



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

QUARTERLY STATEMENT

AS OF MARCH 31, 2025
OF THE CONDITION AND AFFAIRS OF THE

American Retirement Life Insurance Company

NAIC Group Code 0917 0901 NAIC Company Code 88366 Employer's ID Number 59-2760189
(Current) (Prior)

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

Country of Domicile _____ United States of America

Licensed as business type: _____ Life, Accident and Health Fraternal Benefit Societies

Incorporated/Organized 05/12/1978 Commenced Business 11/27/1978

Statutory Home Office 4400 East Commons Way, Suite 125, Columbus, OH, US 43219
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 500 Great Circle Road
(Street and Number) Nashville, TN, US 37228, (Area Code) (Telephone Number)

Mail Address 500 Great Circle Road, Nashville, TN, US 37228
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 500 Great Circle Road
(Street and Number) Nashville, TN, US 37228, (Area Code) (Telephone Number)

Internet Website Address www.HCSC.com

Statutory Statement Contact Renee Wilkins Feldman, 512-531-1465
(Name) CSBFinRpt@cignahealthcare.com, 512-467-1399
(E-mail Address) (FAX Number)

OFFICERS

Chief Executive Officer, President Stephen Harris # Treasurer Lillian Sutton #
Secretary Arlene Lim #

OTHER

Kimberly Green #, Vice President, Compliance Scott Womack #, Vice President, Tax

DIRECTORS OR TRUSTEES
Kimberly Green # Sachin Gupta # Stephen Harris #
Lillian Sutton # Scott Womack #

State of Tennessee SS:
County of Davidson

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.

Stephen Harris
Chief Executive Officer, President

Arlene Lim
Secretary

Lillian Sutton
Treasurer

Subscribed and sworn to before me this
day of _____

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

Yes No

ASSETS

	Current Statement Date			4 December 31 Prior Year Net Admitted Assets
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	
1. Bonds	157,719,107	0	157,719,107	129,834,016
2. Stocks:				
2.1 Preferred stocks	0	0	0	0
2.2 Common stocks	0	0	0	0
3. Mortgage loans on real estate:				
3.1 First liens	0	0	0	0
3.2 Other than first liens.....	0	0	0	0
4. Real estate:				
4.1 Properties occupied by the company (less \$ encumbrances)	0	0	0	0
4.2 Properties held for the production of income (less \$ encumbrances)	0	0	0	0
4.3 Properties held for sale (less \$ encumbrances)	0	0	0	0
5. Cash (\$ 30,010,626), cash equivalents (\$ 53,329) and short-term investments (\$)	30,063,952	0	30,063,952	10,342,137
6. Contract loans (including \$ 0 premium notes)	1,641	0	1,641	1,510
7. Derivatives		0	0	0
8. Other invested assets	1,054,112	0	1,054,112	1,055,412
9. Receivables for securities	2,306	0	2,306	0
10. Securities lending reinvested collateral assets		0	0	0
11. Aggregate write-ins for invested assets	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11)	188,841,118	0	188,841,118	141,233,075
13. Title plants less \$ 0 charged off (for Title insurers only)	0	0	0	0
14. Investment income due and accrued	1,516,057	0	1,516,057	1,235,487
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection	551,595	7,728	543,867	568,686
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ 0 earned but unbilled premiums)	0	0	0	0
15.3 Accrued retrospective premiums (\$ 0) and contracts subject to redetermination (\$ 0)	0	0	0	0
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers	128,649	0	128,649	74,569
16.2 Funds held by or deposited with reinsured companies	0	0	0	0
16.3 Other amounts receivable under reinsurance contracts	50	0	50	17,576
17. Amounts receivable relating to uninsured plans	0	0	0	0
18.1 Current federal and foreign income tax recoverable and interest thereon		0	0	33,177,873
18.2 Net deferred tax asset	6,394,992	4,257,504	2,137,488	2,103,336
19. Guaranty funds receivable or on deposit	558,060	0	558,060	558,060
20. Electronic data processing equipment and software	0	0	0	0
21. Furniture and equipment, including health care delivery assets (\$ 0)	0	0	0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates	0	0	0	0
23. Receivables from parent, subsidiaries and affiliates	12,411	0	12,411	9,356
24. Health care (\$ 0) and other amounts receivable	672,895	672,895	0	0
25. Aggregate write-ins for other than invested assets	13,870	13,870	0	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	198,689,697	4,951,997	193,737,700	178,978,018
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0	0	0
28. Total (Lines 26 and 27)	198,689,697	4,951,997	193,737,700	178,978,018
DETAILS OF WRITE-INS				
1101.				
1102.				
1103.				
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)	0	0	0	0
2501. Other receivables and prepaid expenses	13,870	13,870	0	0
2502.				
2503.				
2598. Summary of remaining write-ins for Line 25 from overflow page	0	0	0	0
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	13,870	13,870	0	0

STATEMENT AS OF MARCH 31, 2025 OF THE AMERICAN RETIREMENT LIFE INSURANCE COMPANY
LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Statement Date	2 December 31 Prior Year
1. Aggregate reserve for life contracts \$ 481,522 less \$ 0 included in Line 6.3 (including \$ 0 Modco Reserve)	481,522	485,761
2. Aggregate reserve for accident and health contracts (including \$ 0 Modco Reserve)	40,753,287	39,657,313
3. Liability for deposit-type contracts (including \$ 0 Modco Reserve)	0	0
4. Contract claims:		
4.1 Life	11,428	6,492
4.2 Accident and health	37,454,281	32,225,266
5. Policyholders' dividends/refunds to members \$ 0 and coupons \$ 0 due and unpaid	0	0
6. Provision for policyholders' dividends, refunds to members and coupons payable in following calendar year - estimated amounts:		
6.1 Policyholders' dividends and refunds to members apportioned for payment (including \$ 0 Modco)	0	0
6.2 Policyholders' dividends and refunds to members not yet apportioned (including \$ 0 Modco)	0	0
6.3 Coupons and similar benefits (including \$ 0 Modco)	0	0
7. Amount provisionally held for deferred dividend policies not included in Line 6	0	0
8. Premiums and annuity considerations for life and accident and health contracts received in advance less \$ 0 discount; including \$ 815,623 accident and health premiums	509,803	815,623
9. Contract liabilities not included elsewhere:		
9.1 Surrender values on canceled contracts	0	0
9.2 Provision for experience rating refunds, including the liability of \$ 322,353 accident and health experience rating refunds of which \$ 0 is for medical loss ratio rebate per the Public Health Service Act	322,353	257,882
9.3 Other amounts payable on reinsurance, including \$ 0 assumed and \$ 0 ceded	0	0
9.4 Interest Maintenance Reserve	251,668	269,215
10. Commissions to agents due or accrued-life and annuity contracts \$ 0 , accident and health \$ 0 and deposit-type contract funds \$ 0	153,180	150,464
11. Commissions and expense allowances payable on reinsurance assumed	0	0
12. General expenses due or accrued	848,330	790,188
13. Transfers to Separate Accounts due or accrued (net) (including \$ 0 accrued for expense allowances recognized in reserves, net of reinsured allowances)	0	0
14. Taxes, licenses and fees due or accrued, excluding federal income taxes	1,478,183	1,262,067
15.1 Current federal and foreign income taxes, including \$ 0 on realized capital gains (losses)	543,902	0
15.2 Net deferred tax liability	0	0
16. Unearned investment income	0	0
17. Amounts withheld or retained by reporting entity as agent or trustee	17,015	0
18. Amounts held for agents' account, including \$ 0 agents' credit balances	0	0
19. Remittances and items not allocated	333,323	266,463
20. Net adjustment in assets and liabilities due to foreign exchange rates	0	0
21. Liability for benefits for employees and agents if not included above	0	0
22. Borrowed money \$ 0 and interest thereon \$ 0	0	0
23. Dividends to stockholders declared and unpaid	0	0
24. Miscellaneous liabilities:		
24.01 Asset valuation reserve	1,517,259	1,282,061
24.02 Reinsurance in unauthorized and certified (\$ 0) companies	0	0
24.03 Funds held under reinsurance treaties with unauthorized and certified (\$ 0) reinsurers	0	0
24.04 Payable to parent, subsidiaries and affiliates	1,243,168	1,392,607
24.05 Drafts outstanding	0	0
24.06 Liability for amounts held under uninsured plans	0	0
24.07 Funds held under coinsurance	0	0
24.08 Derivatives	0	0
24.09 Payable for securities	0	0
24.10 Payable for securities lending	0	0
24.11 Capital notes \$ 0 and interest thereon \$ 0	0	0
25. Aggregate write-ins for liabilities	77,241	64,747
26. Total liabilities excluding Separate Accounts business (Lines 1 to 25)	85,995,943	78,926,149
27. From Separate Accounts Statement	0	0
28. Total liabilities (Lines 26 and 27)	85,995,943	78,926,149
29. Common capital stock	2,000,000	2,000,000
30. Preferred capital stock	0	0
31. Aggregate write-ins for other than special surplus funds	0	0
32. Surplus notes	0	0
33. Gross paid in and contributed surplus	122,231,601	122,231,601
34. Aggregate write-ins for special surplus funds	0	0
35. Unassigned funds (surplus)	(16,489,844)	(24,179,732)
36. Less treasury stock, at cost:		
36.1 0 shares common (value included in Line 29 \$ 0)	0	0
36.2 0 shares preferred (value included in Line 30 \$ 0)	0	0
37. Surplus (Total Lines 31+32+33+34+35-36) (including \$ 0 in Separate Accounts Statement)	105,741,757	98,051,869
38. Totals of Lines 29, 30 and 37	107,741,757	100,051,869
39. Totals of Lines 28 and 38 (Page 2, Line 28, Col. 3)	193,737,700	178,978,018
DETAILS OF WRITE-INS		
2501. Escheat Liabilities	77,241	64,747
2502.	0	0
2503.	0	0
2598. Summary of remaining write-ins for Line 25 from overflow page	0	0
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	77,241	64,747
3101.	0	0
3102.	0	0
3103.	0	0
3198. Summary of remaining write-ins for Line 31 from overflow page	0	0
3199. Totals (Lines 3101 through 3103 plus 3198)(Line 31 above)	0	0
3401.	0	0
3402.	0	0
3403.	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	0	0

