. Fixed	78,213	0	0	0	0	0	0	0	0	78,213	0	0	(18)	(363,918)	454	9,728,424
28. Indexed								0	0		0	0	0	0	0	0
29. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	(3)	100,489	92	2,107,886
30. Variable without guarantees								0	0							
31. Life contingent payout								0	0							
32. Other								0	0							
33. Total group annuities	78,213	0	0	0	0	0	0	0	0	78,213	0	0	(21)	(263,429)	546	11,836,310
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	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	301,860	7	291,754	0	0	0	0	7	291,754	78,213	0	0	(107)	(1,774,196)	1,529	38,203,534

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

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

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

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

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

(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 $ .....

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF North Dakota DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	Claims and Benefits Paid: 8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole							0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	11,683						0	6,829	0	12,586		19,415
21. Indexed	21,605						0	0	0	236,150		236,150
22. Variable with guarantees	0						0	0	0	29,513		29,513
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	0	0	0		0
25. Other							0					0
26. Total individual annuities	33,288	0	0	0	0	0	0	6,829	0	278,249	0	285,078
Group Annuities												
27. Fixed	0						0	0	0	0		0
28. Indexed							0					0
29. Variable with guarantees	0						0	0	0	0		0
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other							0					0
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	(f)						0	XXX	XXX	XXX		0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	(f)						0	XXX	XXX	XXX		0
44. Long-term care (d)	(f)						0	XXX	XXX	XXX		0
45. Other health (d)	(f)						0	XXX	XXX	XXX		0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	33,288 (c)	0	0	0	0	0	0	6,829	0	278,249	0	285,078

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

NAIC Group Code 0435 BUSINESS IN THE STATE OF North Dakota DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole								0	0						
3. Term								0	0						
4. Indexed								0	0						
5. Universal								0	0						
6. Universal with secondary guarantees								0	0						
7. Variable								0	0						
8. Variable universal								0	0						
9. Credit								0	0						
10. Other								0	0						
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life															
12. Whole								0	0						
13. Term								0	0						
14. Universal								0	0						
15. Variable								0	0						
16. Variable universal								0	0						
17. Credit								0	0						(a)
18. Other								0	0						
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities															
20. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	(2)	(4,435)	16	253,516
21. Indexed	12	1	12	0	0	0	0	1	12	0	0	0	1	28,898	51	1,618,993
22. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	(1)	25,178	8	486,683
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
25. Other								0	0	0	0	0	0	(6,317)	1	12,687
26. Total individual annuities	12	1	12	0	0	0	0	1	12	0	0	0	(2)	43,324	76	2,371,879
Group Annuities															
27. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
28. Indexed								0	0	0	0	0	0	0	0	0
29. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	0	283	1	2,522
30. Variable without guarantees								0	0							
31. Life contingent payout								0	0							
32. Other								0	0							
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0	0	283	1	2,522
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	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	12	1	12	0	0	0	0	1	12	0	0	0	(2)	43,607	77	2,374,401

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

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

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

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

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

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ ..... ; 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 $ .....

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Ohio DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	Claims and Benefits Paid: 8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole							0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	644,328						0	700,280	0	3,256,967		3,957,247
21. Indexed	2,444,660						0	468,432	0	13,743,744		14,212,176
22. Variable with guarantees	962,819						0	132,747	0	5,912,463		6,045,210
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	150,775	0	0		150,775
25. Other							0					0
26. Total individual annuities	4,051,807	0	0	0	0	0	0	1,452,234	0	22,913,174	0	24,365,408
Group Annuities												
27. Fixed	2,650						0	0	0	15,366		15,366
28. Indexed							0					0
29. Variable with guarantees	267,915						0	87,705	0	15,868,477		15,956,182
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other							0					0
33. Total group annuities	270,565	0	0	0	0	0	0	87,705	0	15,883,843	0	15,971,548
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	(f)						0	XXX	XXX	XXX		0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	(f)						0	XXX	XXX	XXX		0
44. Long-term care (d)	(f)						0	XXX	XXX	XXX		0
45. Other health (d)	(f)						0	XXX	XXX	XXX		0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	4,322,372 (c)	0	0	0	0	0	0	1,539,939	0	38,797,017	0	40,336,956

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

NAIC Group Code 0435 BUSINESS IN THE STATE OF Ohio DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole								0	0						
3. Term								0	0						
4. Indexed								0	0						
5. Universal								0	0						
6. Universal with secondary guarantees								0	0						
7. Variable								0	0						
8. Variable universal								0	0						
9. Credit								0	0						
10. Other								0	0						
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life															
12. Whole								0	0						
13. Term								0	0						
14. Universal								0	0						
15. Variable								0	0						
16. Variable universal								0	0						
17. Credit								0	0						(a)
18. Other								0	0						
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities															
20. Fixed	362,311	10	450,573	0	0	0	0	10	450,573	29,340	0	0	(93)	(2,498,399)	896	21,334,322
21. Indexed	142,007	14	419,125	0	0	0	0	14	419,125	899	0	0	(228)	(8,205,186)	2,399	87,296,865
22. Variable with guarantees	95,520	1	95,520	0	0	0	0	1	95,520	0	0	0	(68)	819,779	853	54,434,937
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0	0	0	0	0	0	0	0	0	0	(5)	(246,214)	37	1,168,130
25. Other								0	0		4	117,360	(10)	(260,902)	38	978,710
26. Total individual annuities	599,838	25	965,218	0	0	0	0	25	965,218	30,239	4	117,360	(404)	(10,390,922)	4,223	165,212,964
Group Annuities															
27. Fixed	23,683	1	23,683	0	0	0	0	1	23,683	0	0	0	(1)	(23,331)	9	143,401
28. Indexed								0	0		0	0	0	0	0	0
29. Variable with guarantees	8,111	3	8,111	0	0	0	0	3	8,111	0	0	0	(72)	(9,462,410)	506	48,381,041
30. Variable without guarantees								0	0							
31. Life contingent payout								0	0							
32. Other								0	0							
33. Total group annuities	31,794	4	31,794	0	0	0	0	4	31,794	0	0	0	(73)	(9,485,741)	515	48,524,442
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	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	631,632	29	997,012	0	0	0	0	29	997,012	30,239	4	117,360	(477)	(19,876,663)	4,738	213,737,406

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

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

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

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

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

(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 $ .....

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Oklahoma DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	Claims and Benefits Paid: 8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole							0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	4,238						0	47,807	0	152,880		200,687
21. Indexed	17,190						0	0	0	644,970		644,970
22. Variable with guarantees	1,520						0	0	0	253,107		253,107
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	0	0	0		0
25. Other							0					0
26. Total individual annuities	22,948	0	0	0	0	0	0	47,807	0	1,050,957	0	1,098,764
Group Annuities												
27. Fixed	0						0	0	0	0		0
28. Indexed							0					0
29. Variable with guarantees	0						0	0	0	90		90
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other							0					0
33. Total group annuities	0	0	0	0	0	0	0	0	0	90	0	90
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	(f)						0	XXX	XXX	XXX		0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	(f)						0	XXX	XXX	XXX		0
44. Long-term care (d)	(f)						0	XXX	XXX	XXX		0
45. Other health (d)	(f)						0	XXX	XXX	XXX		0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	22,948 (c)	0	0	0	0	0	0	47,807	0	1,051,047	0	1,098,854

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

NAIC Group Code 0435 BUSINESS IN THE STATE OF Oklahoma DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole								0	0						
3. Term								0	0						
4. Indexed								0	0						
5. Universal								0	0						
6. Universal with secondary guarantees								0	0						
7. Variable								0	0						
8. Variable universal								0	0						
9. Credit								0	0						
10. Other								0	0						
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life															
12. Whole								0	0						
13. Term								0	0						
14. Universal								0	0						
15. Variable								0	0						
16. Variable universal								0	0						
17. Credit								0	0						(a)
18. Other								0	0						
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities															
20. Fixed	32,547	0	0	0	0	0	0	0	0	32,547	0	0	(6)	(107,977)	131	2,070,938
21. Indexed	121	0	0	0	0	0	0	0	0	121	0	0	(14)	(539,731)	134	2,324,083
22. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	(3)	8,277	15	957,359
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
25. Other								0	0		0	0	2	(20,892)	5	41,391
26. Total individual annuities	32,668	0	0	0	0	0	0	0	0	32,668	0	0	(21)	(660,323)	285	5,393,771
Group Annuities															
27. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	0	84	4	3,526
28. Indexed								0	0		0	0	0	0	0	0
29. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	1	56,732	8	90,492
30. Variable without guarantees								0	0							
31. Life contingent payout								0	0							
32. Other								0	0							
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0	1	56,816	12	94,018
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	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	32,668	0	0	0	0	0	0	0	0	32,668	0	0	(20)	(603,507)	297	5,487,789

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

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

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

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

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

(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 $ .....

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Oregon DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	Claims and Benefits Paid: 8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole							0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	4,850						0	43,754	0	513,255		557,009
21. Indexed	14,879						0	17,615	0	281,218		298,833
22. Variable with guarantees	1,200						0	0	0	99,644		99,644
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	14,217	0	0		14,217
25. Other							0					0
26. Total individual annuities	20,929	0	0	0	0	0	0	75,586	0	894,117	0	969,703
Group Annuities												
27. Fixed	0						0	0	0	0		0
28. Indexed							0					0
29. Variable with guarantees	0						0	0	0	27,318		27,318
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other							0					0
33. Total group annuities	0	0	0	0	0	0	0	0	0	27,318	0	27,318
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	(f)						0	XXX	XXX	XXX		0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	(f)						0	XXX	XXX	XXX		0
44. Long-term care (d)	(f)						0	XXX	XXX	XXX		0
45. Other health (d)	(f)						0	XXX	XXX	XXX		0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	20,929 (c)	0	0	0	0	0	0	75,586	0	921,435	0	997,021

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

NAIC Group Code 0435 BUSINESS IN THE STATE OF Oregon DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole								0	0						
3. Term								0	0						
4. Indexed								0	0						
5. Universal								0	0						
6. Universal with secondary guarantees								0	0						
7. Variable								0	0						
8. Variable universal								0	0						
9. Credit								0	0						
10. Other								0	0						
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life															
12. Whole								0	0						
13. Term								0	0						
14. Universal								0	0						
15. Variable								0	0						
16. Variable universal								0	0						
17. Credit								0	0						(a)
18. Other								0	0						
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities															
20. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	(3)	(333,638)	111	2,198,705
21. Indexed	17,615	1	17,614	0	0	0	0	1	17,614	0	0	0	0	(152,440)	77	2,598,982
22. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	(1)	34,783	38	1,158,651
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0	0	0	0	0	0	0	0	0	0	0	(2,697)	3	52,436
25. Other								0	0		0	0	(1)	(54,001)	2	220,026
26. Total individual annuities	17,615	1	17,614	0	0	0	0	1	17,614	0	0	0	(5)	(507,993)	231	6,228,800
Group Annuities															
27. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	0	254	2	14,770
28. Indexed								0	0		0	0	0	0	0	0
29. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	0	(712)	7	168,099
30. Variable without guarantees								0	0							
31. Life contingent payout								0	0							
32. Other								0	0							
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0	0	(458)	9	182,869
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	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	17,615	1	17,614	0	0	0	0	1	17,614	0	0	0	(5)	(508,451)	240	6,411,669

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

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

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

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

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

(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 $ .....

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Pennsylvania DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	Claims and Benefits Paid: 8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole							0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	249,775						0	306,456	0	3,126,608		3,433,064
21. Indexed	357,236						0	217,061	0	1,761,124		1,978,185
22. Variable with guarantees	180,087						0	547	0	1,694,571		1,695,118
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	1,140	0	0		1,140
25. Other							0					0
26. Total individual annuities	787,098	0	0	0	0	0	0	525,204	0	6,582,303	0	7,107,507
Group Annuities												
27. Fixed	5,280						0	14,696	0	164,721		179,417
28. Indexed							0					0
29. Variable with guarantees	0						0	0	0	237,677		237,677
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other							0					0
33. Total group annuities	5,280	0	0	0	0	0	0	14,696	0	402,398	0	417,094
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	(f)						0	XXX	XXX	XXX		0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	(f)						0	XXX	XXX	XXX		0
44. Long-term care (d)	(f)						0	XXX	XXX	XXX		0
45. Other health (d)	(f)						0	XXX	XXX	XXX		0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	792,378 (c)	0	0	0	0	0	0	539,900	0	6,984,701	0	7,524,601

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

NAIC Group Code 0435 BUSINESS IN THE STATE OF Pennsylvania DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole								0	0						
3. Term								0	0						
4. Indexed								0	0						
5. Universal								0	0						
6. Universal with secondary guarantees								0	0						
7. Variable								0	0						
8. Variable universal								0	0						
9. Credit								0	0						
10. Other								0	0						
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life															
12. Whole								0	0						
13. Term								0	0						
14. Universal								0	0						
15. Variable								0	0						
16. Variable universal								0	0						
17. Credit								0	0						(a)
18. Other								0	0						
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities															
20. Fixed	282,413	7	357,884	0	0	0	0	7	357,884	0	0	0	(73)	(2,789,220)	508	15,662,870
21. Indexed	300,988	4	217,061	0	0	0	0	4	217,061	145,015	0	0	(31)	(2,461,498)	324	9,063,714
22. Variable with guarantees	182,433	2	182,433	0	0	0	0	2	182,433	0	0	0	(19)	139,031	106	12,041,331
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0	0	0	0	0	0	0	0	0	0	0	(1,075)	1	1,118
25. Other								0	0		0	0	(1)	(15,235)	1	4,341
26. Total individual annuities	765,834	13	757,378	0	0	0	0	13	757,378	145,015	0	0	(124)	(5,127,997)	940	36,773,374
Group Annuities															
27. Fixed	14,696	1	14,696	0	0	0	0	1	14,696	0	0	0	(4)	(167,148)	23	519,390
28. Indexed								0	0		0	0	0	0	0	0
29. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	(5)	(214,112)	21	398,661
30. Variable without guarantees								0	0							
31. Life contingent payout								0	0							
32. Other								0	0							
33. Total group annuities	14,696	1	14,696	0	0	0	0	1	14,696	0	0	0	(9)	(381,260)	44	918,051
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	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	780,530	14	772,074	0	0	0	0	14	772,074	145,015	0	0	(133)	(5,509,257)	984	37,691,425

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

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

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

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

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

(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 $ .....

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Rhode Island DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	Claims and Benefits Paid: 8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole							0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	224,663						0	23,465	0	1,284,939		1,308,404
21. Indexed	4,400						0	0	0	424,928		424,928
22. Variable with guarantees	226,417						0	0	0	2,834,697		2,834,697
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	6,173	0	0		6,173
25. Other							0					0
26. Total individual annuities	455,480	0	0	0	0	0	0	29,638	0	4,544,564	0	4,574,202
Group Annuities												
27. Fixed	0						0	0	0	0		0
28. Indexed							0					0
29. Variable with guarantees	0						0	0	0	0		0
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other							0					0
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	(f)						0	XXX	XXX	XXX		0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	(f)						0	XXX	XXX	XXX		0
44. Long-term care (d)	(f)						0	XXX	XXX	XXX		0
45. Other health (d)	(f)						0	XXX	XXX	XXX		0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	455,480 (c)	0	0	0	0	0	0	29,638	0	4,544,564	0	4,574,202

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

NAIC Group Code 0435 BUSINESS IN THE STATE OF Rhode Island DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole								0	0						
3. Term								0	0						
4. Indexed								0	0						
5. Universal								0	0						
6. Universal with secondary guarantees								0	0						
7. Variable								0	0						
8. Variable universal								0	0						
9. Credit								0	0						
10. Other								0	0						
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life															
12. Whole								0	0						
13. Term								0	0						
14. Universal								0	0						
15. Variable								0	0						
16. Variable universal								0	0						
17. Credit								0	0						(a)
18. Other								0	0						
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities															
20. Fixed	16,091	0	0	0	0	0	0	0	0	16,091	0	0	(38)	(810,948)	314	11,422,420
21. Indexed	0	0	0	0	0	0	0	0	0	0	0	0	(2)	(364,566)	29	2,718,218
22. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	(18)	276,837	224	22,131,938
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0	0	0	0	0	0	0	0	0	0	0	(2,718)	1	91,641
25. Other								0	0		0	0	0	(21,663)	2	35,953
26. Total individual annuities	16,091	0	0	0	0	0	0	0	0	16,091	0	0	(58)	(923,058)	570	36,400,170
Group Annuities															
27. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
28. Indexed								0	0		0	0	0	0	0	0
29. Variable with guarantees	865	1	865	0	0	0	0	1	865	0	0	0	(1)	9,517	2	167,656
30. Variable without guarantees								0	0							
31. Life contingent payout								0	0							
32. Other								0	0							
33. Total group annuities	865	1	865	0	0	0	0	1	865	0	0	0	(1)	9,517	2	167,656
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	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	16,956	1	865	0	0	0	0	1	865	16,091	0	0	(59)	(913,541)	572	36,567,826

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

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

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

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

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

(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 $ .....

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF South Carolina DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	Claims and Benefits Paid: 8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole							0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	34,657						0	25,622	0	434,594		460,216
21. Indexed	83,150						0	4,037	0	1,208,521		1,212,558
22. Variable with guarantees	150,194						0	215,353	0	671,506		886,859
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	1,534	0	0		1,534
25. Other							0					0
26. Total individual annuities	268,001	0	0	0	0	0	0	246,546	0	2,314,621	0	2,561,167
Group Annuities												
27. Fixed	0						0	0	0	9,100		9,100
28. Indexed							0					0
29. Variable with guarantees	0						0	0	0	490,604		490,604
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other							0					0
33. Total group annuities	0	0	0	0	0	0	0	0	0	499,704	0	499,704
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	(f)						0	XXX	XXX	XXX		0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	(f)						0	XXX	XXX	XXX		0
44. Long-term care (d)	(f)						0	XXX	XXX	XXX		0
45. Other health (d)	(f)						0	XXX	XXX	XXX		0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	268,001 (c)	0	0	0	0	0	0	246,546	0	2,814,325	0	3,060,871

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

NAIC Group Code 0435 BUSINESS IN THE STATE OF South Carolina DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole								0	0						
3. Term								0	0						
4. Indexed								0	0						
5. Universal								0	0						
6. Universal with secondary guarantees								0	0						
7. Variable								0	0						
8. Variable universal								0	0						
9. Credit								0	0						
10. Other								0	0						
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life															
12. Whole								0	0						
13. Term								0	0						
14. Universal								0	0						
15. Variable								0	0						
16. Variable universal								0	0						
17. Credit								0	0						(a)
18. Other								0	0						
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities															
20. Fixed	32,678	2	26,523	0	0	0	0	2	26,523	21,391	0	0	(14)	(306,687)	146	2,322,537
21. Indexed	(10,737)	0	0	0	0	0	0	0	0	276	0	0	(14)	(833,888)	185	6,601,916
22. Variable with guarantees	29,260	1	29,260	0	0	0	0	1	29,260	0	0	0	(8)	544,600	178	8,357,869
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0	0	0	0	0	0	0	0	0	0	0	(590)	1	26,972
25. Other								0	0		0	0	0	(5,063)	2	19,754
26. Total individual annuities	51,201	3	55,783	0	0	0	0	3	55,783	21,667	0	0	(36)	(601,628)	512	17,329,048
Group Annuities															
27. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	(1)	(5,961)	7	117,558
28. Indexed								0	0		0	0	0	0	0	0
29. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	(2)	(117,844)	9	150,871
30. Variable without guarantees								0	0							
31. Life contingent payout								0	0							
32. Other								0	0							
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0	(3)	(123,805)	16	268,429
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	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	51,201	3	55,783	0	0	0	0	3	55,783	21,667	0	0	(39)	(725,433)	528	17,597,477

(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: $ 0

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

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

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ ..... ; 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 $ .....