STATEMENT AS OF MARCH 31, 2025 OF THE AMERICAN RETIREMENT LIFE INSURANCE COMPANY
SUMMARY OF OPERATIONS

	1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
1. Premiums and annuity considerations for life and accident and health contracts	81,359,736	82,991,445	328,216,996
2. Considerations for supplementary contracts with life contingencies	0	0	0
3. Net investment income	1,776,209	1,357,056	6,019,517
4. Amortization of Interest Maintenance Reserve (IMR)	17,547	22,248	89,124
5. Separate Accounts net gain from operations excluding unrealized gains or losses	0	0	0
6. Commissions and expense allowances on reinsurance ceded	2,322	2,622	10,079
7. Reserve adjustments on reinsurance ceded	0	0	0
8. Miscellaneous Income:			
8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts	0	0	0
8.2 Charges and fees for deposit-type contracts	0	0	0
8.3 Aggregate write-ins for miscellaneous income	0	1,436	(17,540)
9. Totals (Lines 1 to 8.3)	83,155,814	84,374,807	334,318,176
10. Death benefits	15,075	20,169	65,744
11. Matured endowments (excluding guaranteed annual pure endowments)	0	0	0
12. Annuity benefits	0	0	0
13. Disability benefits and benefits under accident and health contracts	63,662,207	62,947,553	251,876,684
14. Coupons, guaranteed annual pure endowments and similar benefits	0	0	0
15. Surrender benefits and withdrawals for life contracts	8,556	0	2,617
16. Group conversions	0	0	0
17. Interest and adjustments on contract or deposit-type contract funds	0	0	0
18. Payments on supplementary contracts with life contingencies	0	0	0
19. Increase in aggregate reserves for life and accident and health contracts	1,091,736	276,710	3,009,870
20. Totals (Lines 10 to 19)	64,777,574	63,244,432	254,954,915
21. Commissions on premiums, annuity considerations, and deposit-type contract funds (direct business only)	2,068,069	2,872,401	10,144,480
22. Commissions and expense allowances on reinsurance assumed	0	0	0
23. General insurance expenses and fraternal expenses	3,668,442	4,074,914	15,730,157
24. Insurance taxes, licenses and fees, excluding federal income taxes	2,075,499	2,139,787	7,973,447
25. Increase in loading on deferred and uncollected premiums	(46,727)	(29,894)	82,006
26. Net transfers to or (from) Separate Accounts net of reinsurance	0	0	0
27. Aggregate write-ins for deductions	2	1,300	2,085
28. Totals (Lines 20 to 27)	72,542,859	72,302,940	288,887,090
29. Net gain from operations before dividends to policyholders and federal income taxes (Line 9 minus Line 28)	10,612,955	12,071,867	45,431,086
30. Dividends to policyholders and refunds to members	0	0	0
31. Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30)	10,612,955	12,071,867	45,431,086
32. Federal and foreign income taxes incurred (excluding tax on capital gains)	2,404,940	3,068,094	(24,170,355)
33. Net gain from operations after dividends to policyholders, refunds to members and federal income taxes and before realized capital gains or (losses) (Line 31 minus Line 32)	8,208,015	9,003,773	69,601,441
34. Net realized capital gains (losses) (excluding gains (losses) transferred to the IMR) less capital gains tax of \$ 0 (excluding taxes of \$ 0 transferred to the IMR)	0	(5,985)	(17,427)
35. Net income (Line 33 plus Line 34)	8,208,015	8,997,788	69,584,014
CAPITAL AND SURPLUS ACCOUNT			
36. Capital and surplus, December 31, prior year	100,051,869	73,379,417	73,379,417
37. Net income (Line 35)	8,208,015	8,997,788	69,584,014
38. Change in net unrealized capital gains (losses) less capital gains tax of \$ 0	0	0	0
39. Change in net unrealized foreign exchange capital gain (loss)	0	0	0
40. Change in net deferred income tax	148,597	515,560	(33,670,407)
41. Change in nonadmitted assets	(431,527)	(134,183)	25,922,167
42. Change in liability for reinsurance in unauthorized and certified companies	0	0	0
43. Change in reserve on account of change in valuation basis, (increase) or decrease	0	0	0
44. Change in asset valuation reserve	(235,198)	(55,252)	(163,322)
45. Change in treasury stock	0	0	0
46. Surplus (contributed to) withdrawn from Separate Accounts during period	0	0	0
47. Other changes in surplus in Separate Accounts Statement	0	0	0
48. Change in surplus notes	0	0	0
49. Cumulative effect of changes in accounting principles	0	0	0
50. Capital changes:			
50.1 Paid in	0	0	0
50.2 Transferred from surplus (Stock Dividend)	0	0	0
50.3 Transferred to surplus	0	0	0
51. Surplus adjustment:			
51.1 Paid in	0	0	(35,000,000)
51.2 Transferred to capital (Stock Dividend)	0	0	0
51.3 Transferred from capital	0	0	0
51.4 Change in surplus as a result of reinsurance	0	0	0
52. Dividends to stockholders	0	0	0
53. Aggregate write-ins for gains and losses in surplus	0	0	0
54. Net change in capital and surplus for the year (Lines 37 through 53)	7,689,887	9,323,913	26,672,452
55. Capital and surplus, as of statement date (Lines 36 + 54)	107,741,756	82,703,330	100,051,869
DETAILS OF WRITE-INS			
08.301. Interest on Agent balances	0	1,436	(17,540)
08.302.			
08.303.			
08.398. Summary of remaining write-ins for Line 8.3 from overflow page	0	0	0
08.399. Totals (Lines 08.301 through 08.303 plus 08.398) (Line 8.3 above)	0	1,436	(17,540)
2701. Penalties	2	1,300	2,085
2702.			
2703.			
2798. Summary of remaining write-ins for Line 27 from overflow page	0	0	0
2799. Totals (Lines 2701 through 2703 plus 2798) (Line 27 above)	2	1,300	2,085
5301.			
5302.			
5303.			
5398. Summary of remaining write-ins for Line 53 from overflow page	0	0	0
5399. Totals (Lines 5301 through 5303 plus 5398) (Line 53 above)	0	0	0

STATEMENT AS OF MARCH 31, 2025 OF THE AMERICAN RETIREMENT LIFE INSURANCE COMPANY
CASH FLOW

	1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
Cash from Operations			
1. Premiums collected net of reinsurance	81,236,187	82,698,636	327,521,821
2. Net investment income	1,470,225	1,052,925	5,716,833
3. Miscellaneous income	2,322	4,058	(7,461)
4. Total (Lines 1 to 3)	82,708,734	83,755,619	333,231,193
5. Benefit and loss related payments	58,505,968	61,659,910	246,311,897
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0	0
7. Commissions, expenses paid and aggregate write-ins for deductions	7,669,956	5,109,787	34,694,705
8. Dividends paid to policyholders	0	0	0
9. Federal and foreign income taxes paid (recovered) net of \$ tax on capital gains (losses)	(31,316,835)	3,855,000	11,832,456
10. Total (Lines 5 through 9)	34,859,089	70,624,697	292,839,058
11. Net cash from operations (Line 4 minus Line 10)	47,849,645	13,130,922	40,392,135
Cash from Investments			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds	2,000,000	4,500,000	25,250,000
12.2 Stocks	0	0	0
12.3 Mortgage loans	0	0	0
12.4 Real estate	0	0	0
12.5 Other invested assets	0	0	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	0	0	0
12.7 Miscellaneous proceeds	0	0	1,581
12.8 Total investment proceeds (Lines 12.1 to 12.7)	2,000,000	4,500,000	25,251,581
13. Cost of investments acquired (long-term only):			
13.1 Bonds	29,858,377	18,785,199	28,512,934
13.2 Stocks	0	0	0
13.3 Mortgage loans	0	0	0
13.4 Real estate	0	0	0
13.5 Other invested assets	0	1,060,380	1,060,380
13.6 Miscellaneous applications	2,306	15,169	0
13.7 Total investments acquired (Lines 13.1 to 13.6)	29,860,683	19,860,748	29,573,314
14. Net increase/(decrease) in contract loans and premium notes	131	121	121
15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	(27,860,814)	(15,360,869)	(4,321,854)
Cash from Financing and Miscellaneous Sources			
16. Cash provided (applied):			
16.1 Surplus notes, capital notes	0	0	0
16.2 Capital and paid in surplus, less treasury stock	0	0	(35,000,000)
16.3 Borrowed funds	0	0	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities	0	0	0
16.5 Dividends to stockholders	0	0	0
16.6 Other cash provided (applied)	(267,017)	12,776	(239,750)
17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	(267,017)	12,776	(35,239,750)
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	19,721,814	(2,217,171)	830,531
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year	10,342,137	9,511,606	9,511,606
19.2 End of period (Line 18 plus Line 19.1)	30,063,951	7,294,435	10,342,137

Note: Supplemental disclosures of cash flow information for non-cash transactions:

20.0001. Bond exchanges allowed under rule 144A of the 1933 Securities Act and other security000
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EXHIBIT 1**DIRECT PREMIUMS AND DEPOSIT-TYPE CONTRACTS**

	1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
1. Individual life	26,743	30,035	116,680
2. Group life	0	0	0
3. Individual annuities	300	403	2,147
4. Group annuities			0
5. Accident & health	81,332,993	82,961,410	328,100,317
6. Fraternal			0
7. Other lines of business			0
8. Subtotal (Lines 1 through 7)	81,360,036	82,991,848	328,219,143
9. Deposit-type contracts	0	0	0
10. Total (Lines 8 and 9)	81,360,036	82,991,848	328,219,143

NOTES TO FINANCIAL STATEMENTS

Note 1 – Summary of Significant Accounting Policies and Going Concern

On March 19, 2025, The Cigna Group completed the sale of its Medicare Advantage, Medicare Individual Stand-Alone Prescription Drug Plans, Medicare and Other Supplemental Benefits, and CareAllies businesses to Health Care Service Corporation ("HCSC"). The Company was included as part of this transaction. As a result of this sale, the Company's ultimate parent is now HCSC, effective as of the transaction closing date.

A. Accounting Practices

The financial Statements of American Retirement Life Insurance Company ("ARLIC" or "the Company") are presented on the basis of accounting practices prescribed or permitted by the Ohio Department of Insurance.

The Ohio Department of Insurance recognizes only statutory accounting practices prescribed or permitted by the State of Ohio for determining and reporting the financial condition and results of operations of an insurance company for determining its under the Ohio Insurance Law. The National Association of Insurance Commissioners' ("NAIC") Accounting Practices and Procedures manual, ("NAIC SAP") has been adopted as a component of prescribed or permitted practices by the State of Ohio.

A reconciliation of the Company's net income and capital and surplus between NAIC SAP and practices prescribed and permitted by the State of Ohio is shown below:

	SSAP #	F/S Page	F/S Line #	2025	2024
NET INCOME					
(1) Company state basis (Page 4, Line 35, Columns 1 & 3)	XXX	XXX	XXX	\$ 8,208,015	\$ 69,584,014
(2) State Prescribed Practices that are an increase/(decrease) from NAIC SAP					
					\$
(3) State Permitted Practices that are an increase/(decrease) from NAIC SAP					\$
					\$
(4) NAIC SAP (1 – 2 – 3 = 4)	XXX	XXX	XXX	\$ 8,208,015	\$ 69,584,014
SURPLUS					
(5) Company state basis (Page 3, Line 38, Columns 1 & 2)	XXX	XXX	XXX	\$ 107,741,756	\$ 100,051,869
(6) State Prescribed Practices that are an increase/(decrease) from NAIC SAP					
					\$
(7) State Permitted Practices that are an increase/(decrease) from NAIC SAP					\$
					\$
(8) NAIC SAP (5 – 6 – 7 = 8)	XXX	XXX	XXX	\$ 107,741,756	\$ 100,051,869

B. Use of Estimates in the Preparation of the Financial Statement

The preparation of financial statements in conformity with NAIC SAP requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities. It also requires disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the period. Actual results could differ from those estimates.

C. Accounting Policy

Life premiums are recognized as income over the premium-paying period of the related policies. Annuity considerations are recognized as revenue when received. Health premiums are earned ratably over the terms of the related insurance. Expenses incurred in connection with acquiring new insurance business, including acquisition costs such as sales commissions, are charged to operations as incurred. The Company pays dividends to participating policyholders.

The Company uses the following accounting policies:

(2) Basis for Short-Term Investments, Bonds and Amortization

Investments in bonds and short-term investments are carried at amortized cost, except those in or near default that are carried at the lesser of cost or fair value. Amortization of bond premium or discount is calculated using the scientific (constant yield) interest method. Bonds containing call provisions are amortized to call date which produces the lowest asset value (yield to worst). Investments with original maturities of one year or less from the time of purchase are classified as short-term. Bonds are considered impaired and their cost basis is written down to fair value through an asset valuation reserve for credit-related losses or an interest maintenance reserve for interest-related losses, when management expects a decline in value to persist (i.e., the decline is other-than-temporary).

(6) Basis for Loan-Backed Securities and Adjustment Methodology

Loan-backed bonds and structured securities are valued at amortized cost using the constant level yield method. Significant changes in estimated cash flows from the original purchase assumptions are accounted for generally using the retrospective adjustment method. For loan-backed and structured securities that have potential for loss of a significant portion of the original investment, significant changes in estimated cash flows from the original purchase assumptions are accounted for using the prospective method. These securities are presented on the balance sheet as bonds.

Prepayment assumptions for loan-backed securities and other structured securities were obtained from external financial data sources. These assumptions are consistent with the current interest rate and economic environment.

When the Company determines it does not expect to recover the amortized cost basis of loan-backed or structured securities with declines in fair value (even if it does not intend to sell and has the intent and ability to hold), the non-interest portion of the impairment loss is recognized in realized investment losses. The non-interest portion is the difference between the amortized cost basis of the loan-backed or structured security and the net present value of its expected future cash flows. Expected future cash flows are based on assumptions about the collateral attributes, including prepayment speeds, default rates and changes in value.

D. Going Concern

In accordance with SSAP No. 1, "Accounting Policies, Risks and Uncertainties, and Other Disclosures," management has made an evaluation of the Company's ability to continue as a going concern, including such factors as its current financial position, recent earnings and cash flow trends and projections, liquidity and capital requirements, readily available sources of liquidity and such other factors deemed by management to be appropriate under the circumstances. Management has assessed and concluded that there were no conditions or events, considered in the aggregate, that raise substantial doubt about the Company's ability to continue as a going concern within one year after the date the financial statements are issued. Accordingly, the accompanying financial statements have been prepared on the going concern basis.

NOTES TO FINANCIAL STATEMENTS

Note 2 – Accounting Changes and Correction of Errors

Not applicable.

Note 3 – Business Combinations and Goodwill

Not applicable.

Note 4 – Discontinued Operations

Not applicable.