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF South Dakota DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	Claims and Benefits Paid: 8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole							0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	200,761						0	15,413	0	5,769		21,182
21. Indexed	2,300						0	0	0	46,736		46,736
22. Variable with guarantees	0						0	0	0	336,803		336,803
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	0	0	0		0
25. Other							0					0
26. Total individual annuities	203,061	0	0	0	0	0	0	15,413	0	389,308	0	404,721
Group Annuities												
27. Fixed	0						0	0	0	0		0
28. Indexed							0					0
29. Variable with guarantees	0						0	0	0	30		30
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other							0					0
33. Total group annuities	0	0	0	0	0	0	0	0	0	30	0	30
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	(f)						0	XXX	XXX	XXX		0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	(f)						0	XXX	XXX	XXX		0
44. Long-term care (d)	(f)						0	XXX	XXX	XXX		0
45. Other health (d)	(f)						0	XXX	XXX	XXX		0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	203,061 (c)	0	0	0	0	0	0	15,413	0	389,338	0	404,751

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

NAIC Group Code 0435 BUSINESS IN THE STATE OF South Dakota DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year								22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life																
1. Industrial								0	0							
2. Whole								0	0							
3. Term								0	0							
4. Indexed								0	0							
5. Universal								0	0							
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life																
12. Whole								0	0							
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities																
20. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	(1)	(2,056)	20	152,228
21. Indexed	0	0	0	0	0	0	0	0	0	0	0	0	(1)	26,024	36	1,036,413
22. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	(1)	(203,102)	3	40,711
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
25. Other								0	0		1	173,026	0	0	1	173,026
26. Total individual annuities	0	0	0	0	0	0	0	0	0	0	1	173,026	(3)	(179,134)	60	1,402,378
Group Annuities																
27. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
28. Indexed								0	0		0	0	0	0	0	0
29. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	1	37,995	2	41,313
30. Variable without guarantees								0	0							
31. Life contingent payout								0	0							
32. Other								0	0							
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0	1	37,995	2	41,313
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	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	0	0	0	0	0	0	0	0	0	0	1	173,026	(2)	(141,139)	62	1,443,691

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

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

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

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

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

(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 $ .....

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Tennessee DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members 3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	Claims and Benefits Paid 8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole							0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	379,054						0	155,989	0	1,636,638		1,792,627
21. Indexed	1,845,610						0	61,562	0	2,603,727		2,665,289
22. Variable with guarantees	57,631						0	0	0	1,266,344		1,266,344
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	472	0	0		472
25. Other							0					0
26. Total individual annuities	2,282,295	0	0	0	0	0	0	218,023	0	5,506,709	0	5,724,732
Group Annuities												
27. Fixed	0						0	0	0	0		0
28. Indexed							0					0
29. Variable with guarantees	0						0	6,533	0	477		7,010
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other							0					0
33. Total group annuities	0	0	0	0	0	0	0	6,533	0	477	0	7,010
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	(f)						0	XXX	XXX	XXX		0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	(f)						0	XXX	XXX	XXX		0
44. Long-term care (d)	(f)						0	XXX	XXX	XXX		0
45. Other health (d)	(f)						0	XXX	XXX	XXX		0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	2,282,295 (c)	0	0	0	0	0	0	224,556	0	5,507,186	0	5,731,742

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

NAIC Group Code 0435 BUSINESS IN THE STATE OF Tennessee DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole								0	0						
3. Term								0	0						
4. Indexed								0	0						
5. Universal								0	0						
6. Universal with secondary guarantees								0	0						
7. Variable								0	0						
8. Variable universal								0	0						
9. Credit								0	0						
10. Other								0	0						
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life															
12. Whole								0	0						
13. Term								0	0						
14. Universal								0	0						
15. Variable								0	0						
16. Variable universal								0	0						
17. Credit								0	0						(a)
18. Other								0	0						
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities															
20. Fixed	93,743	10	52,200	0	0	0	0	10	52,200	41,543	0	0	(64)	(553,546)	1,233	15,592,514
21. Indexed	62,285	8	64,757	0	0	0	0	8	64,757	7,008	0	0	(79)	158,372	1,873	32,554,221
22. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	(13)	(432,087)	239	5,873,340
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0	0	0	0	0	0	0	0	0	0	0	(798)	2	4,576
25. Other								0	0		0	0	0	(20,520)	5	78,705
26. Total individual annuities	156,028	18	116,957	0	0	0	0	18	116,957	48,551	0	0	(156)	(848,579)	3,352	54,103,356
Group Annuities															
27. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	0	785	4	45,144
28. Indexed								0	0		0	0	0	0	0	0
29. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	(1)	108,774	6	834,363
30. Variable without guarantees								0	0							
31. Life contingent payout								0	0							
32. Other								0	0							
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0	(1)	109,559	10	879,507
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	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	156,028	18	116,957	0	0	0	0	18	116,957	48,551	0	0	(157)	(739,020)	3,362	54,982,863

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

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

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

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

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

(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 $ .....

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Texas DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	Claims and Benefits Paid: 8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole							0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	1,924,207						0	1,463,160	0	15,280,207		16,743,367
21. Indexed	2,412,566						0	462,353	0	13,555,628		14,017,981
22. Variable with guarantees	112,590						0	324,226	0	2,527,351		2,851,577
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	128,080	0	0		128,080
25. Other							0					0
26. Total individual annuities	4,449,363	0	0	0	0	0	0	2,377,819	0	31,363,186	0	33,741,005
Group Annuities												
27. Fixed	63,051						0	9,245	0	288,359		297,604
28. Indexed							0					0
29. Variable with guarantees	86,119						0	0	0	1,011,310		1,011,310
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other							0					0
33. Total group annuities	149,170	0	0	0	0	0	0	9,245	0	1,299,669	0	1,308,914
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	(f)						0	XXX	XXX	XXX		0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	(f)						0	XXX	XXX	XXX		0
44. Long-term care (d)	(f)						0	XXX	XXX	XXX		0
45. Other health (d)	(f)						0	XXX	XXX	XXX		0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	4,598,533 (c)	0	0	0	0	0	0	2,387,064	0	32,662,855	0	35,049,919

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

NAIC Group Code 0435 BUSINESS IN THE STATE OF Texas DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole								0	0						
3. Term								0	0						
4. Indexed								0	0						
5. Universal								0	0						
6. Universal with secondary guarantees								0	0						
7. Variable								0	0						
8. Variable universal								0	0						
9. Credit								0	0						
10. Other								0	0						
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life															
12. Whole								0	0						
13. Term								0	0						
14. Universal								0	0						
15. Variable								0	0						
16. Variable universal								0	0						
17. Credit								0	0						(a)
18. Other								0	0						
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities															
20. Fixed	685,752	58	1,022,715	0	0	0	0	58	1,022,715	430,535	0	0	(622)	(10,164,271)	9,421	137,532,620
21. Indexed	475,422	22	461,662	0	0	0	0	22	461,662	378,681	0	0	(361)	(8,473,984)	4,670	97,801,206
22. Variable with guarantees	50,303	2	50,303	0	0	0	0	2	50,303	0	0	0	(66)	504,745	557	24,626,590
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0	0	0	0	0	0	0	0	0	0	0	(90,259)	19	1,053,718
25. Other								0	0		5	141,738	(13)	(348,410)	61	1,349,288
26. Total individual annuities	1,211,477	82	1,534,680	0	0	0	0	82	1,534,680	809,216	5	141,738	(1,062)	(18,572,179)	14,728	262,363,422
Group Annuities															
27. Fixed	995	2	3,025	0	0	0	0	2	3,025	0	0	0	(27)	(155,745)	568	3,701,899
28. Indexed								0	0		0	0	0	0	0	0
29. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	(10)	(581,502)	87	2,608,184
30. Variable without guarantees								0	0							
31. Life contingent payout								0	0							
32. Other								0	0							
33. Total group annuities	995	2	3,025	0	0	0	0	2	3,025	0	0	0	(37)	(737,247)	655	6,310,083
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	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	1,212,472	84	1,537,705	0	0	0	0	84	1,537,705	809,216	5	141,738	(1,099)	(19,309,426)	15,383	268,673,505

(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: $ 0

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

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

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ ..... ; 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 $ .....

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Utah DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	Claims and Benefits Paid: 8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole							0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	48,733						0	145,932	0	1,163,038		1,308,970
21. Indexed	233,626						0	32,724	0	2,295,761		2,328,485
22. Variable with guarantees	81,665						0	0	0	2,780,338		2,780,338
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	34,164	0	0		34,164
25. Other							0					0
26. Total individual annuities	364,024	0	0	0	0	0	0	212,820	0	6,239,137	0	6,451,957
Group Annuities												
27. Fixed	0						0	0	0	0		0
28. Indexed							0					0
29. Variable with guarantees	324,232						0	25,877	0	276,597		302,474
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other							0					0
33. Total group annuities	324,232	0	0	0	0	0	0	25,877	0	276,597	0	302,474
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	(f)						0	XXX	XXX	XXX		0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	(f)						0	XXX	XXX	XXX		0
44. Long-term care (d)	(f)						0	XXX	XXX	XXX		0
45. Other health (d)	(f)						0	XXX	XXX	XXX		0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	688,256 (c)	0	0	0	0	0	0	238,697	0	6,515,734	0	6,754,431

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

NAIC Group Code 0435 BUSINESS IN THE STATE OF Utah DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole								0	0						
3. Term								0	0						
4. Indexed								0	0						
5. Universal								0	0						
6. Universal with secondary guarantees								0	0						
7. Variable								0	0						
8. Variable universal								0	0						
9. Credit								0	0						
10. Other								0	0						
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life															
12. Whole								0	0						
13. Term								0	0						
14. Universal								0	0						
15. Variable								0	0						
16. Variable universal								0	0						
17. Credit								0	0						(a)
18. Other								0	0						
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities															
20. Fixed	61,764	4	61,764	0	0	0	0	4	61,764	0	0	0	(34)	(960,143)	339	6,903,041
21. Indexed	60,119	5	28,384	0	0	0	0	5	28,384	31,735	0	0	(55)	(1,570,122)	617	17,076,226
22. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	(25)	(1,507,118)	157	9,185,812
23. Variable without guarantees								0	0							
24. Life contingent payout	17,719	1	17,719	0	0	0	0	1	17,719	0	0	0	(2)	(43,360)	6	113,885
25. Other								0	0		0	0	(2)	(86,099)	6	173,288
26. Total individual annuities	139,602	10	107,867	0	0	0	0	10	107,867	31,735	0	0	(118)	(4,166,842)	1,125	33,452,252
Group Annuities															
27. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	0	10	1	349
28. Indexed								0	0		0	0	0	0	0	0
29. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	(12)	164,433	114	3,511,199
30. Variable without guarantees								0	0							
31. Life contingent payout								0	0							
32. Other								0	0							
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0	(12)	164,443	115	3,511,548
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	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	139,602	10	107,867	0	0	0	0	10	107,867	31,735	0	0	(130)	(4,002,399)	1,240	36,963,800

(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: $ 0

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

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

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ ..... ; 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 $ .....

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Vermont DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	Claims and Benefits Paid: 8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole							0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	37,038						0	68,108	0	34,410		102,518
21. Indexed	5,000						0	5,958	0	22,141		28,099
22. Variable with guarantees	0						0	0	0	3,735		3,735
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	0	0	0		0
25. Other							0					0
26. Total individual annuities	42,038	0	0	0	0	0	0	74,066	0	60,286	0	134,352
Group Annuities												
27. Fixed	0						0	0	0	0		0
28. Indexed							0					0
29. Variable with guarantees	0						0	0	0	0		0
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other							0					0
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	(f)						0	XXX	XXX	XXX		0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	(f)						0	XXX	XXX	XXX		0
44. Long-term care (d)	(f)						0	XXX	XXX	XXX		0
45. Other health (d)	(f)						0	XXX	XXX	XXX		0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	42,038 (c)	0	0	0	0	0	0	74,066	0	60,286	0	134,352

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

NAIC Group Code 0435 BUSINESS IN THE STATE OF Vermont DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole								0	0						
3. Term								0	0						
4. Indexed								0	0						
5. Universal								0	0						
6. Universal with secondary guarantees								0	0						
7. Variable								0	0						
8. Variable universal								0	0						
9. Credit								0	0						
10. Other								0	0						
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life															
12. Whole								0	0						
13. Term								0	0						
14. Universal								0	0						
15. Variable								0	0						
16. Variable universal								0	0						
17. Credit								0	0						(a)
18. Other								0	0						
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities															
20. Fixed	(26)	1	4,485	0	0	0	0	1	4,485	0	0	0	(1)	(15,060)	21	419,285
21. Indexed	0	0	0	0	0	0	0	0	0	0	0	0	0	(11,818)	6	267,932
22. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	(1)	(76,526)	3	236,775
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
25. Other								0	0		0	0	0	0	0	0
26. Total individual annuities	(26)	1	4,485	0	0	0	0	1	4,485	0	0	0	(2)	(103,404)	30	923,992
Group Annuities															
27. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
28. Indexed								0	0		0	0	0	0	0	0
29. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	(1)	(1,541)	1	4,006
30. Variable without guarantees								0	0							
31. Life contingent payout								0	0							
32. Other								0	0							
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0	(1)	(1,541)	1	4,006
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	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	(26)	1	4,485	0	0	0	0	1	4,485	0	0	0	(3)	(104,945)	31	927,998

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

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

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

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

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

(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 ANNUITY INVESTORS LIFE INSURANCE COMPANY

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Virginia DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	Claims and Benefits Paid: 8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole							0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	768,672						0	82,752	0	2,017,477		2,100,229
21. Indexed	40,937						0	13,537	0	333,348		346,885
22. Variable with guarantees	0						0	0	0	630,279		630,279
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	961	0	0		961
25. Other							0					0
26. Total individual annuities	809,609	0	0	0	0	0	0	97,250	0	2,981,104	0	3,078,354
Group Annuities												
27. Fixed	0						0	23,683	0	0		23,683
28. Indexed							0					0
29. Variable with guarantees	0						0	0	0	59,943		59,943
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other							0					0
33. Total group annuities	0	0	0	0	0	0	0	23,683	0	59,943	0	83,626
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	(f)						0	XXX	XXX	XXX		0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	(f)						0	XXX	XXX	XXX		0
44. Long-term care (d)	(f)						0	XXX	XXX	XXX		0
45. Other health (d)	(f)						0	XXX	XXX	XXX		0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	809,609 (c)	0	0	0	0	0	0	120,933	0	3,041,047	0	3,161,980

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

NAIC Group Code 0435 BUSINESS IN THE STATE OF Virginia DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole								0	0						
3. Term								0	0						
4. Indexed								0	0						
5. Universal								0	0						
6. Universal with secondary guarantees								0	0						
7. Variable								0	0						
8. Variable universal								0	0						
9. Credit								0	0						
10. Other								0	0						
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life															
12. Whole								0	0						
13. Term								0	0						
14. Universal								0	0						
15. Variable								0	0						
16. Variable universal								0	0						
17. Credit								0	0						(a)
18. Other								0	0						
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities															
20. Fixed	124,284	3	81,833	0	0	0	0	3	81,833	44,751	0	0	(52)	(1,312,417)	553	14,699,118
21. Indexed	65,755	0	0	0	0	0	0	0	0	68,773	0	0	(15)	(226,157)	205	4,811,270
22. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	(5)	(574,219)	40	892,609
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0	0	0	0	0	0	0	0	0	0	0	(181)	1	3,145
25. Other								0	0		1	274,225	(1)	(14,716)	2	352,069
26. Total individual annuities	190,039	3	81,833	0	0	0	0	3	81,833	113,524	1	274,225	(73)	(2,127,690)	801	20,758,211
Group Annuities															
27. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	0	1,140	8	106,949
28. Indexed								0	0		0	0	0	0	0	0
29. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	(1)	1,175,618	25	2,310,558
30. Variable without guarantees								0	0							
31. Life contingent payout								0	0							
32. Other								0	0							
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0	(1)	1,176,758	33	2,417,507
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	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	190,039	3	81,833	0	0	0	0	3	81,833	113,524	1	274,225	(74)	(950,932)	834	23,175,718

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

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

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

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

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

(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 $ .....

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Washington DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	Claims and Benefits Paid: 8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole							0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	675,600						0	344,823	0	1,308,182		1,653,005
21. Indexed	399,487						0	13,018	0	3,617,892		3,630,910
22. Variable with guarantees	111,607						0	135,078	0	3,580,964		3,716,042
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	96,209	0	0		96,209
25. Other							0					0
26. Total individual annuities	1,186,694	0	0	0	0	0	0	589,128	0	8,507,038	0	9,096,166
Group Annuities												
27. Fixed	0						0	0	0	0		0
28. Indexed							0					0
29. Variable with guarantees	0						0	0	0	69,367		69,367
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other							0					0
33. Total group annuities	0	0	0	0	0	0	0	0	0	69,367	0	69,367
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	(f)						0	XXX	XXX	XXX		0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	(f)						0	XXX	XXX	XXX		0
44. Long-term care (d)	(f)						0	XXX	XXX	XXX		0
45. Other health (d)	(f)						0	XXX	XXX	XXX		0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	1,186,694 (c)	0	0	0	0	0	0	589,128	0	8,576,405	0	9,165,533

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

NAIC Group Code 0435 BUSINESS IN THE STATE OF Washington DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole								0	0						
3. Term								0	0						
4. Indexed								0	0						
5. Universal								0	0						
6. Universal with secondary guarantees								0	0						
7. Variable								0	0						
8. Variable universal								0	0						
9. Credit								0	0						
10. Other								0	0						
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life															
12. Whole								0	0						
13. Term								0	0						
14. Universal								0	0						
15. Variable								0	0						
16. Variable universal								0	0						
17. Credit								0	0						(a)
18. Other								0	0						
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities															
20. Fixed	115,380	4	115,380	0	0	0	0	4	115,380	0	0	0	(59)	(953,189)	840	13,825,698
21. Indexed	(14,190)	0	0	0	0	0	0	0	0	16,528	0	0	(44)	(2,438,619)	561	18,275,934
22. Variable with guarantees	67,127	1	67,127	0	0	0	0	1	67,127	0	0	0	(31)	556,391	387	32,837,475
23. Variable without guarantees								0	0							
24. Life contingent payout	10,595	1	10,595	0	0	0	0	1	10,595	0	0	0	(3)	(88,798)	6	579,966
25. Other								0	0		3	441,782	(3)	(122,347)	21	1,006,903
26. Total individual annuities	178,912	6	193,102	0	0	0	0	6	193,102	16,528	3	441,782	(140)	(3,046,562)	1,815	66,525,976
Group Annuities															
27. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
28. Indexed								0	0		0	0	0	0	0	0
29. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	(3)	(68,047)	15	382,201
30. Variable without guarantees								0	0							
31. Life contingent payout								0	0							
32. Other								0	0							
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0	(3)	(68,047)	15	382,201
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	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	178,912	6	193,102	0	0	0	0	6	193,102	16,528	3	441,782	(143)	(3,114,609)	1,830	66,908,177

(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: $ 0

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

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

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ ..... ; 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 $ .....