Note 5 – Investments

A. - C. Not applicable.

D. Loan Backed Securities

- (1) Prepayment assumptions for fixed-rate agency mortgage-backed securities are determined utilizing MIAC MIMs. MIMs are derived from a semimonthly dealer-consensus survey of long-term prepayment projections. Prepayment assumptions for other mortgage-backed, loan-backed and structured securities are obtained from Moody's Analytics. Moody's applies a flat economic credit model and utilizes a vector of multiple monthly speeds as opposed to a single speed for more robust projections. In instances where Moody's projections are not available, data is obtained from Reuters which utilizes the median prepayment speed from contributors models.
- (2) In 2025, the Company has not recognized any other temporary investments (OTTIs) on loan backed securities that are classified under either intent to sell or under inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the amortized cost basis.
- (3) The Company did not recognize any OTTIs on loan-backed securities during the period ended March 31, 2025.
- (4) There were no loan-backed and structured securities with a fair value lower than amortized cost as of March 31, 2025.
- (5) The Company believes that all unrealized losses on individual securities are the result of normal price fluctuations due to market conditions and are not an indication of OTTI. Market conditions include interest rate fluctuations, credit quality, supply, and demand.

E. - R. Not Applicable

Note 6 – Joint Ventures, Partnerships and Limited Liability Companies

Not applicable.

Note 7 – Investment Income

No significant changes.

Note 8 – Derivative Instruments

Not applicable.

Note 9 – Income Taxes

No significant changes.

Note 10 – Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties

The Company was included in the sale of The Cigna Group Medicare and CareAllies businesses to Health Care Service Corporation on March 19, 2025. No material changes were made to services provided through the end of March 2025.

Note 11 – Debt

Not applicable.

Note 12 – Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans

No significant changes.

Note 13 – Capital and Surplus, Shareholder's Dividend Restrictions and Quasi-Reorganizations

No significant changes.

NOTES TO FINANCIAL STATEMENTS

Note 14 – Liabilities, Contingencies and Assessments

- B. Assessments - There were no material impacts to existing or new guaranty fund assessments the three months ended March 31, 2025.
- F. All Other Contingencies

Other Legal Matters

In the normal course of its business operations, the Company is involved in litigation and other regulatory matters from time to time with claimants, beneficiaries, and other parties. When the Company, in the normal course of its regular review of such matters has determined that a material loss is reasonably possible, the matter is disclosed. In accordance with Statutory Accounting Principles, when litigation or other regulatory matters result in loss contingencies that are both probable and estimable, the Company accrues the estimated loss by a charge to operations. The amount accrued represents management's best estimate of the probable loss at the time. If only a range of estimated losses can be determined, the Company accrues an amount within the range that, in management's judgment, reflects the most likely outcome. If none of the estimates within the range is a better estimate than any other amount, the Company accrues the mid-point of the range.

Management does not believe that litigation or other matters currently pending against the Company would have a material adverse effect on the Company's results of operations, financial condition or liquidity based on its current knowledge of those matters.

Note 15 – Leases

Not applicable.

Note 16 – Information about Financial Instruments with Off-Balance Sheet Risk and Financial Instruments with Concentrations of Credit Risk

Not applicable.

Note 17 – Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

- B. Transfer and Servicing of Financial Assets - Not applicable.
- C. The Company was not involved in any wash sale transactions in 2025.

Note 18 – Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans

Not applicable.

Note 19 – Direct Premium Written/Produced by Managing General Agents/Third Party Administrators

Not applicable.

Note 20 – Fair Value Measurements

- A. Fair Value Measurements

The Company's financial assets and liabilities carried at fair value have been classified, for disclosure purposes, based on a hierarchy that gives the highest rating to fair values determined using unadjusted quoted prices in active markets for identical assets and liabilities (Level 1) and the lowest ranking to fair values determined using methodologies and models with unobservable inputs (Level 3). An asset's or a liability's classification is based on the lowest level input that is significant to its measurement. For example a Level 3 fair value measurement may include inputs that are both observable (Levels 1 and 2) and unobservable (Level 3). There were no changes in valuation techniques from the prior period.

- Level 1 – Inputs are unadjusted quoted prices for identical assets and liabilities in active markets accessible at the measurement date.
- Level 2 – Inputs include quoted prices for similar assets or liabilities in active markets, quoted prices from those willing to trade in markets that are not active, or other inputs that are observable or can be corroborated by market data for the term of the instrument. Such inputs include market interest rates and volatilities, spreads, and yield curves.
- Level 3 – Certain inputs are unobservable (supported by little or no market activity) and significant to the fair value measurement. Unobservable inputs reflect the Company's best estimate of what hypothetical market participants would use to determine a transaction price for the asset or liability at the reporting date.
- Net Asset Value (NAV) – NAV per share is the amount of net assets attributable to each share of capital stock (other than senior equity securities, that is, preferred stock) outstanding at the close of the period. It excludes the effects of assuming conversion of outstanding convertible securities, whether or not their conversion would have a diluting effect.

In order to be classified as Level 1, unadjusted quoted market prices for identical assets or liabilities in active markets must be available. Fair values based on quoted prices for similar assets in active markets, quoted prices from those willing to trade in markets that are not active, or other inputs that are observable or can be corroborated by market data for the term of the investment (e.g., market interest rates and volatilities, spreads, yield curves, reported trades, broker/dealer quotes, bids, and offers) are classified as Level 2. Fair values not determined using the methods applicable to Levels 1 and 2, such as using discounted cash flow analysis, incorporating current market inputs for similar financial instruments with comparable terms and credit quality (matrix pricing) or other methods, models, and assumptions that management believes market participants would use to determine a current transaction price are assigned to Level 3.

The Company's invested assets subject to this disclosure are priced principally through independent pricing services that obtain prices from reputable pricing vendors in the marketplace. Through contracted custodians and software vendors, the Company obtains prices for all securities and continually monitors and reviews the external pricing sources while actively attempting to resolve any pricing issues that may arise. These service providers use a market approach to find pricing of similar financial instruments.

These valuation techniques involve some level of management estimation and judgment, which become significant with increasingly complex instruments or pricing models. Where appropriate, adjustments are included to reflect the risk inherent in a particular methodology, model, or input used.

(1) Fair Value Measurements at Reporting Date

The following table provides the fair value, carrying value, and classification in the fair value hierarchy of the Company's financial instruments as of March 31, 2025:

NOTES TO FINANCIAL STATEMENTS

Description for each class of asset or liability	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Total
a. Assets at fair value					
Money Market Mutual Funds	\$ —	\$ —	\$ —	\$ 53,327	\$ 53,327
Total Assets at fair value	\$ —	\$ —	\$ —	\$ 53,327	\$ 53,327

The following table provides the fair value, carrying value, and classification in the fair value hierarchy of the Company's financial instruments as of December 31, 2024:

None.

(2) Fair Value Measurements in Level 3 of the Fair Value Hierarchy

Not applicable

(3) Level 3 Transfers

Not applicable

(4) Valuation Techniques and Inputs

Not applicable

B. Other Fair Value Disclosures

Not applicable.

C. Fair Value Level

The following table provides the fair value, carrying value, and classification in the fair value hierarchy of the Company's financial instruments as of March 31, 2025:

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	(Carrying Value)
Bonds	\$ 154,152,306	\$ 157,719,107	\$ —	\$ 154,152,306	\$	\$	\$
Other invested assets - surplus debentures	\$ 1,045,333	\$ 1,054,111	0	\$ 1,045,333	\$	\$	\$
Cash, Cash Equivalents, and Short-term Investments	\$ 30,063,953	\$ 30,063,953	\$ 30,010,627	\$	\$	\$ 53,327	\$
Contract Loans		\$ 1,641			\$	\$	\$ 1,641

The following table provides the fair value, carrying value, and classification in the fair value hierarchy of the Company's financial instruments as of December 31, 2024:

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	(Carrying Value)
Bonds	\$ 123,868,180	\$ 129,834,016	\$ 2,631,175	\$ 121,237,005	\$	\$	\$
Other invested assets - surplus debentures	\$ 1,032,657	\$ 1,055,412	\$ —	\$ 1,032,657	\$	\$	\$
Cash, Cash Equivalents, and Short-term Investments	\$ 10,342,137	\$ 10,342,137	\$ (2,155,993)	\$ 12,498,130	\$	\$	\$
Contract Loans		\$ 1,510			\$	\$	\$ 1,510

D. Disclosures about Financial Instruments Not Practicable to Estimate Fair Value

Contract Loans

It is not practicable to estimate the fair values of contract loans as they have no stated maturity. Contract loans are fully collateralized by the cash surrender values of the underlying insurance policies.

Type of Class or Financial Instrument	Carrying Value	Effective Interest Rate	Maturity Date	Explanation
Contract Loans	\$ 1,641	8%	N/A	It is not practicable to estimate the fair values of contract loans as they have no stated maturity. They are fully collateralized by the cash surrender values of the underlying insurance policies.

E. Investments Measured Using the NAV Practical Expendient
Not applicable

Note 21 – Other Items

No significant changes.

Note 22 – Events Subsequent

Management has evaluated the financial statements for subsequent events through May 29, 2025, the date financial statements were available to be issued.

Note 23 – Reinsurance

No significant changes.

NOTES TO FINANCIAL STATEMENTS

Note 24 – Retrospectively Rated Contracts and Contracts Subject to Redetermination

Not applicable.

Note 25 – Change in Incurred Losses and Loss Adjustment Expenses**A. Change in Incurred Losses and Loss Adjustment Expenses**

Reserves as of December 31, 2024 were \$32,225,266. As of March 31, 2025, \$22,186,083 has been paid for incurred claims and claim adjustment expenses attributable to insured events of prior years. Reserves remaining for prior years are now \$9,523,686 as a result of re-estimation of unpaid claims principally on Medicare Supplement. Therefore, there has been a \$515,497 favorable prior year development since December 31, 2024 to March 31, 2025. The change is generally the result of ongoing analysis of recent loss development trends.

B. Information about Significant Changes in Methodologies and Assumptions

Original estimates are increased or decreased as additional information becomes known regarding individual claims.

Note 26 – Intercompany Pooling Arrangements

Not applicable.

Note 27 – Structured Settlements

Not applicable.

Note 28 – Health Care Receivables

Not applicable.

Note 29 – Participating Policies

No significant changes.

Note 30 – Premium Deficiency Reserves

Not applicable.

Note 31 – Reserves for Life Contracts and Annuity Contracts

No significant changes.

Note 32 – Analysis of Annuity Actuarial Reserves and Deposit Type Liabilities by Withdrawal Characteristics

No significant changes.

Note 33 – Analysis of Life Actuarial Reserves by Withdrawal Characteristics

No significant changes.

Note 34 – Premium and Annuity Considerations Deferred and Uncollected

No significant changes.

Note 35 – Separate Accounts

Not applicable.

Note 36 – Loss/Claim Adjustment Expenses

At December 31, 2024 and March 31, 2025, reserves for LAE totaled \$438,877 and \$510,123.

The Company incurred \$845,425 and paid \$774,179 of loss adjustment expenses in the current year of which \$293,943 of the paid amount was attributable to insured events of prior years.

The Company did not materially increase or decrease the provision for LAE related to insured events of the prior year.

STATEMENT AS OF MARCH 31, 2025 OF THE AMERICAN RETIREMENT LIFE INSURANCE COMPANY
GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

1.1 Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act? Yes [] No [X]

1.2 If yes, has the report been filed with the domiciliary state? Yes [] No []

2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? Yes [] No [X]

2.2 If yes, date of change: _____

3.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? Yes [X] No []
If yes, complete Schedule Y, Parts 1 and 1A.

3.2 Have there been any substantial changes in the organizational chart since the prior quarter end? Yes [X] No []

3.3 If the response to 3.2 is yes, provide a brief description of those changes.
Change of control _____

3.4 Is the reporting entity publicly traded or a member of a publicly traded group? Yes [] No [X]

3.5 If the response to 3.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group. _____

4.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? Yes [] No [X]

4.2 If yes, provide the name of the entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

1 Name of Entity	2 NAIC Company Code	3 State of Domicile

5. If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved? Yes [] No [X] N/A []
If yes, attach an explanation.
.....

6.1 State as of what date the latest financial examination of the reporting entity was made or is being made. 12/31/2023

6.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. 12/31/2018

6.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). 05/01/2020

6.4 By what department or departments?
Ohio Department of Insurance

6.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? Yes [] No [] N/A [X]

6.6 Have all of the recommendations within the latest financial examination report been complied with? Yes [] No [] N/A [X]

7.1 Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? Yes [] No [X]

7.2 If yes, give full information:
.....

8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board? Yes [] No [X]

8.2 If response to 8.1 is yes, please identify the name of the bank holding company.
.....

8.3 Is the company affiliated with one or more banks, thrifts or securities firms? Yes [] No [X]

8.4 If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.

1 Affiliate Name	2 Location (City, State)	3 FRB	4 OCC	5 FDIC	6 SEC

STATEMENT AS OF MARCH 31, 2025 OF THE AMERICAN RETIREMENT LIFE INSURANCE COMPANY
GENERAL INTERROGATORIES

9.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? Yes [] No []

- (a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
- (b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
- (c) Compliance with applicable governmental laws, rules and regulations;
- (d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
- (e) Accountability for adherence to the code.

9.11 If the response to 9.1 is No, please explain:
.....

9.2 Has the code of ethics for senior managers been amended? Yes [] No []

9.21 If the response to 9.2 is Yes, provide information related to amendment(s).
.....

9.3 Have any provisions of the code of ethics been waived for any of the specified officers? Yes [] No []

9.31 If the response to 9.3 is Yes, provide the nature of any waiver(s).

FINANCIAL

10.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? Yes [X] No []
 10.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: \$ 0

INVESTMENT

11.1 Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.) Yes [] No [X]

11.2 If yes, give full and complete information relating thereto:
.....

12. Amount of real estate and mortgages held in other invested assets in Schedule BA: \$ C

13. Amount of real estate and mortgages held in short-term investments: \$ C

14.1 Does the reporting entity have any investments in parent, subsidiaries and affiliates? Yes [] No [X]

14.2 If yes, please complete the following:

	1 Prior Year-End Book/Adjusted Carrying Value	2 Current Quarter Book/Adjusted Carrying Value
14.21 Bonds	\$ 0	\$ 0
14.22 Preferred Stock	\$ 0	\$ 0
14.23 Common Stock	\$ 0	\$ 0
14.24 Short-Term Investments	\$ 0	\$ 0
14.25 Mortgage Loans on Real Estate	\$ 0	\$ 0
14.26 All Other	\$ 0	\$ 0
14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)	\$ 0	\$ 0
14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above	\$ 0	\$ 0

15.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB? Yes [] No [X]
15.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes [] No [] N/A [X]
If no, attach a description with this statement.

16. For the reporting entity's security lending program, state the amount of the following as of the current statement date:

16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2.	\$ 0
16.2 Total book/adjusted carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2	\$ 0
16.3 Total payable for securities lending reported on the liability page.	\$ 0

STATEMENT AS OF MARCH 31, 2025 OF THE AMERICAN RETIREMENT LIFE INSURANCE COMPANY
GENERAL INTERROGATORIES

17. Excluding items in Schedule E - Part 3 - Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F.
 Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook? Yes [X] No []

17.1 For all agreements that comply with the requirements of the NAIC Financial Condition Examiners Handbook, complete the following:

1 Name of Custodian(s)	2 Custodian Address
Wellington Management Company LLP	345 North Morgan Street, 4th Floor Chicago, Illinois 60607

17.2 For all agreements that do not comply with the requirements of the NAIC Financial Condition Examiners Handbook, provide the name, location and a complete explanation:

1 Name(s)	2 Location(s)	3 Complete Explanation(s)
.....

17.3 Have there been any changes, including name changes, in the custodian(s) identified in 17.1 during the current quarter? Yes [X] No []

17.4 If yes, give full information relating thereto:

1 Old Custodian	2 New Custodian	3 Date of Change	4 Reason
JPMorgan Chase Bank, N.A.	Wellington Management Company LLP	03/19/2025	Change in Control

17.5 Investment management – Identify all investment advisors, investment managers, broker/dealers, including individuals that have the authority to make investment decisions on behalf of the reporting entity. This includes both primary and sub-advisors. For assets that are managed internally by employees of the reporting entity, note as such. ["...that have access to the investment accounts"; "...handle securities"]

1 Name of Firm or Individual	2 Affiliation
Lillian Michelle Sutton	I
Wellington Management Company LLP	U

17.5097 For those firms/individuals listed in the table for Question 17.5, do any firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") manage more than 10% of the reporting entity's invested assets? Yes [X] No []

17.5098 For firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") listed in the table for Question 17.5, does the total assets under management aggregate to more than 50% of the reporting entity's invested assets? Yes [X] No []

17.6 For those firms or individuals listed in the table for 17.5 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table below.