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF West Virginia DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	Claims and Benefits Paid: 8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole							0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	18,797						0	0	0	38,367		38,367
21. Indexed	33,667						0	16,796	0	70,989		87,785
22. Variable with guarantees	0						0	0	0	150		150
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	0	0	0		0
25. Other							0					0
26. Total individual annuities	52,464	0	0	0	0	0	0	16,796	0	109,506	0	126,302
Group Annuities												
27. Fixed	0						0	0	0	0		0
28. Indexed							0					0
29. Variable with guarantees	0						0	0	0	30		30
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other							0					0
33. Total group annuities	0	0	0	0	0	0	0	0	0	30	0	30
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	(f)						0	XXX	XXX	XXX		0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	(f)						0	XXX	XXX	XXX		0
44. Long-term care (d)	(f)						0	XXX	XXX	XXX		0
45. Other health (d)	(f)						0	XXX	XXX	XXX		0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	52,464 (c)	0	0	0	0	0	0	16,796	0	109,536	0	126,332

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

NAIC Group Code 0435 BUSINESS IN THE STATE OF West Virginia DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life																
1. Industrial								0	0							
2. Whole								0	0							
3. Term								0	0							
4. Indexed								0	0							
5. Universal								0	0							
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life																
12. Whole								0	0							
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities																
20. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	(2)	(13,003)	24	679,075
21. Indexed	0	0	0	0	0	0	0	0	0	0	0	0	1	(21,055)	34	620,243
22. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	0	19,459	7	163,954
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
25. Other								0	0	0	0	0	0	0	0	0
26. Total individual annuities	0	0	0	0	0	0	0	0	0	0	0	0	(1)	(14,599)	65	1,463,272
Group Annuities																
27. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
28. Indexed								0	0	0	0	0	0	0	0	0
29. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	0	2,187	2	18,681
30. Variable without guarantees								0	0							
31. Life contingent payout								0	0							
32. Other								0	0							
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0	0	2,187	2	18,681
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	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	0	0	0	0	0	0	0	0	0	0	0	0	(1)	(12,412)	67	1,481,953

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

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

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

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

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

(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 ANNUITY INVESTORS LIFE INSURANCE COMPANY

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Wisconsin DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole							0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	22,852						0	50,254	0	188,449		238,703
21. Indexed	44,467						0	150,527	0	143,782		294,309
22. Variable with guarantees	1,680						0	0	0	9,869		9,869
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	10,756	0	0		10,756
25. Other							0					0
26. Total individual annuities	68,999	0	0	0	0	0	0	211,537	0	342,100	0	553,637
Group Annuities												
27. Fixed	0						0	0	0	0		0
28. Indexed							0					0
29. Variable with guarantees	0						0	0	0	186,497		186,497
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other							0					0
33. Total group annuities	0	0	0	0	0	0	0	0	0	186,497	0	186,497
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	(f)						0	XXX	XXX	XXX		0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	(f)						0	XXX	XXX	XXX		0
44. Long-term care (d)	(f)						0	XXX	XXX	XXX		0
45. Other health (d)	(f)						0	XXX	XXX	XXX		0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	68,999 (c)	0	0	0	0	0	0	211,537	0	528,597	0	740,134

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

NAIC Group Code 0435 BUSINESS IN THE STATE OF Wisconsin DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole								0	0						
3. Term								0	0						
4. Indexed								0	0						
5. Universal								0	0						
6. Universal with secondary guarantees								0	0						
7. Variable								0	0						
8. Variable universal								0	0						
9. Credit								0	0						
10. Other								0	0						
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life															
12. Whole								0	0						
13. Term								0	0						
14. Universal								0	0						
15. Variable								0	0						
16. Variable universal								0	0						
17. Credit								0	0						(a)
18. Other								0	0						
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities															
20. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	(6)	(170,033)	68	1,223,049
21. Indexed	150,527	2	150,527	0	0	0	0	2	150,527	0	0	0	(5)	(197,007)	90	1,665,397
22. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	(2)	91,925	28	1,031,704
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0	0	0	0	0	0	0	0	0	0	0	(2,625)	2	38,174
25. Other								0	0		0	0	(3)	(44,854)	6	103,113
26. Total individual annuities	150,527	2	150,527	0	0	0	0	2	150,527	0	0	0	(16)	(322,594)	194	4,061,437
Group Annuities															
27. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	0	202	4	6,932
28. Indexed								0	0		0	0	0	0	0	0
29. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	(4)	(148,424)	6	194,147
30. Variable without guarantees								0	0							
31. Life contingent payout								0	0							
32. Other								0	0							
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0	(4)	(148,222)	10	201,079
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	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	150,527	2	150,527	0	0	0	0	2	150,527	0	0	0	(20)	(470,816)	204	4,262,516

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

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

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

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

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

(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 $ .....

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Wyoming DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	Claims and Benefits Paid: 8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole							0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	24,000						0	4,267	0	16,298		20,565
21. Indexed	1,321						0	3,189	0	166,957		170,146
22. Variable with guarantees	0						0	0	0	90		90
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	22,922	0	0		22,922
25. Other							0					0
26. Total individual annuities	25,321	0	0	0	0	0	0	30,378	0	183,345	0	213,723
Group Annuities												
27. Fixed	0						0	0	0	0		0
28. Indexed							0					0
29. Variable with guarantees	0						0	0	0	30		30
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other							0					0
33. Total group annuities	0	0	0	0	0	0	0	0	0	30	0	30
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	(f)						0	XXX	XXX	XXX		0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	(f)						0	XXX	XXX	XXX		0
44. Long-term care (d)	(f)						0	XXX	XXX	XXX		0
45. Other health (d)	(f)						0	XXX	XXX	XXX		0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	25,321 (c)	0	0	0	0	0	0	30,378	0	183,375	0	213,753

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

NAIC Group Code 0435 BUSINESS IN THE STATE OF Wyoming DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life																
1. Industrial								0	0							
2. Whole								0	0							
3. Term								0	0							
4. Indexed								0	0							
5. Universal								0	0							
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life																
12. Whole								0	0							
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities																
20. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	(1)	31,369	20	866,623
21. Indexed	0	0	0	0	0	0	0	0	0	0	0	0	(2)	(146,029)	17	385,024
22. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	0	14,869	4	117,671
23. Variable without guarantees								0	0							
24. Life contingent payout	18,050	1	18,050	0	0	0	0	1	18,050	0	0	0	(1)	(20,123)	0	0
25. Other								0	0		0	0	1	17,359	1	17,359
26. Total individual annuities	18,050	1	18,050	0	0	0	0	1	18,050	0	0	0	(3)	(102,555)	42	1,386,677
Group Annuities																
27. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
28. Indexed								0	0		0	0	0	0	0	0
29. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	0	5,188	4	40,787
30. Variable without guarantees								0	0							
31. Life contingent payout								0	0							
32. Other								0	0							
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0	0	5,188	4	40,787
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	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	18,050	1	18,050	0	0	0	0	1	18,050	0	0	0	(3)	(97,367)	46	1,427,464

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

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

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

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

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

(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 $ .....

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF American Samoa DURING THE YEAR 2025 NAIC Company Code 93661

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

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

NAIC Group Code 0435 BUSINESS IN THE STATE OF American Samoa DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole								0	0						
3. Term								0	0						
4. Indexed								0	0						
5. Universal								0	0						
6. Universal with secondary guarantees								0	0						
7. Variable								0	0						
8. Variable universal								0	0						
9. Credit								0	0						
10. Other								0	0						
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life															
12. Whole								0	0						
13. Term								0	0						
14. Universal								0	0						
15. Variable								0	0						
16. Variable universal								0	0						
17. Credit								0	0						(a)
18. Other								0	0						
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities															
20. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
21. Indexed	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
22. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
23. Variable without guarantees								0	0						
24. Life contingent payout	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
25. Other								0	0	0	0	0	0	0	0
26. Total individual annuities	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities															
27. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
28. Indexed								0	0	0	0	0	0	0	0
29. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
30. Variable without guarantees								0	0						
31. Life contingent payout								0	0						
32. Other								0	0						
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health															
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
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	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

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

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

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

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

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

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ ..... ; 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 $ .....

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Guam DURING THE YEAR 2025 NAIC Company Code 93661

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

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

NAIC Group Code 0435 BUSINESS IN THE STATE OF Guam DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole								0	0						
3. Term								0	0						
4. Indexed								0	0						
5. Universal								0	0						
6. Universal with secondary guarantees								0	0						
7. Variable								0	0						
8. Variable universal								0	0						
9. Credit								0	0						
10. Other								0	0						
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life															
12. Whole								0	0						
13. Term								0	0						
14. Universal								0	0						
15. Variable								0	0						
16. Variable universal								0	0						
17. Credit								0	0						(a)
18. Other								0	0						
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities															
20. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
21. Indexed	0	0	0	0	0	0	0	0	0	0	0	0	175	1	6,034	
22. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
25. Other								0	0	0	0	0	0	0	0	0
26. Total individual annuities	0	0	0	0	0	0	0	0	0	0	0	0	175	1	6,034	
Group Annuities															
27. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
28. Indexed								0	0	0	0	0	0	0	0	0
29. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
30. Variable without guarantees								0	0							
31. Life contingent payout								0	0							
32. Other								0	0							
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health															
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
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	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	0	0	0	0	0	0	0	0	0	0	0	0	175	1	6,034	

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

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

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

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

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

(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 $ .....

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Puerto Rico DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	Claims and Benefits Paid: 8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole							0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	0						0	0	0	0		0
21. Indexed	0						0	0	0	15,083		15,083
22. Variable with guarantees	0						0	0	0	30		30
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	0	0	0		0
25. Other							0					0
26. Total individual annuities	0	0	0	0	0	0	0	0	0	15,113	0	15,113
Group Annuities												
27. Fixed	0						0	0	0	0		0
28. Indexed							0					0
29. Variable with guarantees	0						0	0	0	0		0
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other							0					0
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	(f)						0	XXX	XXX	XXX		0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H (d)	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	(f)						0	XXX	XXX	XXX		0
44. Long-term care (d)	(f)						0	XXX	XXX	XXX		0
45. Other health (d)	(f)						0	XXX	XXX	XXX		0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	0 (c)	0	0	0	0	0	0	0	0	15,113	0	15,113

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

NAIC Group Code 0435 BUSINESS IN THE STATE OF Puerto Rico DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole								0	0						
3. Term								0	0						
4. Indexed								0	0						
5. Universal								0	0						
6. Universal with secondary guarantees								0	0						
7. Variable								0	0						
8. Variable universal								0	0						
9. Credit								0	0						
10. Other								0	0						
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life															
12. Whole								0	0						
13. Term								0	0						
14. Universal								0	0						
15. Variable								0	0						
16. Variable universal								0	0						
17. Credit								0	0						(a)
18. Other								0	0						
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities															
20. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	0	(7,534)	4	35,756
21. Indexed	0	0	0	0	0	0	0	0	0	0	0	0	1	13,352	5	113,389
22. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	0	2,166	1	15,360
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
25. Other								0	0	0	0	0	0	0	0
26. Total individual annuities	0	0	0	0	0	0	0	0	0	0	0	0	1	7,984	10	164,505
Group Annuities															
27. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
28. Indexed								0	0	0	0	0	0	0	0
29. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
30. Variable without guarantees								0	0						
31. Life contingent payout								0	0						
32. Other								0	0						
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health															
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
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	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	0	0	0	0	0	0	0	0	0	0	0	0	1	7,984	10	164,505

(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: $ 0

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

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

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ ..... ; 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 $ .....

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF U.S. Virgin Islands DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole							0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other							0					0
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other							0					0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	0						0	5,961	0	0		5,961
21. Indexed	0						0	0	0	0		0
22. Variable with guarantees	0						0	0	0	0		0
23. Variable without guarantees							0					0
24. Life contingent payout	0						0	0	0	0		0
25. Other							0					0
26. Total individual annuities	0	0	0	0	0	0	0	5,961	0	0	0	5,961
Group Annuities												
27. Fixed	0						0	0	0	0		0
28. Indexed							0					0
29. Variable with guarantees	0						0	0	0	0		0
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other							0					0
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual (d)	(f)						0	XXX	XXX	XXX		0
35. Comprehensive group (d)	(f)						0	XXX	XXX	XXX		0
36. Medicare supplement (d)	(f)						0	XXX	XXX	XXX		0
37. Vision only (d)	(f)						0	XXX	XXX	XXX		0
38. Dental only (d)	(f)						0	XXX	XXX	XXX		0
39. Federal employees health benefits plan (d)	(f)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d)	(e,f)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)	(f)						0	XXX	XXX	XXX		0
42. Credit A&H	(f)						0	XXX	XXX	XXX		0
43. Disability income (d)	(f)						0	XXX	XXX	XXX		0
44. Long-term care (d)	(f)						0	XXX	XXX	XXX		0
45. Other health (d)	(f)						0	XXX	XXX	XXX		0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	0 (c)	0	0	0	0	0	0	5,961	0	0	0	5,961

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

NAIC Group Code 0435 BUSINESS IN THE STATE OF U.S. Virgin Islands DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year								22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life																
1. Industrial								0	0							
2. Whole								0	0							
3. Term								0	0							
4. Indexed								0	0							
5. Universal								0	0							
6. Universal with secondary guarantees								0	0							
7. Variable								0	0							
8. Variable universal								0	0							
9. Credit								0	0							
10. Other								0	0							
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life																
12. Whole								0	0							
13. Term								0	0							
14. Universal								0	0							
15. Variable								0	0							
16. Variable universal								0	0							
17. Credit								0	0							(a)
18. Other								0	0							
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities																
20. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	0	35	1	1,613
21. Indexed	0	0	0	0	0	0	0	0	0	0	0	0	0	30	1	2,204
22. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	0	1,235	1	11,043
23. Variable without guarantees								0	0							
24. Life contingent payout	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
25. Other								0	0		0	0	0	0	0	0
26. Total individual annuities	0	0	0	0	0	0	0	0	0	0	0	0	0	1,300	3	14,860
Group Annuities																
27. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
28. Indexed								0	0		0	0	0	0	0	0
29. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
30. Variable without guarantees								0	0							
31. Life contingent payout								0	0							
32. Other								0	0							
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health																
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
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	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	0	0	0	0	0	0	0	0	0	0	0	0	0	1,300	3	14,860

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

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

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

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

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

(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 $ .....

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Northern Mariana Islands DURING THE YEAR 2025 NAIC Company Code 93661

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

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

NAIC Group Code 0435 BUSINESS IN THE STATE OF Northern Mariana Islands DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole								0	0						
3. Term								0	0						
4. Indexed								0	0						
5. Universal								0	0						
6. Universal with secondary guarantees								0	0						
7. Variable								0	0						
8. Variable universal								0	0						
9. Credit								0	0						
10. Other								0	0						
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life															
12. Whole								0	0						
13. Term								0	0						
14. Universal								0	0						
15. Variable								0	0						
16. Variable universal								0	0						
17. Credit								0	0						(a)
18. Other								0	0						
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities															
20. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
21. Indexed	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
22. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
23. Variable without guarantees								0	0						
24. Life contingent payout	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
25. Other								0	0	0	0	0	0	0	0
26. Total individual annuities	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities															
27. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
28. Indexed								0	0	0	0	0	0	0	0
29. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
30. Variable without guarantees								0	0						
31. Life contingent payout								0	0						
32. Other								0	0						
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health															
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
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	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

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

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

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

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

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

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ ..... ; 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 $ .....

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Canada DURING THE YEAR 2025 NAIC Company Code 93661

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

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

NAIC Group Code 0435 BUSINESS IN THE STATE OF Canada DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year							22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life															
1. Industrial								0	0						
2. Whole								0	0						
3. Term								0	0						
4. Indexed								0	0						
5. Universal								0	0						
6. Universal with secondary guarantees								0	0						
7. Variable								0	0						
8. Variable universal								0	0						
9. Credit								0	0						
10. Other								0	0						
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life															
12. Whole								0	0						
13. Term								0	0						
14. Universal								0	0						
15. Variable								0	0						
16. Variable universal								0	0						
17. Credit								0	0						(a)
18. Other								0	0						
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities															
20. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
21. Indexed	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
22. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
23. Variable without guarantees								0	0						
24. Life contingent payout	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
25. Other								0	0	0	0	0	0	0	0
26. Total individual annuities	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities															
27. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
28. Indexed								0	0	0	0	0	0	0	0
29. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
30. Variable without guarantees								0	0						
31. Life contingent payout								0	0						
32. Other								0	0						
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health															
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
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	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

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

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

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

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

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

(f) For health business report Direct Premiums Earned: Comprehensive Individual $ ..... ; Comprehensive Group $ ..... ; Medicare Supplement $ ..... ; 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 $ .....

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Other Aliens DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	Claims and Benefits Paid: 8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial	0	0	0	0	0	0	0	0	0	0	0	0
2. Whole	0	0	0	0	0	0	0	0	0	0	0	0
3. Term	0	0	0	0	0	0	0	0	0	0	0	0
4. Indexed	0	0	0	0	0	0	0	0	0	0	0	0
5. Universal	0	0	0	0	0	0	0	0	0	0	0	0
6. Universal with secondary guarantees	0	0	0	0	0	0	0	0	0	0	0	0
7. Variable	0	0	0	0	0	0	0	0	0	0	0	0
8. Variable universal	0	0	0	0	0	0	0	0	0	0	0	0
9. Credit	0	0	0	0	0	0	0	0	0	0	0	0
10. Other	0	0	0	0	0	0	0	0	0	0	0	0
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole	0	0	0	0	0	0	0	0	0	0	0	0
13. Term	0	0	0	0	0	0	0	0	0	0	0	0
14. Universal	0	0	0	0	0	0	0	0	0	0	0	0
15. Variable	0	0	0	0	0	0	0	0	0	0	0	0
16. Variable universal	0	0	0	0	0	0	0	0	0	0	0	0
17. Credit	0	0	0	0	0	0	0	0	0	0	0	0
18. Other	0	0	0	0	0	0	0	0	0	0	0	0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	0	0	0	0	0	0	0	13,697	0	47,868	0	61,565
21. Indexed	0	0	0	0	0	0	0	0	0	7,108	0	7,108
22. Variable with guarantees	0	0	0	0	0	0	0	0	0	115	0	115
23. Variable without guarantees	0	0	0	0	0	0	0	0	0	0	0	0
24. Life contingent payout	0	0	0	0	0	0	0	0	0	0	0	0
25. Other	0	0	0	0	0	0	0	0	0	0	0	0
26. Total individual annuities	0	0	0	0	0	0	0	13,697	0	55,091	0	68,788
Group Annuities												
27. Fixed	0	0	0	0	0	0	0	0	0	0	0	0
28. Indexed	0	0	0	0	0	0	0	0	0	0	0	0
29. Variable with guarantees	0	0	0	0	0	0	0	0	0	136,283	0	136,283
30. Variable without guarantees	0	0	0	0	0	0	0	0	0	0	0	0
31. Life contingent payout	0	0	0	0	0	0	0	0	0	0	0	0
32. Other	0	0	0	0	0	0	0	0	0	0	0	0
33. Total group annuities	0	0	0	0	0	0	0	0	0	136,283	0	136,283
Accident and Health												
34. Comprehensive individual (d)	0 (f)	0	0	0	0	0	0	XXX	XXX	XXX	0	0
35. Comprehensive group (d)	0 (f)	0	0	0	0	0	0	XXX	XXX	XXX	0	0
36. Medicare supplement (d)	0 (f)	0	0	0	0	0	0	XXX	XXX	XXX	0	0
37. Vision only (d)	0 (f)	0	0	0	0	0	0	XXX	XXX	XXX	0	0
38. Dental only (d)	0 (f)	0	0	0	0	0	0	XXX	XXX	XXX	0	0
39. Federal employees health benefits plan (d)	0 (f)	0	0	0	0	0	0	XXX	XXX	XXX	0	0
40. Title XVIII Medicare (d)	0 (e,f)	0	0	0	0	0	0	XXX	XXX	XXX	0	0
41. Title XIX Medicaid (d)	0 (f)	0	0	0	0	0	0	XXX	XXX	XXX	0	0
42. Credit A&H	0 (f)	0	0	0	0	0	0	XXX	XXX	XXX	0	0
43. Disability income (d)	0 (f)	0	0	0	0	0	0	XXX	XXX	XXX	0	0
44. Long-term care (d)	0 (f)	0	0	0	0	0	0	XXX	XXX	XXX	0	0
45. Other health (d)	0 (f)	0	0	0	0	0	0	XXX	XXX	XXX	0	0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	0 (c)	0	0	0	0	0	0	13,697	0	191,374	0	205,071

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

NAIC Group Code 0435 BUSINESS IN THE STATE OF Other Aliens DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year								22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life																
1. Industrial	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2. Whole	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3. Term	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4. Indexed	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5. Universal	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
6. Universal with secondary guarantees	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
7. Variable	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
8. Variable universal	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
9. Credit	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Other	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life																
12. Whole	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
13. Term	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
14. Universal	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15. Variable	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
16. Variable universal	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
17. Credit	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0 (a)
18. Other	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities																
20. Fixed	120,659	0	0	0	0	0	0	0	0	120,659	0	0	(53)	(2,697,561)	98	136,447
21. Indexed	0	0	0	0	0	0	0	0	0	0	0	0	(81)	(4,209,782)	19	350,218
22. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	(61)	(6,424,604)	10	218,485
23. Variable without guarantees	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
24. Life contingent payout	0	0	0	0	0	0	0	0	0	0	0	0	(2)	(32,577)	0	0
25. Other	0	0	0	0	0	0	0	0	0	0	0	0	(5)	(106,412)	3	39,174
26. Total individual annuities	120,659	0	0	0	0	0	0	0	0	120,659	0	0	(202)	(13,470,936)	130	744,324
Group Annuities																
27. Fixed	0	0	0	0	0	0	0	0	0	0	0	0	(2)	(31,493)	1	3,526
28. Indexed	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
29. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0	(16)	(2,521,818)	4	449,575
30. Variable without guarantees	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
31. Life contingent payout	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
32. Other	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
33. Total group annuities	0	0	0	0	0	0	0	0	0	0	0	0	(18)	(2,553,311)	5	453,101
Accident and Health																
34. Comprehensive individual (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
35. Comprehensive group (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
36. Medicare supplement (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
37. Vision only (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
38. Dental only (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
39. Federal employees health benefits plan (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
40. Title XVIII Medicare (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
41. Title XIX Medicaid (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
42. Credit A&H	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
43. Disability income (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
44. Long-term care (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
45. Other health (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
46. Total accident and health	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	120,659	0	0	0	0	0	0	0	0	120,659	0	0	(220)	(16,024,247)	135	1,197,425

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

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

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

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

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

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

LIFE INSURANCE (STATE PAGE)[b]

NAIC Group Code 0435 BUSINESS IN THE STATE OF Grand Total DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members: 3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	Claims and Benefits Paid: 8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial	0	0	0	0	0	0	0	0	0	0	0	0
2. Whole	0	0	0	0	0	0	0	0	0	0	0	0
3. Term	0	0	0	0	0	0	0	0	0	0	0	0
4. Indexed	0	0	0	0	0	0	0	0	0	0	0	0
5. Universal	0	0	0	0	0	0	0	0	0	0	0	0
6. Universal with secondary guarantees	0	0	0	0	0	0	0	0	0	0	0	0
7. Variable	0	0	0	0	0	0	0	0	0	0	0	0
8. Variable universal	0	0	0	0	0	0	0	0	0	0	0	0
9. Credit	0	0	0	0	0	0	0	0	0	0	0	0
10. Other	0	0	0	0	0	0	0	0	0	0	0	0
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole	0	0	0	0	0	0	0	0	0	0	0	0
13. Term	0	0	0	0	0	0	0	0	0	0	0	0
14. Universal	0	0	0	0	0	0	0	0	0	0	0	0
15. Variable	0	0	0	0	0	0	0	0	0	0	0	0
16. Variable universal	0	0	0	0	0	0	0	0	0	0	0	0
17. Credit	0	0	0	0	0	0	0	0	0	0	0	0
18. Other	0	0	0	0	0	0	0	0	0	0	0	0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	13,495,027	0	0	0	0	0	0	9,770,655	0	86,144,542	0	95,915,197
21. Indexed	16,334,352	0	0	0	0	0	0	3,367,686	0	100,052,622	0	103,420,308
22. Variable with guarantees	7,445,393	0	0	0	0	0	0	2,560,122	0	75,860,320	0	78,420,442
23. Variable without guarantees	0	0	0	0	0	0	0	0	0	0	0	0
24. Life contingent payout	137,730	0	0	0	0	0	0	1,247,278	0	93,920	0	1,341,198
25. Other	0	0	0	0	0	0	0	0	0	0	0	0
26. Total individual annuities	37,412,502	0	0	0	0	0	0	16,945,741	0	262,151,404	0	279,097,145
Group Annuities												
27. Fixed	282,635	0	0	0	0	0	0	47,624	0	1,475,058	0	1,522,682
28. Indexed	0	0	0	0	0	0	0	0	0	0	0	0
29. Variable with guarantees	1,018,974	0	0	0	0	0	0	316,327	0	23,993,794	0	24,310,121
30. Variable without guarantees	0	0	0	0	0	0	0	0	0	0	0	0
31. Life contingent payout	0	0	0	0	0	0	0	0	0	0	0	0
32. Other	0	0	0	0	0	0	0	0	0	0	0	0
33. Total group annuities	1,301,609	0	0	0	0	0	0	363,951	0	25,468,852	0	25,832,803
Accident and Health												
34. Comprehensive individual (d)	0 (f)	0	0	0	0	0	0	XXX	XXX	XXX	0	0
35. Comprehensive group (d)	0 (f)	0	0	0	0	0	0	XXX	XXX	XXX	0	0
36. Medicare supplement (d)	0 (f)	0	0	0	0	0	0	XXX	XXX	XXX	0	0
37. Vision only (d)	0 (f)	0	0	0	0	0	0	XXX	XXX	XXX	0	0
38. Dental only (d)	0 (f)	0	0	0	0	0	0	XXX	XXX	XXX	0	0
39. Federal employees health benefits plan (d)	0 (f)	0	0	0	0	0	0	XXX	XXX	XXX	0	0
40. Title XVIII Medicare (d)	0 (e,f)	0	0	0	0	0	0	XXX	XXX	XXX	0	0
41. Title XIX Medicaid (d)	0 (f)	0	0	0	0	0	0	XXX	XXX	XXX	0	0
42. Credit A&H	0 (f)	0	0	0	0	0	0	XXX	XXX	XXX	0	0
43. Disability income (d)	0 (f)	0	0	0	0	0	0	XXX	XXX	XXX	0	0
44. Long-term care (d)	0 (f)	0	0	0	0	0	0	XXX	XXX	XXX	0	0
45. Other health (d)	0 (f)	0	0	0	0	0	0	XXX	XXX	XXX	0	0
46. Total accident and health	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
47. Total	38,714,111 (c)	0	0	0	0	0	0	17,309,692	0	287,620,256	0	304,929,948

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

NAIC Group Code 0435 BUSINESS IN THE STATE OF Grand Total DURING THE YEAR 2025 NAIC Company Code 93661

Line of Business	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit					
	13	Claims Settled During Current Year								22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23	24	25	26	27	28
	Incurred During Current Year	14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life																
1. Industrial	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2. Whole	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3. Term	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4. Indexed	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5. Universal	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
6. Universal with secondary guarantees	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
7. Variable	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
8. Variable universal	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
9. Credit	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Other	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
11. Total individual life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Life																
12. Whole	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
13. Term	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
14. Universal	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15. Variable	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
16. Variable universal	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
17. Credit	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0 (a)
18. Other	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
19. Total group life	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities																
20. Fixed	4,330,809	208	5,840,890	0	0	0	0	208	5,840,890	1,581,316	0	0	(2,548)	(64,113,835)	31,191	620,780,929
21. Indexed	3,789,432	140	3,362,833	0	0	0	0	140	3,362,833	2,223,687	0	0	(2,201)	(70,532,442)	25,693	649,059,494
22. Variable with guarantees	931,793	14	931,793	0	0	0	0	14	931,793	0	0	0	(921)	(8,151,923)	9,064	547,214,135
23. Variable without guarantees	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
24. Life contingent payout	267,005	10	267,005	0	0	0	0	10	267,005	0	9	449,939	(23)	(1,092,550)	229	7,588,213
25. Other	0	0	0	0	0	0	0	0	0	0	47	2,570,281	(103)	(3,241,800)	427	11,190,814
26. Total individual annuities	9,319,039	372	10,402,521	0	0	0	0	372	10,402,521	3,805,003	56	3,020,220	(5,796)	(147,132,550)	66,604	1,835,833,585
Group Annuities																
27. Fixed	117,901	5	47,624	0	0	0	0	5	47,624	78,439	0	0	(61)	(928,043)	1,252	15,964,267
28. Indexed	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
29. Variable with guarantees	65,179	5	65,179	0	0	0	0	5	65,179	0	0	0	(205)	(12,775,161)	1,949	96,406,118
30. Variable without guarantees	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
31. Life contingent payout	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
32. Other	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
33. Total group annuities	183,080	10	112,803	0	0	0	0	10	112,803	78,439	0	0	(266)	(13,703,204)	3,201	112,370,385
Accident and Health																
34. Comprehensive individual (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
35. Comprehensive group (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
36. Medicare supplement (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
37. Vision only (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
38. Dental only (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
39. Federal employees health benefits plan (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
40. Title XVIII Medicare (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
41. Title XIX Medicaid (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
42. Credit A&H	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
43. Disability income (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
44. Long-term care (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
45. Other health (d)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
46. Total accident and health	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
47. Total	9,502,119	382	10,515,324	0	0	0	0	382	10,515,324	3,883,442	56	3,020,220	(6,062)	(160,835,754)	69,805	1,948,203,970

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

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

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

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

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

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

FORM FOR CALCULATING THE INTEREST MAINTENANCE RESERVE

INTEREST MAINTENANCE RESERVE

		1 Amount
1.	Reserve as of December 31, Prior Year	(11,277,712)
2.	Current year's realized pre-tax capital gains/(losses) of $ (2,317,850) transferred into the reserve net of taxes of $ (486,748)	(1,831,101)
3.	Adjustment for current year's liability gains/(losses) released from the reserve	0
4.	Balance before reduction for amount transferred to Summary of Operations (Line 1 + Line 2 + Line 3)	(13,108,813)
5.	Current year's amortization released to Summary of Operations (Amortization, Line 1, Column 4)	(1,785,486)
6.	Reserve as of December 31, current year (Line 4 minus Line 5)	(11,323,327)

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	(1,585,363)	(200,123)	0	(1,785,486)
2.	2026	(1,591,364)	(405,886)	0	(1,997,250)
3.	2027	(1,503,463)	(349,787)	0	(1,853,250)
4.	2028	(1,320,145)	(264,776)	0	(1,584,922)
5.	2029	(1,149,621)	(176,712)	0	(1,326,332)
6.	2030	(974,991)	(81,686)	0	(1,056,677)
7.	2031	(791,824)	(33,620)	0	(825,444)
8.	2032	(592,169)	(34,661)	0	(626,830)
9.	2033	(364,673)	(35,241)	0	(399,913)
10.	2034	(241,802)	(36,657)	0	(278,458)
11.	2035	(227,763)	(38,018)	0	(265,780)
12.	2036	(202,649)	(36,930)	0	(239,579)
13.	2037	(159,657)	(33,793)	0	(193,450)
14.	2038	(107,498)	(30,668)	0	(138,167)
15.	2039	(72,163)	(27,366)	0	(99,529)
16.	2040	(62,662)	(23,532)	0	(86,194)
17.	2041	(63,184)	(19,306)	0	(82,490)
18.	2042	(63,908)	(14,925)	0	(78,833)
19.	2043	(65,140)	(10,177)	0	(75,316)
20.	2044	(59,791)	(5,187)	0	(64,979)
21.	2045	(45,756)	169	0	(45,587)
22.	2046	(31,250)	3,031	0	(28,219)
23.	2047	(16,742)	3,283	0	(13,459)
24.	2048	(1,155)	3,409	0	2,254
25.	2049	5,801	3,662	0	9,463
26.	2050	4,403	3,915	0	8,317
27.	2051	3,358	3,662	0	7,020
28.	2052	2,285	2,904	0	5,189
29.	2053	982	2,147	0	3,128
30.	2054	192	1,326	0	1,518
31.	2055 and Later		442	0	442
32.	Total (Lines 1 to 31)	(11,277,712)	(1,831,101)	0	(13,108,814)

ASSET VALUATION RESERVE

	Default Component			Equity Component			
	1 Other Than Mortgage Loans	2 Mortgage Loans	3 Total (Cols. 1 + 2)	4 Common Stock	5 Real Estate and Other Invested Assets	6 Total (Cols. 4 + 5)	7 Total Amount (Cols. 3 + 6)
1. Reserve as of December 31, prior year	15,622,612	0	15,622,612	2	13,884	13,885	15,636,497
2. Realized capital gains/(losses) net of taxes - General Account	(1,130,984)		(1,130,984)		232,746	232,746	(898,238)
3. Realized capital gains/(losses) net of taxes - Separate Accounts			0			0	0
4. Unrealized capital gains/(losses) net of deferred taxes - General Account	770,208		770,208	2	(74,570)	(74,568)	695,640
5. Unrealized capital gains/(losses) net of deferred taxes - Separate Accounts			0			0	0
6. Capital gains credited/(losses charged) to contract benefits, payments or reserves			0			0	0
7. Basic contribution	2,378,851	0	2,378,851	0	53,633	53,633	2,432,484
8. Accumulated balances (Lines 1 through 5 - 6 + 7)	17,640,687	0	17,640,687	4	225,692	225,696	17,866,383
9. Maximum reserve	11,552,975	0	11,552,975	1	202,160	202,161	11,755,136
10. Reserve objective	6,629,771	0	6,629,771	1	120,256	120,257	6,750,028
11. 20% of (Line 10 - Line 8)	(2,202,183)	0	(2,202,183)	(1)	(21,087)	(21,088)	(2,223,271)
12. Balance before transfers (Lines 8 + 11)	15,438,504	0	15,438,504	3	204,605	204,608	15,643,112
13. Transfers			0			0	0
14. Voluntary contribution			0			0	0
15. Adjustment down to maximum/up to zero	(3,885,529)		(3,885,529)	(1)	(2,446)	(2,447)	(3,887,976)
16. Reserve as of December 31, current year (Lines 12 + 13 + 14 + 15)	11,552,975	0	11,552,975	2	202,159	202,161	11,755,136