1 Central Registration Depository Number	2 Name of Firm or Individual	3 Legal Entity Identifier (LEI)	4 Registered With	5 Investment Management Agreement (IMA) Filed
106595	Wellington Management Company LLP	549300YHP12TEZNLX41	SEC	DS

18.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed? Yes [X] No []

18.2 If no, list exceptions:

19. By self-designating 5GI securities, the reporting entity is certifying the following elements for each self-designated 5GI security:

- Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available.
- Issuer or obligor is current on all contracted interest and principal payments.
- The insurer has an actual expectation of ultimate payment of all contracted interest and principal.

Has the reporting entity self-designated 5GI securities? Yes [] No [X]

20. By self-designating PLGI securities, the reporting entity is certifying the following elements of each self-designated PLGI security:

- The security was purchased prior to January 1, 2018.
- The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
- The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as a NRSRO which is shown on a current private letter rating held by the insurer and available for examination by state insurance regulators.
- The reporting entity is not permitted to share this credit rating of the PL security with the SVO.

Has the reporting entity self-designated PLGI securities? Yes [] No [X]

21. By assigning FE to a Schedule BA non-registered private fund, the reporting entity is certifying the following elements of each self-designated FE fund:

- The shares were purchased prior to January 1, 2019.
- The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
- The security had a public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO prior to January 1, 2019.
- The fund only or predominantly holds bonds in its portfolio.
- The current reported NAIC Designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO.
- The public credit rating(s) with annual surveillance assigned by an NAIC CRP has not lapsed.

Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria? Yes [] No [X]

STATEMENT AS OF MARCH 31, 2025 OF THE AMERICAN RETIREMENT LIFE INSURANCE COMPANY
GENERAL INTERROGATORIES

PART 2 - LIFE AND ACCIDENT AND HEALTH COMPANIES/FRATERNAL BENEFIT SOCIETIES

Life and Accident Health Companies/Fraternal Benefit Societies:

1	Amount
1. Report the statement value of mortgage loans at the end of this reporting period for the following categories:	
1.1 Long-Term Mortgages In Good Standing	
1.11 Farm Mortgages	\$.....
1.12 Residential Mortgages	\$.....
1.13 Commercial Mortgages	\$.....
1.14 Total Mortgages in Good Standing	\$..... 0
1.2 Long-Term Mortgages In Good Standing with Restructured Terms	
1.21 Total Mortgages in Good Standing with Restructured Terms.....	\$.....
1.3 Long-Term Mortgage Loans Upon which Interest is Overdue more than Three Months	
1.31 Farm Mortgages	\$.....
1.32 Residential Mortgages	\$.....
1.33 Commercial Mortgages	\$.....
1.34 Total Mortgages with Interest Overdue more than Three Months	\$..... 0
1.4 Long-Term Mortgage Loans in Process of Foreclosure	
1.41 Farm Mortgages	\$.....
1.42 Residential Mortgages	\$.....
1.43 Commercial Mortgages	\$.....
1.44 Total Mortgages in Process of Foreclosure	\$..... 0
1.5 Total Mortgage Loans (Lines 1.14 + 1.21 + 1.34 + 1.44) (Page 2, Column 3, Lines 3.1 + 3.2)	\$..... 0
1.6 Long-Term Mortgages Foreclosed, Properties Transferred to Real Estate in Current Quarter	
1.61 Farm Mortgages	\$.....
1.62 Residential Mortgages	\$.....
1.63 Commercial Mortgages	\$.....
1.64 Total Mortgages Foreclosed and Transferred to Real Estate	\$..... 0
2. Operating Percentages:	
2.1 A&H loss percent	79.679 %
2.2 A&H cost containment percent	0.239 %
2.3 A&H expense percent excluding cost containment expenses	9.029 %
3.1 Do you act as a custodian for health savings accounts?	Yes [] No [X]
3.2 If yes, please provide the amount of custodial funds held as of the reporting date	\$
3.3 Do you act as an administrator for health savings accounts?	Yes [] No [X]
3.4 If yes, please provide the balance of the funds administered as of the reporting date	\$
4. Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states?	Yes [X] No []
4.1 If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity?	Yes [] No []

Fraternal Benefit Societies Only:

- 5.1 In all cases where the reporting entity has assumed accident and health risks from another company, provisions should be made in this statement on account of such reinsurances for reserve equal to that which the original company would have been required to establish had it retained the risks. Has this been done?
- 5.2 If no, explain:
.....
- 6.1 Does the reporting entity have outstanding assessments in the form of liens against policy benefits that have increased surplus?
- 6.2 If yes, what is the date(s) of the original lien and the total outstanding balance of liens that remain in surplus?

Date	Outstanding Lien Amount
.....

STATEMENT AS OF MARCH 31, 2025 OF THE AMERICAN RETIREMENT LIFE INSURANCE COMPANY

SCHEDULE S - CEDED REINSURANCE

Showing All New Reinsurance Treaties - Current Year to Date

STATEMENT AS OF MARCH 31, 2025 OF THE AMERICAN RETIREMENT LIFE INSURANCE COMPANY
SCHEDULE T - PREMIUMS AND ANNUITY CONSIDERATIONS

Current Year To Date - Allocated by States and Territories

States, Etc.	Active Status (a)	Life Contracts		Direct Business Only			Total Columns 2 Through 5	Deposit-Type Contracts
		2	3	4	5			
		Life Insurance Premiums	Annuity Considerations	Accident and Health Insurance Premiums, Including Policy, Membership and Other Fees	Other Considerations			
1. Alabama	AL	L.....	818	0	1,277,030	0	1,277,848	
2. Alaska	AK	N.....	0	0	11,708	0	11,708	
3. Arizona	AZ	L.....	339	0	1,247,834	0	1,248,173	
4. Arkansas	AR	L.....	0	0	2,649,028	0	2,649,028	
5. California	CA	L.....	0	0	1,066,852	0	1,066,852	
6. Colorado	CO	L.....	1,463	0	2,377,462	0	2,378,925	
7. Connecticut	CT	N.....	0	0	39,362	0	39,362	
8. Delaware	DE	L.....	0	0	308,840	0	308,840	
9. District of Columbia	DC	N.....	0	0	10,551	0	10,551	
10. Florida	FL	L.....	0	0	3,383,744	0	3,383,744	
11. Georgia	GA	L.....	1,275	0	2,310,552	0	2,311,826	
12. Hawaii	HI	N.....	0	0	10,104	0	10,104	
13. Idaho	ID	N.....	0	0	63,458	0	63,458	
14. Illinois	IL	L.....	2,373	0	2,158,197	0	2,160,570	
15. Indiana	IN	L.....	951	0	3,369,518	0	3,370,469	
16. Iowa	IA	L.....	0	0	1,566,381	0	1,566,381	
17. Kansas	KS	L.....	677	0	1,794,799	0	1,795,476	
18. Kentucky	KY	L.....	995	0	1,245,767	0	1,246,762	
19. Louisiana	LA	L.....	418	0	2,591,630	0	2,592,048	
20. Maine	ME	N.....	0	0	27,917	0	27,917	
21. Maryland	MD	L.....	0	0	437,177	0	437,177	
22. Massachusetts	MA	N.....	162	0	64,331	0	64,493	
23. Michigan	MI	N.....	0	0	118,209	0	118,209	
24. Minnesota	MN	L.....	0	0	63,608	0	63,608	
25. Mississippi	MS	L.....	541	0	1,912,422	0	1,912,963	
26. Missouri	MO	L.....	271	0	408,711	0	408,982	
27. Montana	MT	L.....	313	0	1,674,569	0	1,674,882	
28. Nebraska	NE	L.....	808	0	1,767,602	0	1,768,410	
29. Nevada	NV	L.....	506	0	2,294,270	0	2,294,776	
30. New Hampshire	NH	L.....	0	0	892,402	0	892,402	
31. New Jersey	NJ	N.....	0	0	116,196	0	116,196	
32. New Mexico	NM	L.....	724	0	1,101,504	0	1,102,228	
33. New York	NY	N.....	0	0	78,734	0	78,734	
34. North Carolina	NC	L.....	0	0	2,238,027	0	2,238,027	
35. North Dakota	ND	L.....	0	0	93,739	0	93,739	
36. Ohio	OH	L.....	1,617	0	2,783,277	0	2,784,894	
37. Oklahoma	OK	L.....	825	0	1,537,630	0	1,538,455	
38. Oregon	OR	L.....	0	0	58,945	0	58,945	
39. Pennsylvania	PA	L.....	3,155	0	6,932,749	0	6,935,904	
40. Rhode Island	RI	L.....	0	0	44,786	0	44,786	
41. South Carolina	SC	L.....	1,098	0	2,935,603	0	2,936,702	
42. South Dakota	SD	L.....	135	0	128,111	0	128,246	
43. Tennessee	TN	L.....	1,291	0	5,639,073	0	5,640,365	
44. Texas	TX	L.....	2,809	300	4,054,735	0	4,057,844	
45. Utah	UT	L.....	270	0	876,357	0	876,626	
46. Vermont	VT	N.....	0	0	12,149	0	12,149	
47. Virginia	VA	L.....	2,833	0	9,925,134	0	9,927,967	
48. Washington	WA	N.....	0	0	95,244	0	95,244	
49. West Virginia	WV	L.....	336	0	1,404,493	0	1,404,828	
50. Wisconsin	WI	L.....	0	0	1,797,420	0	1,797,420	
51. Wyoming	WY	L.....	0	0	2,207,145	0	2,207,145	
52. American Samoa	AS	N.....	0	0	0	0	0	
53. Guam	GU	N.....	0	0	803	0	803	
54. Puerto Rico	PR	N.....	0	0	1,256	0	1,256	
55. U.S. Virgin Islands	VI	N.....	0	0	2,190	0	2,190	
56. Northern Mariana Islands	MP	N.....	0	0	0	0	0	
57. Canada	CAN	N.....	0	0	0	0	0	
58. Aggregate Other Aliens	OT	XXX.....	0	0	0	0	0	0
59. Subtotal		XXX.....	27,002	300	81,209,334	0	81,236,636	0
90. Reporting entity contributions for employee benefits plans		XXX.....	0	0	0	0	0	0
91. Dividends or refunds applied to purchase paid-up additions and annuities		XXX.....	0	0	0	0	0	0
92. Dividends or refunds applied to shorten endowment or premium paying period		XXX.....	0	0	0	0	0	0
93. Premium or annuity considerations waived under disability or other contract provisions		XXX.....	0	0	0	0	0	0
94. Aggregate or other amounts not allocable by State		XXX.....	0	0	0	0	0	0
95. Totals (Direct Business)		XXX.....	27,002	300	81,209,334	0	81,236,636	0
96. Plus Reinsurance Assumed		XXX.....	0	0	0	0	0	0
97. Totals (All Business)		XXX.....	27,002	300	81,209,334	0	81,236,636	0
98. Less Reinsurance Ceded		XXX.....	0	400	0	0	400	0
99. Totals (All Business) less Reinsurance Ceded		XXX.....	27,002	(100)	81,209,334	0	81,236,236	0
DETAILS OF WRITE-INS								
58001		XXX.....						
58002		XXX.....						
58003		XXX.....						
58998. Summary of remaining write-ins for Line 58 from overflow page		XXX.....	0	0	0	0	0	0
58999. Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)		XXX.....	0	0	0	0	0	0
9401		XXX.....						
9402		XXX.....						
9403		XXX.....						
9498. Summary of remaining write-ins for Line 94 from overflow page		XXX.....	0	0	0	0	0	0
9499. Totals (Lines 9401 through 9403 plus 9498)(Line 94 above)		XXX.....	0	0	0	0	0	0

(a) Active Status Counts:

1. L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG 39 4. Q - Qualified - Qualified or accredited reinsurer 0
 2. R - Registered - Non-domiciled RRGs 0 5. N - None of the above - Not allowed to write business in the state 18
 3. E - Eligible - Reporting entities eligible or approved to write surplus lines in the state 0

STATEMENT AS OF MARCH 31, 2025 OF THE AMERICAN RETIREMENT LIFE INSURANCE COMPANY

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER
MEMBERS OF A HOLDING COMPANY GROUP
PART 1 – ORGANIZATIONAL CHART

COMPANY	NAIC CODE	FEDERAL ID NUMBERS	DOMICILED STATE	PERCENTAGE OWNED BY PARENT
HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY	70670	36-1236610	IL	
DEARBORN LIFE INSURANCE COMPANY	71129	36-2598882	IL	100.00%
DEARBORN NATIONAL LIFE INSURANCE COMPANY OF NEW YORK	85090	22-3026145	NY	100.00%
DENTAL NETWORK OF AMERICA, LLC		36-3339483	DE	100.00%
DENTEMAX, LLC		38-2612298	DE	100.00%
DENTAL SOLUTIONS, INC.		20-1067299	MI	100.00%
HCSC PURCHASING, LLC		36-4186601	DE	100.00%
HCSC INSURANCE SERVICES COMPANY	78611	73-1350270	IL	100.00%
PRIME THERAPEUTICS LLC		26-0076803	DE	38.98%
AVAILITY, LLC		59-3715944	DE	19.51%
CAREALLIES, INC.		26-0180898	DE	100.00%
CAREALLIES ACCOUNTABLE CARE COLLABORATIVE, LLC		85-0954556	DE	100.00%
CAREALLIES ACCOUNTABLE CARE SOLUTIONS, LLC		87-1813801	DE	100.00%
CAPITAL GROUP FOR BETTER HEALTH, LLC		88-4112374	DE	51.00%
COLLECTIVEHEALTH, INC.		46-3985383	DE	14.49%
GHS INSURANCE COMPANY	29718	73-1507369	OK	100.00%
GHS GENERAL INSURANCE AGENCY, INC.		73-1514691	OK	100.00%
GHS HEALTH MAINTENANCE ORGANIZATION, INC. D/B/A BLUELINCS HMO	11814	73-1191843	OK	100.00%
MEDECISION, INC.		23-2530889	PA	100.00%
CMH TECHNOLOGY SUBSIDIARY, LLC		82-4418148	DE	100.00%
GSI HEALTH, LLC		80-0849331	PA	100.00%
HEALTH INTELLIGENCE COMPANY LLC D/B/A BLUE HEALTH INTELLIGENCE		27-4269034	DE	10.64%
INNOVISTA, LLC		30-0802612	DE	100.00%
ESSENTIAL HEALTH PARTNERS, LLC		83-3093990	IL	40.00%
GENOVISTA HEALTH, LLC		83-4283301	TX	49.00%
INNOVISTA HEALTH PARTNERS, LLC		99-4379181	TX	100.00%
INNOVISTA MEDICAL CENTER TEXAS, LLC D/B/A INNOVISTA MEDICAL CENTER		83-4213500	TX	100.00%
SILVER CROSS MSO, LLC		85-3005773	IL	13.33%
SOLERA HEALTH, INC.		47-5298764	DE	28.75%
TRIWEST ALLIANCE INC.		86-0813402	DE	15.61%
HCSC VENTURES, INC.		37-1789176	DE	100.00%
ALACURA HOLDINGS, INC. ¹		83-2215567	DE	23.18%
AVALON HEALTH SERVICES, LLC D/B/A AVALON HEALTHCARE SOLUTIONS		46-3019902	DE	18.04%
BLUECROSS BLUESHIELD VENTURES, INC.		26-2930757	DE	21.55%
BLUECROSS BLUESHIELD VENTURE PARTNERS, L.P.		26-2936839	DE	1.00%
BLUECROSS BLUESHIELD VENTURE PARTNERS, L.P.		26-2936839	DE	21.34%
COGITATIVO, INC.		47-1692551	DE	11.88%
HCSC ITC, LLC		82-1682951	DE	100.00%