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

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution 5 Factor	Basic Contribution 6 Amount (Cols.4 x 5)	Reserve Objective 7 Factor	Reserve Objective 8 Amount (Cols. 4 x 7)	Maximum Reserve 9 Factor	Maximum Reserve 10 Amount (Cols. 4 x 9)
		LONG-TERM BONDS										
1.		Exempt obligations	1,842,455	XXX	XXX	1,842,455	0.0000	0	0.0000	0	0.0000	0
2.1	1	NAIC Designation Category 1.A	209,206,756	XXX	XXX	209,206,756	0.0002	41,841	0.0007	146,445	0.0013	271,969
2.2	1	NAIC Designation Category 1.B	44,314,287	XXX	XXX	44,314,287	0.0004	17,726	0.0011	48,746	0.0023	101,923
2.3	1	NAIC Designation Category 1.C	78,129,805	XXX	XXX	78,129,805	0.0006	46,878	0.0018	140,634	0.0035	273,454
2.4	1	NAIC Designation Category 1.D	87,322,613	XXX	XXX	87,322,613	0.0007	61,126	0.0022	192,110	0.0044	384,219
2.5	1	NAIC Designation Category 1.E	37,594,985	XXX	XXX	37,594,985	0.0009	33,835	0.0027	101,506	0.0055	206,772
2.6	1	NAIC Designation Category 1.F	106,047,116	XXX	XXX	106,047,116	0.0011	116,652	0.0034	360,560	0.0068	721,120
2.7	1	NAIC Designation Category 1.G	172,913,941	XXX	XXX	172,913,941	0.0014	242,080	0.0042	726,239	0.0085	1,469,768
2.8		Subtotal NAIC 1 (2.1+2.2+2.3+2.4+2.5+2.6+2.7)	735,529,501	XXX	XXX	735,529,501	XXX	560,138	XXX	1,716,239	XXX	3,429,227
3.1	2	NAIC Designation Category 2.A	187,276,706	XXX	XXX	187,276,706	0.0021	393,281	0.0063	1,179,843	0.0105	1,966,405
3.2	2	NAIC Designation Category 2.B	193,011,611	XXX	XXX	193,011,611	0.0025	482,529	0.0076	1,466,888	0.0127	2,451,247
3.3	2	NAIC Designation Category 2.C	89,316,099	XXX	XXX	89,316,099	0.0036	321,538	0.0108	964,614	0.0180	1,607,690
3.4		Subtotal NAIC 2 (3.1+3.2+3.3)	469,604,416	XXX	XXX	469,604,416	XXX	1,197,348	XXX	3,611,345	XXX	6,025,343
4.1	3	NAIC Designation Category 3.A	3,142,230	XXX	XXX	3,142,230	0.0069	21,681	0.0183	57,503	0.0262	82,326
4.2	3	NAIC Designation Category 3.B	229,465	XXX	XXX	229,465	0.0099	2,272	0.0264	6,058	0.0377	8,651
4.3	3	NAIC Designation Category 3.C	4,999,595	XXX	XXX	4,999,595	0.0131	65,495	0.0350	174,986	0.0500	249,980
4.4		Subtotal NAIC 3 (4.1+4.2+4.3)	8,371,291	XXX	XXX	8,371,291	XXX	89,448	XXX	238,547	XXX	340,957
5.1	4	NAIC Designation Category 4.A	1,827,458	XXX	XXX	1,827,458	0.0184	33,625	0.0430	78,581	0.0615	112,389
5.2	4	NAIC Designation Category 4.B	41,698	XXX	XXX	41,698	0.0238	992	0.0555	2,314	0.0793	3,307
5.3	4	NAIC Designation Category 4.C	187,788	XXX	XXX	187,788	0.0310	5,821	0.0724	13,596	0.1034	19,417
5.4		Subtotal NAIC 4 (5.1+5.2+5.3)	2,056,944	XXX	XXX	2,056,944	XXX	40,439	XXX	94,491	XXX	135,113
6.1	5	NAIC Designation Category 5.A	183,720	XXX	XXX	183,720	0.0472	8,672	0.0846	15,543	0.1410	25,905
6.2	5	NAIC Designation Category 5.B	3,181,068	XXX	XXX	3,181,068	0.0663	210,905	0.1188	377,911	0.1980	629,851
6.3	5	NAIC Designation Category 5.C	2,405,872	XXX	XXX	2,405,872	0.0836	201,131	0.1498	360,400	0.2496	600,506
6.4		Subtotal NAIC 5 (6.1+6.2+6.3)	5,770,661	XXX	XXX	5,770,661	XXX	420,707	XXX	753,853	XXX	1,256,262
7.	6	NAIC 6		XXX	XXX	0	0.0000	0	0.2370	0	0.2370	0
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)	1,223,175,266	XXX	XXX	1,223,175,266	XXX	2,308,080	XXX	6,414,475	XXX	11,186,901
		PREFERRED STOCKS										
10.	1	Highest quality	2,581,468	XXX	XXX	2,581,468	0.0005	1,291	0.0016	4,130	0.0033	8,519
11.	2	High quality	16,625,346	XXX	XXX	16,625,346	0.0021	34,913	0.0064	106,402	0.0106	176,229
12.	3	Medium quality	0	XXX	XXX	0	0.0099	0	0.0263	0	0.0376	0
13.	4	Low quality	0	XXX	XXX	0	0.0245	0	0.0572	0	0.0817	0
14.	5	Lower quality	0	XXX	XXX	0	0.0630	0	0.1128	0	0.1880	0
15.	6	In or near default	0	XXX	XXX	0	0.0000	0	0.2370	0	0.2370	0
16.		Affiliated life with AVR	0	XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
17.		Total preferred stocks (Sum of Lines 10 through 16)	19,206,814	XXX	XXX	19,206,814	XXX	36,204	XXX	110,533	XXX	184,748

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

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution 5 Factor	Basic Contribution 6 Amount (Cols.4 x 5)	Reserve Objective 7 Factor	Reserve Objective 8 Amount (Cols. 4 x 7)	Maximum Reserve 9 Factor	Maximum Reserve 10 Amount (Cols. 4 x 9)
		SHORT-TERM BONDS										
18.		Exempt obligations		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
19.1	1	NAIC Designation Category 1.A		XXX	XXX	0	0.0002	0	0.0007	0	0.0013	0
19.2	1	NAIC Designation Category 1.B		XXX	XXX	0	0.0004	0	0.0011	0	0.0023	0
19.3	1	NAIC Designation Category 1.C		XXX	XXX	0	0.0006	0	0.0018	0	0.0035	0
19.4	1	NAIC Designation Category 1.D		XXX	XXX	0	0.0007	0	0.0022	0	0.0044	0
19.5	1	NAIC Designation Category 1.E		XXX	XXX	0	0.0009	0	0.0027	0	0.0055	0
19.6	1	NAIC Designation Category 1.F		XXX	XXX	0	0.0011	0	0.0034	0	0.0068	0
19.7	1	NAIC Designation Category 1.G		XXX	XXX	0	0.0014	0	0.0042	0	0.0085	0
19.8		Subtotal NAIC 1 (19.1+19.2+19.3+19.4+19.5+19.6+19.7)	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
20.1	2	NAIC Designation Category 2.A	13,934,076	XXX	XXX	13,934,076	0.0021	29,262	0.0063	87,785	0.0105	146,308
20.2	2	NAIC Designation Category 2.B	0	XXX	XXX	0	0.0025	0	0.0076	0	0.0127	0
20.3	2	NAIC Designation Category 2.C	0	XXX	XXX	0	0.0036	0	0.0108	0	0.0180	0
20.4		Subtotal NAIC 2 (20.1+20.2+20.3)	13,934,076	XXX	XXX	13,934,076	XXX	29,262	XXX	87,785	XXX	146,308
21.1	3	NAIC Designation Category 3.A		XXX	XXX	0	0.0069	0	0.0183	0	0.0262	0
21.2	3	NAIC Designation Category 3.B		XXX	XXX	0	0.0099	0	0.0264	0	0.0377	0
21.3	3	NAIC Designation Category 3.C		XXX	XXX	0	0.0131	0	0.0350	0	0.0500	0
21.4		Subtotal NAIC 3 (21.1+21.2+21.3)	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
22.1	4	NAIC Designation Category 4.A		XXX	XXX	0	0.0184	0	0.0430	0	0.0615	0
22.2	4	NAIC Designation Category 4.B		XXX	XXX	0	0.0238	0	0.0555	0	0.0793	0
22.3	4	NAIC Designation Category 4.C		XXX	XXX	0	0.0310	0	0.0724	0	0.1034	0
22.4		Subtotal NAIC 4 (22.1+22.2+22.3)	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
23.1	5	NAIC Designation Category 5.A		XXX	XXX	0	0.0472	0	0.0846	0	0.1410	0
23.2	5	NAIC Designation Category 5.B		XXX	XXX	0	0.0663	0	0.1188	0	0.1980	0
23.3	5	NAIC Designation Category 5.C		XXX	XXX	0	0.0836	0	0.1498	0	0.2496	0
23.4		Subtotal NAIC 5 (23.1+23.2+23.3)	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
24.	6	NAIC 6		XXX	XXX	0	0.0000	0	0.2370	0	0.2370	0
25.		Total short-term bonds (18+19.8+20.4+21.4+22.4+23.4+24)	13,934,076	XXX	XXX	13,934,076	XXX	29,262	XXX	87,785	XXX	146,308
		DERIVATIVE INSTRUMENTS										
26.		Exchange traded	10,398,218	XXX	XXX	10,398,218	0.0005	5,199	0.0016	16,637	0.0033	34,314
27.	1	Highest quality	213,648	XXX	XXX	213,648	0.0005	107	0.0016	342	0.0033	705
28.	2	High quality		XXX	XXX	0	0.0021	0	0.0064	0	0.0106	0
29.	3	Medium quality		XXX	XXX	0	0.0099	0	0.0263	0	0.0376	0
30.	4	Low quality		XXX	XXX	0	0.0245	0	0.0572	0	0.0817	0
31.	5	Lower quality		XXX	XXX	0	0.0630	0	0.1128	0	0.1880	0
32.	6	In or near default		XXX	XXX	0	0.0000	0	0.2370	0	0.2370	0
33.		Total derivative instruments	10,611,865	XXX	XXX	10,611,865	XXX	5,306	XXX	16,979	XXX	35,019
34.		Total (Lines 9 + 17 + 25 + 33)	1,266,928,022	XXX	XXX	1,266,928,022	XXX	2,378,851	XXX	6,629,771	XXX	11,552,975

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

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution 5 Factor	Basic Contribution 6 Amount (Cols.4 x 5)	Reserve Objective 7 Factor	Reserve Objective 8 Amount (Cols. 4 x 7)	Maximum Reserve 9 Factor	Maximum Reserve 10 Amount (Cols. 4 x 9)
		MORTGAGE LOANS										
		In Good Standing:										
35.		Farm mortgages - CM1 - highest quality			XXX	0	0.0011	0	0.0057	0	0.0074	0
36.		Farm mortgages - CM2 - high quality			XXX	0	0.0040	0	0.0114	0	0.0149	0
37.		Farm mortgages - CM3 - medium quality			XXX	0	0.0069	0	0.0200	0	0.0257	0
38.		Farm mortgages - CM4 - low Medium quality			XXX	0	0.0120	0	0.0343	0	0.0428	0
39.		Farm mortgages - CM5 - low quality			XXX	0	0.0183	0	0.0486	0	0.0628	0
40.		Residential mortgages - insured or guaranteed			XXX	0	0.0003	0	0.0007	0	0.0011	0
41.		Residential mortgages - all other			XXX	0	0.0015	0	0.0034	0	0.0046	0
42.		Commercial mortgages - insured or guaranteed			XXX	0	0.0003	0	0.0007	0	0.0011	0
43.		Commercial mortgages - all other - CM1 - highest quality			XXX	0	0.0011	0	0.0057	0	0.0074	0
44.		Commercial mortgages - all other - CM2 - high quality			XXX	0	0.0040	0	0.0114	0	0.0149	0
45.		Commercial mortgages - all other - CM3 - medium quality			XXX	0	0.0069	0	0.0200	0	0.0257	0
46.		Commercial mortgages - all other - CM4 - low medium quality			XXX	0	0.0120	0	0.0343	0	0.0428	0
47.		Commercial mortgages - all other - CM5 - low quality			XXX	0	0.0183	0	0.0486	0	0.0628	0
		Overdue, Not in Process:										
48.		Farm mortgages			XXX	0	0.0480	0	0.0868	0	0.1371	0
49.		Residential mortgages - insured or guaranteed			XXX	0	0.0006	0	0.0014	0	0.0023	0
50.		Residential mortgages - all other			XXX	0	0.0029	0	0.0066	0	0.0103	0
51.		Commercial mortgages - insured or guaranteed			XXX	0	0.0006	0	0.0014	0	0.0023	0
52.		Commercial mortgages - all other			XXX	0	0.0480	0	0.0868	0	0.1371	0
		In Process of Foreclosure:										
53.		Farm mortgages			XXX	0	0.0000	0	0.1942	0	0.1942	0
54.		Residential mortgages - insured or guaranteed			XXX	0	0.0000	0	0.0046	0	0.0046	0
55.		Residential mortgages - all other			XXX	0	0.0000	0	0.0149	0	0.0149	0
56.		Commercial mortgages - insured or guaranteed			XXX	0	0.0000	0	0.0046	0	0.0046	0
57.		Commercial mortgages - all other			XXX	0	0.0000	0	0.1942	0	0.1942	0
58.		Total Schedule B mortgages (Sum of Lines 35 through 57)	0	0	XXX	0	XXX	0	XXX	0	XXX	0

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

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution 5 Factor	Basic Contribution 6 Amount (Cols.4 x 5)	Reserve Objective 7 Factor	Reserve Objective 8 Amount (Cols. 4 x 7)	Maximum Reserve 9 Factor	Maximum Reserve 10 Amount (Cols. 4 x 9)
		COMMON STOCK										
1.		Unaffiliated - public	9	XXX	XXX	9	0.0000	0	0.1215 (a)	1	0.1215 (a)	1
2.		Unaffiliated - private		XXX	XXX	0	0.0000	0	0.1945	0	0.1945	0
3.		Federal Home Loan Bank		XXX	XXX	0	0.0000	0	0.0061	0	0.0097	0
4.		Affiliated - life with AVR		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
		Affiliated - Investment Subsidiary:										
5.		Fixed income - exempt obligations				0	XXX		XXX		XXX	
6.		Fixed income - highest quality				0	XXX		XXX		XXX	
7.		Fixed income - high quality				0	XXX		XXX		XXX	
8.		Fixed income - medium quality				0	XXX		XXX		XXX	
9.		Fixed income - low quality				0	XXX		XXX		XXX	
10.		Fixed income - lower quality				0	XXX		XXX		XXX	
11.		Fixed income - in or near default				0	XXX		XXX		XXX	
12.		Unaffiliated common stock - public				0	0.0000	0	0.1580 (a)	0	0.1580 (a)	0
13.		Unaffiliated common stock - private				0	0.0000	0	0.1945	0	0.1945	0
14.		Real estate				0	(b)	0	(b)	0	(b)	0
15.		Affiliated - certain other (See SVO Purposes and Procedures Manual)		XXX	XXX	0	0.0000	0	0.1580	0	0.1580	0
16.		Affiliated - all other		XXX	XXX	0	0.0000	0	0.1945	0	0.1945	0
17.		Total common stock (Sum of Lines 1 through 16)	9	0	0	9	XXX	0	XXX	1	XXX	1
		REAL ESTATE										
18.		Home office property (General Account only)				0	0.0000	0	0.0912	0	0.0912	0
19.		Investment properties				0	0.0000	0	0.0912	0	0.0912	0
20.		Properties acquired in satisfaction of debt				0	0.0000	0	0.1337	0	0.1337	0
21.		Total real estate (Sum of Lines 18 through 20)	0	0	0	0	XXX	0	XXX	0	XXX	0
		OTHER INVESTED ASSETS INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF BONDS										
22.		Exempt obligations	0	XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
23.	1	Highest quality	1,010,884	XXX	XXX	1,010,884	0.0005	505	0.0016	1,617	0.0033	3,336
24.	2	High quality	2,179,600	XXX	XXX	2,179,600	0.0021	4,577	0.0064	13,949	0.0106	23,104
25.	3	Medium quality	0	XXX	XXX	0	0.0099	0	0.0263	0	0.0376	0
26.	4	Low quality	0	XXX	XXX	0	0.0245	0	0.0572	0	0.0817	0
27.	5	Lower quality	533,993	XXX	XXX	533,993	0.0630	33,642	0.1128	60,234	0.1880	100,391
28.	6	In or near default	0	XXX	XXX	0	0.0000	0	0.2370	0	0.2370	0
29.		Total with bond characteristics (Sum of Lines 22 through 28)	3,724,477	XXX	XXX	3,724,477	XXX	38,724	XXX	75,801	XXX	126,830

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

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution 5 Factor	Basic Contribution 6 Amount (Cols.4 x 5)	Reserve Objective 7 Factor	Reserve Objective 8 Amount (Cols. 4 x 7)	Maximum Reserve 9 Factor	Maximum Reserve 10 Amount (Cols. 4 x 9)
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF PREFERRED STOCKS										
30.	1	Highest quality		XXX	XXX	0	0.0005	0	0.0016	0	0.0033	0
31.	2	High quality		XXX	XXX	0	0.0021	0	0.0064	0	0.0106	0
32.	3	Medium quality		XXX	XXX	0	0.0099	0	0.0263	0	0.0376	0
33.	4	Low quality		XXX	XXX	0	0.0245	0	0.0572	0	0.0817	0
34.	5	Lower quality		XXX	XXX	0	0.0630	0	0.1128	0	0.1880	0
35.	6	In or near default		XXX	XXX	0	0.0000	0	0.2370	0	0.2370	0
36.		Affiliated life with AVR		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
37.		Total with preferred stock characteristics (Sum of Lines 30 through 36)	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF MORTGAGE LOANS										
		In Good Standing Affiliated:										
38.		Mortgages - CM1 - highest quality			XXX	0	0.0011	0	0.0057	0	0.0074	0
39.		Mortgages - CM2 - high quality			XXX	0	0.0040	0	0.0114	0	0.0149	0
40.		Mortgages - CM3 - medium quality			XXX	0	0.0069	0	0.0200	0	0.0257	0
41.		Mortgages - CM4 - low medium quality			XXX	0	0.0120	0	0.0343	0	0.0428	0
42.		Mortgages - CM5 - low quality			XXX	0	0.0183	0	0.0486	0	0.0628	0
43.		Residential Mortgages - insured or guaranteed			XXX	0	0.0003	0	0.0007	0	0.0011	0
44.		Residential Mortgages - all other		XXX	XXX	0	0.0015	0	0.0034	0	0.0046	0
45.		Commercial Mortgages - insured or guaranteed			XXX	0	0.0003	0	0.0007	0	0.0011	0
		Overdue, Not in Process Affiliated:										
46.		Farm mortgages			XXX	0	0.0480	0	0.0868	0	0.1371	0
47.		Residential mortgages - insured or guaranteed			XXX	0	0.0006	0	0.0014	0	0.0023	0
48.		Residential mortgages - all other			XXX	0	0.0029	0	0.0066	0	0.0103	0
49.		Commercial mortgages - insured or guaranteed			XXX	0	0.0006	0	0.0014	0	0.0023	0
50.		Commercial mortgages - all other			XXX	0	0.0480	0	0.0868	0	0.1371	0
		In Process of Foreclosure Affiliated:										
51.		Farm mortgages			XXX	0	0.0000	0	0.1942	0	0.1942	0
52.		Residential mortgages - insured or guaranteed			XXX	0	0.0000	0	0.0046	0	0.0046	0
53.		Residential mortgages - all other			XXX	0	0.0000	0	0.0149	0	0.0149	0
54.		Commercial mortgages - insured or guaranteed			XXX	0	0.0000	0	0.0046	0	0.0046	0
55.		Commercial mortgages - all other			XXX	0	0.0000	0	0.1942	0	0.1942	0
56.		Total affiliated (Sum of Lines 38 through 55)	0	0	XXX	0	XXX	0	XXX	0	XXX	0
57.		Unaffiliated - in good standing with covenants			XXX	0	(c)	0	(c)	0	(c)	0
58.		Unaffiliated - in good standing defeased with government securities			XXX	0	0.0011	0	0.0057	0	0.0074	0
59.		Unaffiliated - in good standing primarily senior			XXX	0	0.0040	0	0.0114	0	0.0149	0
60.		Unaffiliated - in good standing all other			XXX	0	0.0069	0	0.0200	0	0.0257	0
61.		Unaffiliated - overdue, not in process			XXX	0	0.0480	0	0.0868	0	0.1371	0
62.		Unaffiliated - in process of foreclosure			XXX	0	0.0000	0	0.1942	0	0.1942	0
63.		Total unaffiliated (Sum of Lines 57 through 62)	0	0	XXX	0	XXX	0	XXX	0	XXX	0
64.		Total with mortgage loan characteristics (Lines 56 + 63)	0	0	XXX	0	XXX	0	XXX	0	XXX	0

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

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution 5 Factor	Basic Contribution 6 Amount (Cols.4 x 5)	Reserve Objective 7 Factor	Reserve Objective 8 Amount (Cols. 4 x 7)	Maximum Reserve 9 Factor	Maximum Reserve 10 Amount (Cols. 4 x 9)
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF COMMON STOCK										
65.		Unaffiliated public		XXX	XXX	0	0.0000	0	0.1580 (a)	0	0.1580 (a)	0
66.		Unaffiliated private		XXX	XXX	0	0.0000	0	0.1945	0	0.1945	0
67.		Affiliated life with AVR		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
68.		Affiliated certain other (See SVO Purposes & Procedures Manual)		XXX	XXX	0	0.0000	0	0.1580	0	0.1580	0
69.		Affiliated other - all other		XXX	XXX	0	0.0000	0	0.1945	0	0.1945	0
70.		Total with common stock characteristics (Sum of Lines 65 through 69)	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF REAL ESTATE										
71.		Home office property (General Account only)				0	0.0000	0	0.0912	0	0.0912	0
72.		Investment properties				0	0.0000	0	0.0912	0	0.0912	0
73		Properties acquired in satisfaction of debt				0	0.0000	0	0.1337	0	0.1337	0
74.		Total with real estate characteristics (Sum of Lines 71 through 73)	0	0	0	0	XXX	0	XXX	0	XXX	0
		INVESTMENTS IN TAX CREDIT STRUCTURES										
75.		Yield guaranteed state tax credit investments	0			0	0.0003	0	0.0006	0	0.0010	0
76.		Qualifying federal tax credit investments	0			0	0.0063	0	0.0120	0	0.0190	0
77.		Qualifying state tax credit investments	0			0	0.0063	0	0.0120	0	0.0190	0
78.		Other tax credit investments	0			0	0.0273	0	0.0600	0	0.0975	0
79.		Total tax credit investments (Sum of Lines 75 through 78)	0	0	0	0	XXX	0	XXX	0	XXX	0
		RESIDUAL TRANCHES OR INTERESTS										
80.		Bonds - unaffiliated	0	XXX	XXX	0	0.0000	0	0.1580	0	0.1580	0
81.		Bonds - affiliated	0	XXX	XXX	0	0.0000	0	0.1580	0	0.1580	0
82.		Common stock - unaffiliated	0	XXX	XXX	0	0.0000	0	0.1580	0	0.1580	0
83.		Common stock - affiliated	0	XXX	XXX	0	0.0000	0	0.1580	0	0.1580	0
84.		Preferred stock - unaffiliated	0	XXX	XXX	0	0.0000	0	0.1580	0	0.1580	0
85.		Preferred stock - affiliated	0	XXX	XXX	0	0.0000	0	0.1580	0	0.1580	0
86.		Real estate - unaffiliated	0			0	0.0000	0	0.1580	0	0.1580	0
87.		Real estate - affiliated	0			0	0.0000	0	0.1580	0	0.1580	0
88.		Mortgage loans - unaffiliated	0	XXX	XXX	0	0.0000	0	0.1580	0	0.1580	0
89.		Mortgage loans - affiliated	0	XXX	XXX	0	0.0000	0	0.1580	0	0.1580	0
90.		Other - unaffiliated	0	XXX	XXX	0	0.0000	0	0.1580	0	0.1580	0
91.		Other - affiliated	0	XXX	XXX	0	0.0000	0	0.1580	0	0.1580	0
92.		Total residual tranches or interests (Sum of Lines 80 through 91)	0	0	0	0	XXX	0	XXX	0	XXX	0
		SURPLUS NOTES AND CAPITAL NOTES										
93.	1	Highest quality	2,591,012	XXX	XXX	2,591,012	0.0005	1,296	0.0016	4,146	0.0033	8,550
94.	2	High quality	6,036,075	XXX	XXX	6,036,075	0.0021	12,676	0.0064	38,631	0.0106	63,982
95.	3	Medium quality	0	XXX	XXX	0	0.0099	0	0.0263	0	0.0376	0
96.	4	Low quality	0	XXX	XXX	0	0.0245	0	0.0572	0	0.0817	0
97.	5	Lower quality	14,877	XXX	XXX	14,877	0.0630	937	0.1128	1,678	0.1880	2,797
98.	6	In or near default	0	XXX	XXX	0	0.0000	0	0.2370	0	0.2370	0
99.		Total surplus notes and capital notes (Sum of Lines 93 through 98)	8,641,964	XXX	XXX	8,641,964	XXX	14,909	XXX	44,455	XXX	75,330
		ALL OTHER INVESTMENTS										
100.		NAIC 1 working capital finance investments		XXX		0	0.0000	0	0.0042	0	0.0042	0
101.		NAIC 2 working capital finance investments		XXX		0	0.0000	0	0.0137	0	0.0137	0
102.		Other invested assets - Schedule BA		XXX		0	0.0000	0	0.1580	0	0.1580	0
103.		Other short-term invested assets - Schedule DA		XXX		0	0.0000	0	0.1580	0	0.1580	0
104.		Total all other (Sum of Lines 100 through 103)	0	XXX	0	0	XXX	0	XXX	0	XXX	0
105.		Total other invested assets - Schedules BA & DA (Sum of Lines 29, 37, 64, 70, 74, 79, 92, 99 and 104)	12,366,441	0	0	12,366,441	XXX	53,633	XXX	120,256	XXX	202,160

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

Asset Valuation Reserve - Replications (Synthetic) Assets

N O N E

Schedule F - Claims

N O N E

Schedule H - Part 1 - Analysis of Underwriting Operations

N O N E

Schedule H - Part 2 - Reserves and Liabilities

N O N E

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

N O N E

Schedule H - Part 4 - Reinsurance

N O N E

Schedule H - Part 5 - Health Claims

N O N E

Schedule S - Part 1 - Section 1

N O N E

Schedule S - Part 1 - Section 2

N O N E

Schedule S - Part 2

N O N E

Schedule S - Part 3 - Section 1

N O N E

Schedule S - Part 3 - Section 2

N O N E

Schedule S - Part 4

N O N E

Schedule S - Part 4 - Bank Footnote

N O N E

Schedule S - Part 5

N O N E

Schedule S - Part 5 - Bank Footnote

N O N E

Schedule S - Part 6

N O N E

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)	1,670,334,407		1,670,334,407
2.	Reinsurance (Line 16)	0	0	0
3.	Premiums and considerations (Line 15)	0	0	0
4.	Net credit for ceded reinsurance	XXX	0	0
5.	All other admitted assets (balance)	29,119,885		29,119,885
6.	Total assets excluding Separate Accounts (Line 26)	1,699,454,292	0	1,699,454,292
7.	Separate Account assets (Line 27)	546,430,270		546,430,270
8.	Total assets (Line 28)	2,245,884,562	0	2,245,884,562
	LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
9.	Contract reserves (Lines 1 and 2)	1,398,903,001	0	1,398,903,001
10.	Liability for deposit-type contracts (Line 3)	11,190,814		11,190,814
11.	Claim reserves (Line 4)	3,883,441	0	3,883,441
12.	Policyholder dividends/member refunds/reserves (Lines 5 through 7)	0		0
13.	Premium & annuity considerations received in advance (Line 8)			0
14.	Other contract liabilities (Line 9)	0		0
15.	Reinsurance in unauthorized companies (Line 24.02 minus inset amount)	0	0	0
16.	Funds held under reinsurance treaties with unauthorized reinsurers (Line 24.03 minus inset amount)	0		0
17.	Reinsurance with certified reinsurers (Line 24.02 inset amount)	0		0
18.	Funds held under reinsurance treaties with certified reinsurers (Line 24.03 inset amount)			0
19.	All other liabilities (balance)	33,571,844		33,571,844
20.	Total liabilities excluding Separate Accounts (Line 26)	1,447,549,100	0	1,447,549,100
21.	Separate Account liabilities (Line 27)	546,430,270		546,430,270
22.	Total liabilities (Line 28)	1,993,979,370	0	1,993,979,370
23.	Capital & surplus (Line 38)	251,905,192	XXX	251,905,192
24.	Total liabilities, capital & surplus (Line 39)	2,245,884,562	0	2,245,884,562
	NET CREDIT FOR CEDED REINSURANCE			
25.	Contract reserves	0		
26.	Claim reserves	0		
27.	Policyholder dividends/reserves	0		
28.	Premium & annuity considerations received in advance	0		
29.	Liability for deposit-type contracts	0		
30.	Other contract liabilities	0		
31.	Reinsurance ceded assets	0		
32.	Other ceded reinsurance recoverables	0		
33.	Total ceded reinsurance recoverables	0		
34.	Premiums and considerations	0		
35.	Reinsurance in unauthorized companies	0		
36.	Funds held under reinsurance treaties with unauthorized reinsurers	0		
37.	Reinsurance with certified reinsurers	0		
38.	Funds held under reinsurance treaties with certified reinsurers	0		
39.	Other ceded reinsurance payables/offsets	0		
40.	Total ceded reinsurance payable/offsets	0		
41.	Total net credit for ceded reinsurance	0		

SCHEDULE S - PART 8

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

	Ceded General Account Assets		Ceded Guaranteed Separate Account Assets		Total Ceded Assets		Assumed General Account Assets		Assumed Guaranteed Separate Account Assets		Total Assumed Assets	
	1 FWH B/ACV	2 Modco B/ACV	3 FWH B/ACV	4 Modco B/ACV	5 FWH B/ACV Col 1+3	6 Modco B/ACV Col 2+4	7 FWH B/ACV	8 Modco B/ACV	9 FWH B/ACV	10 Modco B/ACV	11 FWH B/ACV Col 7+9	12 Modco B/ACV Col 8+10
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)												

NONE

SCHEDULE S - PART 8

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

	Ceded General Account Assets		Ceded Guaranteed Separate Account Assets		Total Ceded Assets		Assumed General Account Assets		Assumed Guaranteed Separate Account Assets		Total Assumed Assets	
	1 FWH B/ACV	2 Modco B/ACV	3 FWH B/ACV	4 Modco B/ACV	5 FWH B/ACV Col 1+3	6 Modco B/ACV Col 2+4	7 FWH B/ACV	8 Modco B/ACV	9 FWH B/ACV	10 Modco B/ACV	11 FWH B/ACV Col 7+9	12 Modco B/ACV Col 8+10
SHORT-TERM BONDS												
17. Exempt obligations												
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

SCHEDULE S - PART 8

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

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

NONE

SCHEDULE S - PART 8

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

	Ceded General Account Assets		Ceded Guaranteed Separate Account Assets		Total Ceded Assets		Assumed General Account Assets		Assumed Guaranteed Separate Account Assets		Total Assumed Assets	
	1 FWH B/ACV	2 Modco B/ACV	3 FWH B/ACV	4 Modco B/ACV	5 FWH B/ACV Col 1+3	6 Modco B/ACV Col 2+4	7 FWH B/ACV	8 Modco B/ACV	9 FWH B/ACV	10 Modco B/ACV	11 FWH B/ACV Col 7+9	12 Modco B/ACV Col 8+10
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

SCHEDULE S - PART 8

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

	Ceded General Account Assets		Ceded Guaranteed Separate Account Assets		Total Ceded Assets		Assumed General Account Assets		Assumed Guaranteed Separate Account Assets		Total Assumed Assets	
	1 FWH B/ACV	2 Modco B/ACV	3 FWH B/ACV	4 Modco B/ACV	5 FWH B/ACV Col 1+3	6 Modco B/ACV Col 2+4	7 FWH B/ACV	8 Modco B/ACV	9 FWH B/ACV	10 Modco B/ACV	11 FWH B/ACV Col 7+9	12 Modco B/ACV Col 8+10
INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF MORTGAGE LOANS												
In Good Standing Affiliated:												
95. Mortgages - CM1 - highest quality												
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

SCHEDULE S - PART 8

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

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

NONE

SCHEDULE T - PART 2

INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

States, Etc.		Direct Business Only					
		1 Life (Group and Individual)	2 Annuities (Group and Individual)	3 Disability Income (Group and Individual)	4 Long-Term Care (Group and Individual)	5 Deposit-Type Contracts	6 Totals
1. Alabama	AL	0	248,938			0	248,938
2. Alaska	AK	0	2,850			0	2,850
3. Arizona	AZ	0	269,740			0	269,740
4. Arkansas	AR	0	54,038			0	54,038
5. California	CA	0	7,197,858			0	7,197,858
6. Colorado	CO	0	61,378			0	61,378
7. Connecticut	CT	0	773,746			0	773,746
8. Delaware	DE	0	4,200			0	4,200
9. District of Columbia	DC	0	4,100			0	4,100
10. Florida	FL	0	3,702,956			0	3,702,956
11. Georgia	GA	0	306,153			0	306,153
12. Hawaii	HI	0	657,822			0	657,822
13. Idaho	ID	0	149,040			0	149,040
14. Illinois	IL	0	1,465,803			0	1,465,803
15. Indiana	IN	0	147,605			0	147,605
16. Iowa	IA	0	134,900			0	134,900
17. Kansas	KS	0	47,096			0	47,096
18. Kentucky	KY	0	386,678			0	386,678
19. Louisiana	LA	0	161,946			0	161,946
20. Maine	ME	0	386,899			0	386,899
21. Maryland	MD	0	141,620			0	141,620
22. Massachusetts	MA	0	1,632,538			0	1,632,538
23. Michigan	MI	0	1,368,841			0	1,368,841
24. Minnesota	MN	0	63,109			0	63,109
25. Mississippi	MS	0	118,728			0	118,728
26. Missouri	MO	0	192,614			0	192,614
27. Montana	MT	0	227,021			0	227,021
28. Nebraska	NE	0	30,375			0	30,375
29. Nevada	NV	0	621,476			0	621,476
30. New Hampshire	NH	0	201,110			0	201,110
31. New Jersey	NJ	0	1,206,345			0	1,206,345
32. New Mexico	NM	0	177,693			0	177,693
33. New York	NY	0	48,887			0	48,887
34. North Carolina	NC	0	647,342			0	647,342
35. North Dakota	ND	0	33,288			0	33,288
36. Ohio	OH	0	4,322,372			0	4,322,372
37. Oklahoma	OK	0	22,948			0	22,948
38. Oregon	OR	0	20,929			0	20,929
39. Pennsylvania	PA	0	792,378			0	792,378
40. Rhode Island	RI	0	455,480			0	455,480
41. South Carolina	SC	0	268,001			0	268,001
42. South Dakota	SD	0	203,061			0	203,061
43. Tennessee	TN	0	2,282,295			0	2,282,295
44. Texas	TX	0	4,598,533			0	4,598,533
45. Utah	UT	0	688,256			0	688,256
46. Vermont	VT	0	42,038			0	42,038
47. Virginia	VA	0	809,609			0	809,609
48. Washington	WA	0	1,186,694			0	1,186,694
49. West Virginia	WV	0	52,464			0	52,464
50. Wisconsin	WI	0	68,999			0	68,999
51. Wyoming	WY	0	25,321			0	25,321
52. American Samoa	AS	0	0			0	0
53. Guam	GU	0	0			0	0
54. Puerto Rico	PR	0	0			0	0
55. U.S. Virgin Islands	VI	0	0			0	0
56. Northern Mariana Islands	MP	0	0			0	0
57. Canada	CAN	0	0			0	0
58. Aggregate other alien	OT	0	0			0	0
59. Total		0	38,714,111	0	0	0	38,714,111

SCHEDULE Y

PART 1A - DETAILS OF INSURANCE HOLDING COMPANY SYSTEM

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

SCHEDULE Y

PART 1A - DETAILS OF INSURANCE HOLDING COMPANY SYSTEM

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

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

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

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

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

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PART 1A - DETAILS OF INSURANCE HOLDING COMPANY SYSTEM

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

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

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

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

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

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

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

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

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

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

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0000			04-1590850				Trailside MM Member LLC	DE	NIA	C.M. Life Insurance Company	Ownership	7.370	MMLIC		
0000			83-1325764				Washington Gateway Two LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	66.810	MMLIC		
0000			83-1325764				Washington Gateway Two LLC	DE	NIA	C.M. Life Insurance Company	Ownership	28.190	MMLIC		
0000			32-0574045				Washington Gateway Three LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	83.781	MMLIC		
0000							MALIC Debt Participations LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000							Invesco Ltd	BMU	NIA	MM Asset Management Holding LLC	Ownership	18.200	MMLIC		
0000							Barings US Loan Fund Series	DE	NIA	Barings LLC	Ownership	0.028	MMLIC		
0000							Barings Global Private Loan Fund	LUX	NIA	Barings LLC	Ownership	13.475	MMLIC		
0000							KKR MM Project Vector LP	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	90.000	MMLIC		
0000							Mass360 Commerical Real Estate Debt Partners LLC	CA	NIA	Massachusetts Mutual Life Insurance Company	Ownership	81.000	MMLIC		
0000							Mass360 Commerical Real Estate Debt Partners LLC	CA	NIA	C.M. Life Insurance Company	Ownership	9.000	MMLIC		
0000			04-1590850				Barings Developed Europe Private Loan Fund 1 SCSp	LUX	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000							Barings Developed Europe Real Estate Debt Fund	NC	NIA	Massachusetts Mutual Life Insurance Company	Ownership	68.671	MMLIC		
0000							Barings Developed Europe Real Estate Debt Fund	NC	NIA	MassMutual Ascend Life Insurance Company	Ownership	31.330	MMLIC		
0000							Barings Umbrella Fund plc - Barings Global Investment Grade	IRL	NIA	Massachusetts Mutual Life Insurance Company	Ownership	52.550	MMLIC		
0000							Barings CLO LTD 2018-III	CYM	NIA	Barings LLC	Influence		MMLIC		
0000							Babson LP-II	CYM	NIA	Barings LLC	Influence		MMLIC		
0000							Barings Loan Partners CLO-III	CYM	NIA	Barings LLC	Influence		MMLIC		
0000							Barings CLO Ltd 2025-III	CYM	NIA	Barings LLC	Influence		MMLIC		
0000							Barings CLO Ltd 2025-VI	CYM	NIA	Barings LLC	Influence		MMLIC		
0000							Barings CLO Ltd 2025-VII	CYM	NIA	Barings LLC	Influence		MMLIC		
0000							Barings CLO Ltd 2025-VII	CYM	NIA	Barings LLC	Influence		MMLIC		
0000							Barings CLO Romeo Warehouse	CYM	NIA	Barings LLC	Influence		MMLIC		
0000							Barings Euro CLO 2014-II BV	IRL	NIA	Barings LLC	Influence		MMLIC		
0000							Babson Capital Loan Strategies Master Fund LP	CYM	NIA	Barings LLC	Management		MMLIC		
0000							Barings China Aggregate Bond Private Securities Investment Fund	CHN	NIA	Barings LLC	Management		MMLIC		
0000			47-3790192				Barings Global High Yield Fund	MA	NIA	Barings LLC	Management		MMLIC		
0000			71-1018134				Great Lakes II LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	0.754	MMLIC		
0000			71-1018134				Great Lakes II LLC	DE	NIA	C.M. Life Insurance Company	Ownership	0.319	MMLIC		
0000			04-1590850				Wood Creek Venture Fund LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	40.000	MMLIC		
0000							Barings California Mortgage Fund IV	CA	NIA	Massachusetts Mutual Life Insurance Company	Ownership/Influence	100.000	MMLIC		
0000							Barings California Mortgage Fund IV	CA	NIA	Barings LLC	Influence		MMLIC		
0000							Barings Umbrella Fund LUX SCSp SICAV RAIF	LUX	NIA	Massachusetts Mutual Life Insurance Company	Ownership	22.972	MMLIC		
0000							Barings Umbrella Fund LUX SCSp SICAV RAIF	LUX	NIA	C.M. Life Insurance Company	Ownership	1.997	MMLIC		

SCHEDULE Y

PART 1A - DETAILS OF INSURANCE HOLDING COMPANY SYSTEM

1 Group Code	2 Group Name	3 NAIC Company Code	4 ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries Or Affiliates	9 Domiciliary Location	10 Relationship to Reporting Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	13 If Control is Ownership Provide Percentage	14 Ultimate Controlling Entity(ies)/Person(s)	15 Is an SCA Filing Required? (Yes/No)	16 *
0000			82-2285211				Calgary Railway Holding LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	90.000	MMLIC		
0000			82-3307907				Cornbrook PRS Holdings LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	96.080	MMLIC		
0000			95-4207717				Cornerstone California Mortgage Fund I LLC	CA	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000			95-4207717				Cornerstone California Mortgage Fund II LLC	CA	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000			95-4207717				Cornerstone California Mortgage Fund III LLC	CA	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000			56-2630592				Cornerstone Fort Pierce Development LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	84.388	MMLIC		
0000			56-2630592				Cornerstone Fort Pierce Development LLC	DE	NIA	C.M. Life Insurance Company	Ownership	5.578	MMLIC		
0000			61-1750537				Cornerstone Permanent Mortgage Fund II	MA	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000			61-1750537				Cornerstone Permanent Mortgage Fund II	MA	NIA	Barings LLC	Management		MMLIC		
0000							Cornerstone Permanent Mortgage Fund III LLC	MA	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000			61-1793735				Cornerstone Permanent Mortgage Fund IV	MA	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000			82-2783393				Danville Riverwalk Venture, LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	93.860	MMLIC		
0000			04-1590850				Euro Real Estate Holdings LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	50.000	MMLIC		
0000			20-3347091				Fan Pier Development LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	59.150	MMLIC		
0000			20-3347091				Fan Pier Development LLC	DE	NIA	C.M. Life Insurance Company	Ownership	5.850	MMLIC		
0000			04-1590850				GIA EU Holdings LLC - Avalon Spain	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000			04-1590850				GIA EU Holdings LLC- GIA Italy SCSp	MA	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000			04-1590850				GIA EU Holdings LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	95.000	MMLIC		
0000			81-5360103				Landmark Manchester Holdings LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000			13-1935920				MMLIC Debt Participations LLC	DE	NIA	Massachusetts Mutual Ascend	Ownership	100.000	MMLIC		
0000			04-1590850				MM Brookhaven Member LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	95.000	MMLIC		
0000			04-1590850				MM Ascend Mtg. Lending LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000			04-1590850				MM Kannapolis Industrial Member LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	87.080	MMLIC		
0000			04-1590850				MM Kannapolis Industrial Member LLC	DE	NIA	Massachusetts Mutual Ascend	Ownership	12.920	MMLIC		
0000			04-1590850				MM East South Crossing Member LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	95.000	MMLIC		
0000							MM Fremont Member LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000			04-1590850				MM Horizon Savannah Member LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	88.710	MMLIC		
0000			04-1590850				MM Horizon Savannah Member LLC	DE	NIA	C.M. Life Insurance Company	Ownership	7.220	MMLIC		
0000			04-1590850				MM Horizon Savannah Member II LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	84.270	MMLIC		
0000			04-1590850				MM Horizon Savannah Member II LLC	DE	NIA	C.M. Life Insurance Company	Ownership	3.690	MMLIC		

SCHEDULE Y

PART 1A - DETAILS OF INSURANCE HOLDING COMPANY SYSTEM

1 Group Code	2 Group Name	3 NAIC Company Code	4 ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries Or Affiliates	9 Domiciliary Location	10 Relationship to Reporting Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	13 If Control is Ownership Provide Percentage	14 Ultimate Controlling Entity(ies)/Person(s)	15 Is an SCA Filing Required? (Yes/No)	16 *
0000			04-1590850				MM Horizon Savannah Member II LLC	DE	NIA	Massachusetts Mutual Ascend	Ownership	7.600	MMLIC		
0000			04-1590850				MM Ironhead Commerce Center	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	75.210	MMLIC		
0000			04-1590850				MM Ironhead Commerce Center	DE	NIA	Massachusetts Mutual Ascend	Ownership	19.790	MMLIC		
0000							BRAVA5 MM Investor LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000							BRAVA5 MALIC Investor LLC	DE	NIA	MassMutual Ascend Life Insurance Company	Ownership	100.000	MMLIC		
0000							MM Ironhead Commerce Center Member LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000							MM 425 Montgomery Member LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	78.355	MMLIC		
0000							MM 425 Montgomery Member LLC	DE	NIA	Massachusetts Mutual Ascend	Ownership	21.645	MMLIC		
0000							MM 550 Corporate Member LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000							MM Ascend DS Investor LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000							MM Century Square LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000							MM Horizon Savannah Member III LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	88.710	MMLIC		
0000							MM Horizon Savannah Member III LLC	DE	NIA	C.M. Life Insurance Company	Ownership	3.690	MMLIC		
0000							MM Horizon Savannah Member III LLC	DE	NIA	Massachusetts Mutual Ascend	Ownership	7.600	MMLIC		
0000							MM Liberty Centre LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000			04-1590850				MM National Self-Storage Program Member LLC	DE	NIA	C.M. Life Insurance Company	Ownership	98.000	MMLIC		
0000							MM Park City Investor LLC	NC	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000							MM Park City Investor LLC	NC	NIA	Massachusetts Mutual Ascend	Influence		MMLIC		
0000			04-1590850				MM ReDiscover Member LLC	DE	NIA	Massachusetts Mutual Ascend	Influence		MMLIC		
0000			04-1590850				MM ReDiscover Member LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000			04-1590850				MM Liberty Centre Member LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	82.000	MMLIC		
0000			04-1590850				MM Century Square Member LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	68.560	MMLIC		
0000			04-1590850				MM Century Square Member LLC	DE	NIA	C.M. Life Insurance Company	Ownership	3.120	MMLIC		
0000			04-1590850				MM Stowe Investor LLC	NC	NIA	Massachusetts Mutual Life Insurance Company	Ownership	13.700	MMLIC		
0000			04-1590850				MM Virginian Investor LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000			04-1590850				MM 340 Madison Member LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	96.721	MMLIC		
0000			04-1590850				MM 340 Madison Member LLC	DE	NIA	Massachusetts Mutual Ascend	Ownership	3.279	MMLIC		
0000			04-1590850				MM 1370 AVE OF AM LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	90.000	MMLIC		
0000			04-1590850				MM 1370 AVE OF AM LLC	DE	NIA	C.M. Life Insurance Company	Ownership	3.330	MMLIC		
0000			04-1590850				MM 1400 E 4th Street Member LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	94.000	MMLIC		
0000			04-1590850				Miami Douglas Four MM LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000			04-1590850				MM Five50West Member LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	88.750	MMLIC		

SCHEDULE Y

PART 1A - DETAILS OF INSURANCE HOLDING COMPANY SYSTEM

1 Group Code	2 Group Name	3 NAIC Company Code	4 ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries Or Affiliates	9 Domiciliary Location	10 Relationship to Reporting Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	13 If Control is Ownership Provide Percentage	14 Ultimate Controlling Entity(ies)/Person(s)	15 Is an SCA Filing Required? (Yes/No)	16 *
0000			04-1590850				MM Five50West Member LLC	DE	NIA	C.M. Life Insurance Company	Ownership	11.250	MMLIC		
0000			04-1590850				MM Breton Village Member LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	81.130	MMLIC		
0000			04-1590850				MM Breton Village Member LLC	DE	NIA	C.M. Life Insurance Company	Ownership	16.980	MMLIC		
0000			80-0948028				One Harbor Shore LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	86.440	MMLIC		
0000			80-0948028				One Harbor Shore LLC	DE	NIA	C.M. Life Insurance Company	Ownership	8.550	MMLIC		
0000			04-1590850				Paco France Logistics LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	50.000	MMLIC		
0000							Salomon Brothers Commercial Mortgage Trust 2001-MM	DE	NIA	Barings Real Estate Advisers LLC	Influence		MMLIC		
0000			04-1590850				Trailside MM Member II LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	47.120	MMLIC		
0000			82-3250684				Unna, Dortmund Holding LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	50.000	MMLIC		
0000			45-5401109				Washington Gateway Apartments Venture LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	91.000	MMLIC		
0000			45-5401109				Washington Gateway Apartments Venture LLC	DE	NIA	C.M. Life Insurance Company	Ownership	4.800	MMLIC		
0000			88-3861481				West 37th Street Hotel LLC	DE	NIA	Massachusetts Mutual Life Insurance Company	Ownership	93.800	MMLIC		
0000			88-3861481				West 37th Street Hotel LLC	DE	NIA	C.M. Life Insurance Company	Ownership	6.200	MMLIC		
0000			02-0769954		0000916053	OQ	MassMutual Select Small Capital Value Equity Fund	MA	NIA	Massachusetts Mutual Life Insurance Company	Influence		MMLIC		
0000			47-3529636				MML Series II Dynamic Bond Fund	MA	NIA	Massachusetts Mutual Life Insurance Company	Influence		MMLIC		
0000			45-1618222		0000916053	OQ	MML SER INVT FD II ISHARES 80/20 ALLOCATION FD	MA	NIA	Massachusetts Mutual Life Insurance Company	Ownership	21.387	MMLIC		
0000			45-1618046		0000916053	OQ	MassMutual ishares 60/40 Allocation Fund	MA	NIA	Massachusetts Mutual Life Insurance Company	Ownership	43.767	MMLIC		
0000			04-3556992		0000916053	OQ	MassMutual Blue Chip Growth Fund	MA	NIA	Massachusetts Mutual Life Insurance Company	Ownership	67.722	MMLIC		
0000			04-3277549		0000916053	OQ	MassMutual Core Bond Fund	MA	NIA	Massachusetts Mutual Life Insurance Company	Ownership/Influence	2.481	MMLIC		
0000			01-0821120		0000916053	OQ	MassMutual Diversified Value Fund	MA	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000			03-0532475		0000916053	OQ	MassMutual Inflation-Protected and Income Fund	MA	NIA	Massachusetts Mutual Life Insurance Company	Ownership	40.120	MMLIC		
0000			04-3512596		0000916053	OQ	MassMutual Mid Cap Growth Fund	MA	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000			04-3464165		0000916053	OQ	MassMutual Premier Diversified Bond Fund	MA	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000			04-3557000		0000916053	OQ	MassMutual Select Overseas Fund	MA	NIA	Massachusetts Mutual Life Insurance Company	Ownership	100.000	MMLIC		
0000			04-3520009		0000916053	OQ	MassMutual High Yield Fund	MA	NIA	Massachusetts Mutual Life Insurance Company	Ownership	20.318	MMLIC		

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

SCHEDULE Y

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

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

SCHEDULE Y

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

SCHEDULE Y

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

1	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)
	45-1618222	MassMutual Select 80/20 Allocation Fund	(13,844)								(13,844)	
	02-0769954	MassMutual Small Cap Value Equity Fund	(10,709)								(10,709)	
	42-1710935	MassMutual Select Mid-Cap Value Fund	(10,006)								(10,006)	
	04-3464165	MassMutual Premier Diversified Bond Fund	(8,612)								(8,612)	
	04-1590850	Miami Douglas Three MM, LLC	(7,951)	11,890,781							11,882,829	
	03-0532475	MassMutual Inflation-Protected and Income Fund	(7,704)								(7,704)	
	45-1618262	MassMutual 40/60 Allocation Fund	(7,584)								(7,584)	
	04-3539084	MassMutual Disciplined Growth Fund	(6,808)								(6,808)	
		Barings US Loan Fund Series	(6,306)								(6,306)	
	45-1618046	MassMutual 60/40 Allocation Fund	(4,576)								(4,576)	
		MassMutual Strategic Bond Fund	(2,762)								(2,762)	
	03-0532464	MassMutual RetireSMART In Retirement Fund	(1,740)								(1,740)	
	46-3289207	MassMutual RetireSMART 2055 Fund	(1,130)								(1,130)	
	27-1933389	MassMutual RetireSMART 2035 Fund	(771)								(771)	
	04-3424705	MassMutual Small Cap Opportunities Fund	(722)								(722)	
		MassMutual RetireSMART by JPMorgan 2045 Fund	(679)								(679)	
	36-4868350	Barings Asset-Based Income Fund (US) LP	7,077	(7,077)							0	
		Barings Miller Investment Trust	34,290	(561,301)							(527,012)	
		CML Special Situations Investor LLC	57,399	(57,399)							0	
		Great Lakes III LP	219,048	(219,048)							0	
	88-3861481	West 37th Street Hotel LLC	612,824	(404,455)							208,369	
	82-3867745	Barings Global Real Assets Fund LP	4,077,501	(5,743,952)							(1,666,451)	
		Sleeper Street LLC		(1,998,812,616)							(1,998,812,616)	
	04-3313782	MassMutual International LLC		(300,704,123)							(300,704,123)	
	04-1590850	DPI-ARES Mortgage Lending SPV, LLC		(300,000,000)							(300,000,000)	
	04-1590850	DPI Acres Capital SPV LLC		(107,811,706)							(107,811,706)	
		MassMutual Mortgage Lending LLC		(94,626,750)							(94,626,750)	
	04-1590850	MM Horizon Savannah Member LLC		(47,788,007)							(47,788,007)	
	04-1590850	Berkshire Way LLC		(32,649,731)							(32,649,731)	
	04-1590850	MM Private Equity Intercontinental LLC		(8,853,796)							(8,853,796)	
	04-1590850	MM Direct Private Invetment Holding		(5,658,587)							(5,658,587)	
	98-1332384	Barings RE Credit Strategies VII LP		(2,676,848)							(2,676,848)	
		MM CM Holding LLC		(2,170,815)							(2,170,815)	
	98-1612604	Barings Middle Market CLO Ltd 2021-I		(2,002,040)							(2,002,040)	
		Barings Real Estate European Value Add I SCSp		(1,597,688)							(1,597,688)	
		E2E Affordable Housing Debt Fund LLC		(1,215,567)							(1,215,567)	
	04-1590850	Trailside MM Member II LLC		(1,169,319)							(1,169,319)	
	56-2630592	Cornerstone Fort Pierce Development LLC		(998,635)							(998,635)	
	04-1590850	Trailside MM Member LLC		(655,666)							(655,666)	
	04-1590850	MM MD1 Station Member LLC		(600,000)							(600,000)	
		Barings Euro CLO 2021-II DAC		(589,834)							(589,834)	

SCHEDULE Y

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

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

SCHEDULE Y

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

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

SCHEDULE Y

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

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

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

REQUIRED FILINGS

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

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

SUPPLEMENTAL FILINGS

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

	MARCH FILING	
10.	Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1? (Not applicable to fraternal benefit societies)	NO
11.	Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	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?	NO
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?	YES
20.	Will the Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI be filed with the state of domicile and electronically with the NAIC by March 1?	NO
21.	Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Average Market Value) be filed with the state of domicile and electronically with the NAIC by March 1?	NO
22.	Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value) be filed with the state of domicile and electronically with the NAIC by March 1?	NO
23.	Will the C-3 RBC Certifications required under C-3 Phase I be filed with the state of domicile and electronically with the NAIC by March 1?	YES
24.	Will the C-3 RBC Certifications required under C-3 Phase II be filed with the state of domicile and electronically with the NAIC by March 1?	YES
25.	Will the Actuarial Certifications Related to Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities be filed with the state of domicile and electronically with the NAIC by March 1?	NO

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

26.	Will the Actuarial Opinion required by the Modified Guaranteed Annuity Model Regulation be filed with the state of domicile and electronically with the NAIC by March 1?	NO
27.	Will the Actuarial Certification regarding the use of 2001 Preferred Class Tables required by the Model Regulation Permitting the Recognition of Preferred Mortality Tables for Use in Determining Minimum Reserve Liabilities be filed with the state of domicile and electronically with the NAIC by March 1?	NO
28.	Will the Worker's Compensation Carve-Out Supplement be filed by March 1? (Not applicable to fraternal benefit societies)	NO
29.	Will Supplemental Schedule O be filed with the state of domicile and the NAIC by March 1?	YES
30.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	NO
31.	Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1?	NO
32.	Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1?	NO
33.	Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?	NO
34.	Will the VM-20 Reserves Supplement be filed with the state of domicile and the NAIC by March 1?	NO
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?	NO
41.	Will the Supplemental Health Care Exhibit (Parts 1 and 2) be filed with the state of domicile and the NAIC by April 1?	NO
42.	Will the confidential Actuarial Memorandum required by Actuarial Guideline XXXVIII 8D be filed with the state of domicile by April 30?	NO
43.	Will the Supplemental Term and Universal Life Insurance Reinsurance Exhibit be filed with the state of domicile and the NAIC by April 1?	NO
44.	Will the Variable Annuities Supplement be filed with the state of domicile and the NAIC by April 1?	YES
45.	Will the confidential Executive Summary of the PBR Actuarial Report be filed with the state of domicile by April 1?	YES
46.	Will the confidential Life Summary of the PBR Actuarial Report be filed with the state of domicile by April 1?	NO
47.	Will the confidential Variable Annuities Summary of the PBR Actuarial Report be filed with the state of domicile by April 1?	YES
	AUGUST FILING	
48.	Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	YES

Explanations:

10. The data for this supplement is not required to be filed.
11. The data for this supplement is not required to be filed.
12. The data for this supplement is not required to be filed.
13. The data for this supplement is not required to be filed.
15. The data for this supplement is not required to be filed.
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32. The data for this supplement is not required to be filed.
33. The data for this supplement is not required to be filed.
34. 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.
40. The data for this supplement is not required to be filed.
41. The data for this supplement is not required to be filed.
42. The data for this supplement is not required to be filed.
43. The data for this supplement is not required to be filed.
46. The data for this supplement is not required to be filed.

Bar Codes:

10. SIS Stockholder Information Supplement [Document Identifier 420]

11. Medicare Supplement Insurance Experience Exhibit [Document Identifier 360]

12. Trusteed Surplus Statement [Document Identifier 490]

13. Participating Opinion for Exhibit 5 [Document Identifier 371]

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]

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

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

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

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

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

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

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

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

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

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

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

34. VM-20 Reserves Supplement [Document Identifier 456]

35. Health Care Receivables Supplement [Document Identifier 475]

38. Long-Term Care Experience Reporting Forms [Document Identifier 306]

39. Credit Insurance Experience Exhibit [Document Identifier 230]

40. Accident and Health Policy Experience Exhibit [Document Identifier 210]

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

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

43. Supplemental Term and Universal Life Insurance Reinsurance Exhibit [Document Identifier 345]

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

OVERFLOW PAGE FOR WRITE-INS

Additional Write-ins for Assets Line 25

	Current Year			Prior Year
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
2504. Other assets	420,532	399,033	21,499	361,749
2597. Summary of remaining write-ins for Line 25 from overflow page	420,532	399,033	21,499	361,749

SUPPLEMENT FOR THE YEAR 2025 OF THE ANNUITY INVESTORS LIFE INSURANCE COMPANY

SCHEDULE O SUPPLEMENT

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

Of The ANNUITY INVESTORS LIFE INSURANCE COMPANY
ADDRESS (City, State and Zip Code) Cincinnati , OH 45202
NAIC Group Code 0435 NAIC Company Code 93661 Employer's Identification Number (FEIN) 31-1021738

SUPPLEMENTAL SCHEDULE O - PART 1

Development of Incurred Losses
($000 Omitted)

Section A - Group Accident and Health

Years in Which Losses Were Incurred	Cumulative Net Amounts Paid Policyholders				
	1 2021	2 2022	3 2023	4 2024	5 2025(a)
1. Prior	0	0	0	0	
2. 2021					
3. 2022	XXX				
4. 2023	XXX	XXX			
5. 2024	XXX	XXX	XXX		
6. 2025	XXX	XXX	XXX	XXX	

Section B - Other Accident and Health

1. Prior	0	0	0	0	
2. 2021					
3. 2022	XXX				
4. 2023	XXX	XXX			
5. 2024	XXX	XXX	XXX		
6. 2025	XXX	XXX	XXX	XXX	

Section C - Credit Accident and Health

1. Prior	0	0	0	0	
2. 2021					
3. 2022	XXX				
4. 2023	XXX	XXX			
5. 2024	XXX	XXX	XXX		
6. 2025	XXX	XXX	XXX	XXX	

Section D -

1. Prior	0	0	0	0	
2. 2021					
3. 2022	XXX				
4. 2023	XXX	XXX			
5. 2024	XXX	XXX	XXX		
6. 2025	XXX	XXX	XXX	XXX	

Section E -

1. Prior	0	0	0	0	
2. 2021					
3. 2022	XXX				
4. 2023	XXX	XXX			
5. 2024	XXX	XXX	XXX		
6. 2025	XXX	XXX	XXX	XXX	

Section F -

1. Prior	0	0	0	0	
2. 2021					
3. 2022	XXX				
4. 2023	XXX	XXX			
5. 2024	XXX	XXX	XXX		
6. 2025	XXX	XXX	XXX	XXX	

Section G -

1. Prior	0	0	0	0	
2. 2021					
3. 2022	XXX				
4. 2023	XXX	XXX			
5. 2024	XXX	XXX	XXX		
6. 2025	XXX	XXX	XXX	XXX	

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

SCHEDULE O SUPPLEMENT

SUPPLEMENTAL SCHEDULE O - PART 2

Development of Incurred Losses

($000 Omitted)

Section A - Group Accident and Health

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	0	0	0	0	
2. 2021					
3. 2022	XXX				
4. 2023	XXX	XXX			
5. 2024	XXX	XXX	XXX		
6. 2025	XXX	XXX	XXX	XXX	

Section B - Other Accident and Health

1. Prior	0	0	0	0	
2. 2021					
3. 2022	XXX				
4. 2023	XXX	XXX			
5. 2024	XXX	XXX	XXX		
6. 2025	XXX	XXX	XXX	XXX	

Section C - Credit Accident and Health

1. Prior	0	0	0	0	
2. 2021					
3. 2022	XXX				
4. 2023	XXX	XXX			
5. 2024	XXX	XXX	XXX		
6. 2025	XXX	XXX	XXX	XXX	

Section D -

1. Prior	0	0	0	0	
2. 2021					
3. 2022	XXX				
4. 2023	XXX	XXX			
5. 2024	XXX	XXX	XXX		
6. 2025	XXX	XXX	XXX	XXX	

Section E -

1. Prior	0	0	0	0	
2. 2021					
3. 2022	XXX				
4. 2023	XXX	XXX			
5. 2024	XXX	XXX	XXX		
6. 2025	XXX	XXX	XXX	XXX	

Section F -

1. Prior	0	0	0	0	
2. 2021					
3. 2022	XXX				
4. 2023	XXX	XXX			
5. 2024	XXX	XXX	XXX		
6. 2025	XXX	XXX	XXX	XXX	

Section G -

1. Prior	0	0	0	0	
2. 2021					
3. 2022	XXX				
4. 2023	XXX	XXX			
5. 2024	XXX	XXX	XXX		
6. 2025	XXX	XXX	XXX	XXX	

SCHEDULE O SUPPLEMENT

SUPPLEMENTAL SCHEDULE O - PART 3

Development of Incurred Losses

($000 Omitted)

Section A - Group Accident and Health

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

Section B - Other 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 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 2023	4 2024	5 2025
1. 2021					
2. 2022	XXX				
3. 2023	XXX	XXX			
4. 2024	XXX	XXX	XXX		
5. 2025	XXX	XXX	XXX	XXX	

Section B - Other Accident and Health

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

Section C - Credit Accident and Health

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

Section D -

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

Section E -

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

Section F -

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

Section G -

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

SUPPLEMENTAL SCHEDULE O - PART 5

($000 OMITTED)

Reserve and Liability Methodology - Exhibits 6 and 8

Line of Business	1 Methodology	2 Amount
1. Industrial Life		
2. Ordinary Life		
3. Individual Annuity	Standard Factor	3,883
4. Supplementary Contracts		
5. Credit Life		
6. Group Life		
7. Group Annuities		
8 Group Accident and Health		
9 Credit Accident and Health		
10. Other Accident and Health		
11. Total		3,883

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

SUPPLEMENT FOR THE YEAR 2025 OF THE ANNUITY INVESTORS LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

FOR THE STATE OF: Alabama

NAIC Group Code 0435 NAIC Company Code 93661

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

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

SUPPLEMENT FOR THE YEAR 2025 OF THE ANNUITY INVESTORS LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

FOR THE STATE OF: Alaska

NAIC Group Code 0435 NAIC Company Code 93661

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

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

SUPPLEMENT FOR THE YEAR 2025 OF THE ANNUITY INVESTORS LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

FOR THE STATE OF: Arizona

NAIC Group Code 0435 NAIC Company Code 93661

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

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

SUPPLEMENT FOR THE YEAR 2025 OF THE ANNUITY INVESTORS LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

FOR THE STATE OF: Arkansas

NAIC Group Code 0435 NAIC Company Code 93661

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

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

SUPPLEMENT FOR THE YEAR 2025 OF THE ANNUITY INVESTORS LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

FOR THE STATE OF: California

NAIC Group Code 0435 NAIC Company Code 93661

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

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

SUPPLEMENT FOR THE YEAR 2025 OF THE ANNUITY INVESTORS LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

FOR THE STATE OF: Colorado

NAIC Group Code 0435 NAIC Company Code 93661

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

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SUPPLEMENT FOR THE YEAR 2025 OF THE ANNUITY INVESTORS LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

FOR THE STATE OF: Connecticut

NAIC Group Code 0435 NAIC Company Code 93661

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

9 3 6 6 1 2 0 2 5 6 0 0 0 8 1 0 0

SUPPLEMENT FOR THE YEAR 2025 OF THE ANNUITY INVESTORS LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

FOR THE STATE OF: Delaware

NAIC Group Code 0435 NAIC Company Code 93661

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

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

SUPPLEMENT FOR THE YEAR 2025 OF THE ANNUITY INVESTORS LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

FOR THE STATE OF: District of Columbia

NAIC Group Code 0435 NAIC Company Code 93661

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

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

SUPPLEMENT FOR THE YEAR 2025 OF THE ANNUITY INVESTORS LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

FOR THE STATE OF: Florida

NAIC Group Code 0435 NAIC Company Code 93661

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

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

SUPPLEMENT FOR THE YEAR 2025 OF THE ANNUITY INVESTORS LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

FOR THE STATE OF: Georgia

NAIC Group Code 0435 NAIC Company Code 93661

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

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

SUPPLEMENT FOR THE YEAR 2025 OF THE ANNUITY INVESTORS LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

FOR THE STATE OF: Hawaii

NAIC Group Code 0435 NAIC Company Code 93661

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

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

SUPPLEMENT FOR THE YEAR 2025 OF THE ANNUITY INVESTORS LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

FOR THE STATE OF: Idaho

NAIC Group Code 0435 NAIC Company Code 93661

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

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

SUPPLEMENT FOR THE YEAR 2025 OF THE ANNUITY INVESTORS LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

FOR THE STATE OF: Illinois

NAIC Group Code 0435 NAIC Company Code 93661

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

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

SUPPLEMENT FOR THE YEAR 2025 OF THE ANNUITY INVESTORS LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

FOR THE STATE OF: Indiana

NAIC Group Code 0435 NAIC Company Code 93661

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

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

SUPPLEMENT FOR THE YEAR 2025 OF THE ANNUITY INVESTORS LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

FOR THE STATE OF: Iowa

NAIC Group Code 0435 NAIC Company Code 93661

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

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SUPPLEMENT FOR THE YEAR 2025 OF THE ANNUITY INVESTORS LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

FOR THE STATE OF: Kansas

NAIC Group Code 0435 NAIC Company Code 93661

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

9 3 6 6 1 2 0 2 5 6 0 0 1 8 1 0 0

SUPPLEMENT FOR THE YEAR 2025 OF THE ANNUITY INVESTORS LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

FOR THE STATE OF: Kentucky

NAIC Group Code 0435 NAIC Company Code 93661

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

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

SUPPLEMENT FOR THE YEAR 2025 OF THE ANNUITY INVESTORS LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

FOR THE STATE OF: Louisiana

NAIC Group Code 0435 NAIC Company Code 93661

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

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

SUPPLEMENT FOR THE YEAR 2025 OF THE ANNUITY INVESTORS LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

FOR THE STATE OF: Maine

NAIC Group Code 0435 NAIC Company Code 93661

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

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

SUPPLEMENT FOR THE YEAR 2025 OF THE ANNUITY INVESTORS LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

FOR THE STATE OF: Maryland

NAIC Group Code 0435 NAIC Company Code 93661

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

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

SUPPLEMENT FOR THE YEAR 2025 OF THE ANNUITY INVESTORS LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

FOR THE STATE OF: Massachusetts

NAIC Group Code 0435 NAIC Company Code 93661

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

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

SUPPLEMENT FOR THE YEAR 2025 OF THE ANNUITY INVESTORS LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

FOR THE STATE OF: Michigan

NAIC Group Code 0435 NAIC Company Code 93661

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

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

SUPPLEMENT FOR THE YEAR 2025 OF THE ANNUITY INVESTORS LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

FOR THE STATE OF: Minnesota

NAIC Group Code 0435 NAIC Company Code 93661

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

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

SUPPLEMENT FOR THE YEAR 2025 OF THE ANNUITY INVESTORS LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

FOR THE STATE OF: Mississippi

NAIC Group Code 0435 NAIC Company Code 93661

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

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

SUPPLEMENT FOR THE YEAR 2025 OF THE ANNUITY INVESTORS LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

FOR THE STATE OF: Missouri

NAIC Group Code 0435 NAIC Company Code 93661

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

9 3 6 6 1 2 0 2 5 6 0 0 2 7 1 0 0

SUPPLEMENT FOR THE YEAR 2025 OF THE ANNUITY INVESTORS LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

FOR THE STATE OF: Montana

NAIC Group Code 0435 NAIC Company Code 93661

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

9 3 6 6 1 2 0 2 5 6 0 0 2 8 1 0 0

SUPPLEMENT FOR THE YEAR 2025 OF THE ANNUITY INVESTORS LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

FOR THE STATE OF: Nebraska

NAIC Group Code 0435 NAIC Company Code 93661

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

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

SUPPLEMENT FOR THE YEAR 2025 OF THE ANNUITY INVESTORS LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

FOR THE STATE OF: Nevada

NAIC Group Code 0435 NAIC Company Code 93661

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

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

SUPPLEMENT FOR THE YEAR 2025 OF THE ANNUITY INVESTORS LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

FOR THE STATE OF: New Hampshire

NAIC Group Code 0435 NAIC Company Code 93661

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

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

SUPPLEMENT FOR THE YEAR 2025 OF THE ANNUITY INVESTORS LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

FOR THE STATE OF: New Jersey

NAIC Group Code 0435 NAIC Company Code 93661

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

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

SUPPLEMENT FOR THE YEAR 2025 OF THE ANNUITY INVESTORS LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

FOR THE STATE OF: New Mexico

NAIC Group Code 0435 NAIC Company Code 93661

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

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

SUPPLEMENT FOR THE YEAR 2025 OF THE ANNUITY INVESTORS LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

FOR THE STATE OF: New York

NAIC Group Code 0435 NAIC Company Code 93661

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

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

SUPPLEMENT FOR THE YEAR 2025 OF THE ANNUITY INVESTORS LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

FOR THE STATE OF: North Carolina

NAIC Group Code 0435 NAIC Company Code 93661

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

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

SUPPLEMENT FOR THE YEAR 2025 OF THE ANNUITY INVESTORS LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

FOR THE STATE OF: North Dakota

NAIC Group Code 0435 NAIC Company Code 93661

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

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

SUPPLEMENT FOR THE YEAR 2025 OF THE ANNUITY INVESTORS LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

FOR THE STATE OF: Ohio

NAIC Group Code 0435 NAIC Company Code 93661

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

9 3 6 6 1 2 0 2 5 6 0 0 3 7 1 0 0

SUPPLEMENT FOR THE YEAR 2025 OF THE ANNUITY INVESTORS LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

FOR THE STATE OF: Oklahoma

NAIC Group Code 0435 NAIC Company Code 93661

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

9 3 6 6 1 2 0 2 5 6 0 0 3 8 1 0 0

SUPPLEMENT FOR THE YEAR 2025 OF THE ANNUITY INVESTORS LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

FOR THE STATE OF: Oregon

NAIC Group Code 0435 NAIC Company Code 93661

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

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

SUPPLEMENT FOR THE YEAR 2025 OF THE ANNUITY INVESTORS LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

FOR THE STATE OF: Pennsylvania

NAIC Group Code 0435 NAIC Company Code 93661

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

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

SUPPLEMENT FOR THE YEAR 2025 OF THE ANNUITY INVESTORS LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

FOR THE STATE OF: Rhode Island

NAIC Group Code 0435 NAIC Company Code 93661

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

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

SUPPLEMENT FOR THE YEAR 2025 OF THE ANNUITY INVESTORS LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

FOR THE STATE OF: South Carolina

NAIC Group Code 0435 NAIC Company Code 93661

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

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

SUPPLEMENT FOR THE YEAR 2025 OF THE ANNUITY INVESTORS LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

FOR THE STATE OF: South Dakota

NAIC Group Code 0435 NAIC Company Code 93661

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

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

SUPPLEMENT FOR THE YEAR 2025 OF THE ANNUITY INVESTORS LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

FOR THE STATE OF: Tennessee

NAIC Group Code 0435 NAIC Company Code 93661

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

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

SUPPLEMENT FOR THE YEAR 2025 OF THE ANNUITY INVESTORS LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

FOR THE STATE OF: Texas

NAIC Group Code 0435 NAIC Company Code 93661

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

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

SUPPLEMENT FOR THE YEAR 2025 OF THE ANNUITY INVESTORS LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

FOR THE STATE OF: Utah

NAIC Group Code 0435 NAIC Company Code 93661

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

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

SUPPLEMENT FOR THE YEAR 2025 OF THE ANNUITY INVESTORS LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

FOR THE STATE OF: Vermont

NAIC Group Code 0435 NAIC Company Code 93661

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

9 3 6 6 1 2 0 2 5 6 0 0 4 7 1 0 0

SUPPLEMENT FOR THE YEAR 2025 OF THE ANNUITY INVESTORS LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

FOR THE STATE OF: Virginia

NAIC Group Code 0435 NAIC Company Code 93661

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

9 3 6 6 1 2 0 2 5 6 0 0 4 8 1 0 0

SUPPLEMENT FOR THE YEAR 2025 OF THE ANNUITY INVESTORS LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

FOR THE STATE OF: Washington

NAIC Group Code 0435 NAIC Company Code 93661

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

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

SUPPLEMENT FOR THE YEAR 2025 OF THE ANNUITY INVESTORS LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

FOR THE STATE OF: West Virginia

NAIC Group Code 0435 NAIC Company Code 93661

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

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

SUPPLEMENT FOR THE YEAR 2025 OF THE ANNUITY INVESTORS LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

FOR THE STATE OF: Wisconsin

NAIC Group Code 0435 NAIC Company Code 93661

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

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

SUPPLEMENT FOR THE YEAR 2025 OF THE ANNUITY INVESTORS LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

FOR THE STATE OF: Wyoming

NAIC Group Code 0435 NAIC Company Code 93661

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

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

SUPPLEMENT FOR THE YEAR 2025 OF THE ANNUITY INVESTORS LIFE INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

FOR THE STATE OF: Puerto Rico

NAIC Group Code 0435 NAIC Company Code 93661

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