STATEMENT AS OF MARCH 31, 2025 OF THE AMERICAN RETIREMENT LIFE INSURANCE COMPANY

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER
MEMBERS OF A HOLDING COMPANY GROUP
PART 1 – ORGANIZATIONAL CHART

HEALTHBOX CHICAGO III LLC		47-0970280	DE	36.27%
HCSC INVESTMENTS, LLC		87-4386908	DE	100.00%
ILLINOIS BLUE CROSS BLUE SHIELD INSURANCE COMPANY	16013	61-1782332	IL	100.00%
505 INSURANCE COMPANY	16359	38-3984430	NM	100.00%
TEXAS BLUE CROSS BLUE SHIELD INSURANCE COMPANY	15941	36-4836697	TX	100.00%
SOUTH WATER INSURANCE COMPANY		84-2710924	UT	100.00%
LUMINARE HEALTH BENEFITS, INC.		35-1846036	DE	100.00%
HCSC MEDICARE HOLDINGS INC.		99-1184798	DE	100.00%
HCSC MEDICARE INC.		99-1194574	DE	100.00%
CERES SALES OF OHIO, LLC		34-1970892	OH	100.00%
CIGNA HEALTHCARE OF COLORADO, INC.	95604	84-1004500	CO	100.00%
CIGNA NATIONAL HEALTH INSURANCE COMPANY	61727	34-0970995	OH	100.00%
PROVIDENT AMERICAN LIFE & HEALTH INSURANCE COMPANY	67903	23-1335885	OH	100.00%
CIGNA INSURANCE COMPANY	65269	75-2305400	OH	100.00%
HEALTHSPRING, INC.		20-1821898	DE	100.00%
NEWQUEST, LLC		76-0628370	TX	100.00%
HEALTHSPRING LIFE & HEALTH INSURANCE COMPANY, INC.	12902	20-8534298	IL	100.00%
HEALTHSPRING MANAGEMENT OF AMERICA, LLC		20-8647386	DE	100.00%
HEALTHSPRING OF FLORIDA, INC.	11532	65-1129599	FL	100.00%
HEALTHSPRING USA, LLC		72-1559530	TN	100.00%
HOUQUEST, LLC		75-3108521	DE	100.00%
GULFQUEST, LP		76-0657035	TX	99.00%
NEWQUEST MANAGEMENT NORTHEAST, LLC		52-1929677	DE	100.00%
BRAVO HEALTH PENNSYLVANIA, INC.	11524	52-2363406	PA	100.00%
BRAVO HEALTH MID-ATLANTIC, INC.	10095	52-2259087	MD	100.00%
NEWQUEST MANAGEMENT ALABAMA, LLC		33-1033586	AL	100.00%
NEWQUEST MANAGEMENT OF FLORIDA, LLC		20-4954206	FL	100.00%
NEWQUEST MANAGEMENT OF ILLINOIS, LLC		77-0632665	IL	100.00%
TENNESSEE QUEST, LLC		20-5524622	TN	100.00%
TEXQUEST, LLC		75-3108527	DE	100.00%
GULFQUEST, LP		76-0657035	TX	1.00%
LOYAL AMERICAN LIFE INSURANCE COMPANY	65722	63-0343428	OH	100.00%
AMERICAN RETIREMENT LIFE INSURANCE COMPANY	88366	59-2760189	OH	100.00%
MEDCO CONTAINMENT INSURANCE COMPANY OF NEW YORK	34720	13-3506395	NY	100.00%
MEDCO CONTAINMENT LIFE INSURANCE COMPANY	63762	42-1425239	PA	100.00%
STERLING LIFE INSURANCE COMPANY	77399	13-1867829	IL	100.00%
CIVICASCIPT, LLC		84-4777602	DE	0.00%
CARING FOR CHILDREN FOUNDATION OF TEXAS, INC.		75-2393811	TX	0.00%
THE OKLAHOMA CARING FOUNDATION, INC.		73-1470846	OK	0.00%
THE CARING FOUNDATION OF MONTANA, INC.		35-2613131	MT	0.00%

STATEMENT AS OF MARCH 31, 2025 OF THE AMERICAN RETIREMENT LIFE INSURANCE COMPANY

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER
MEMBERS OF A HOLDING COMPANY GROUP
PART 1 – ORGANIZATIONAL CHART

PLANITES CREDIT UNION	36-6057472	IL	0.00%
LIFETIME FEDERAL CREDIT UNION	75-6020171	TX	0.00%

¹Includes 2.78% passive investment through private equity funds.

STATEMENT AS OF MARCH 31, 2025 OF THE AMERICAN RETIREMENT LIFE INSURANCE COMPANY

SCHEDULE Y
PART 1A - DETAILS OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Loca-tion	Rela-tion-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Per-cent-age	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
.0917	HCSC GROUP	70670	36-1236610		0000350793 ..	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY .....	.. IL..... UIP.....	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY .....	.. IL..... IA.....	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY	Ownership, Board of Directors, Management .....	.. 0.000 ..	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY .....	.. NO ..	
.0917	HCSC GROUP	71129	36-2598882	003857522 ..		DEARBORN LIFE INSURANCE COMPANY .....	.. IL..... IA.....	DEARBORN LIFE INSURANCE COMPANY .....	.. NY..... IA.....	DEARBORN LIFE INSURANCE COMPANY	Ownership, Board of Directors, Management	100.000 ..	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY .....	.. NO ..	
.0917	HCSC GROUP	85090	22-3026145			DEARBORN NATIONAL LIFE INSURANCE COMPANY OF NEW YORK .....	.. NY..... IA.....	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY .....	.. DE..... NIA.....	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY	Ownership	100.000 ..	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY .....	.. NO ..	
		00000	36-3339483 ..			DENTAL NETWORK OF AMERICA, LLC .....	.. DE..... NIA.....	DENTAL NETWORK OF AMERICA, LLC .....	.. DE..... NIA.....	DEARBORN LIFE INSURANCE COMPANY	Board of Directors, Management .....	.. 0.000 ..	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY .....	.. NO ..	
		00000	36-3339483 ..			DENTAL NETWORK OF AMERICA, LLC .....	.. DE..... NIA.....	DENTAL NETWORK OF AMERICA, LLC .....	.. DE..... NIA.....	DENTAL NETWORK OF AMERICA, LLC	Ownership, Board of Directors, Management	100.000 ..	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY .....	.. NO ..	0000001 ..
		00000	38-2612298 ..			DENTEMAX, LLC .....	.. DE..... NIA.....	DENTAL NETWORK OF AMERICA, LLC .....	.. DE..... NIA.....	DENTAL NETWORK OF AMERICA, LLC	Board of Directors, Management .....	.. 0.000 ..	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY .....	.. NO ..	
		00000	20-1067299 ..			DENTAL SOLUTIONS, INC. .....	.. MI..... NIA.....	DENTEMAX, LLC .....	.. MI..... NIA.....	DENTEMAX, LLC	Ownership, Management	100.000 ..	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY .....	.. NO ..	0000002 ..
		00000	36-4186601 ..			HCSC PURCHASING, LLC .....	.. DE..... NIA.....	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY .....	.. DE..... NIA.....	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY	Ownership, Board of Directors, Management	100.000 ..	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY .....	.. NO ..	
		00000	78611	73-1350270 ..		HCSC INSURANCE SERVICES COMPANY .....	.. IL..... IA.....	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY .....	.. IL..... IA.....	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY	Ownership, Board of Directors, Management	100.000 ..	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY .....	.. NO ..	
		00000	26-0076803 ..			PRIME THERAPEUTICS LLC .....	.. DE..... NIA.....	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY .....	.. DE..... NIA.....	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY	Ownership, Board of Directors	39.000 ..	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY .....	.. NO ..	
		00000	59-3715944 ..			AVAILITY, LLC .....	.. DE..... NIA.....	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY .....	.. DE..... NIA.....	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY	Ownership, Board of Directors	19.500 ..	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY .....	.. NO ..	
		00000	26-0180898 ..			CAREALLIES, INC. .....	.. DE..... NIA.....	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY .....	.. DE..... NIA.....	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY	Ownership, Board of Directors	100.000 ..	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY .....	.. NO ..	
		00000	85-0954556 ..			CAREALLIES ACCOUNTABLE CARE COLLABORATIVE, LLC .....	.. DE..... NIA.....	CAREALLIES, INC. .....	.. DE..... NIA.....	CAREALLIES, INC.	Ownership	100.000 ..	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY .....	.. NO ..	
		00000	85-0954556 ..			CAREALLIES ACCOUNTABLE CARE SOLUTIONS, LLC .....	.. DE..... NIA.....	CAREALLIES, INC. .....	.. DE..... NIA.....	CAREALLIES, INC.	Ownership	100.000 ..	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY .....	.. NO ..	
		00000	87-1813801 ..			CAPITAL GROUP FOR BETTER HEALTH, LLC .....	.. DE..... NIA.....	CAREALLIES, INC. .....	.. DE..... NIA.....	CAREALLIES, INC.	Ownership	100.000 ..	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY .....	.. NO ..	
		00000	88-4112374 ..			COLLECTIVEHEALTH, INC. .....	.. DE..... NIA.....	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY .....	.. DE..... NIA.....	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY	Ownership, Board of Directors	14.500 ..	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY .....	.. YES ..	
		00000	46-3985383 ..			GHS INSURANCE COMPANY .....	.. OK..... IA.....	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY .....	.. OK..... IA.....	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY	Ownership, Board of Directors, Management	100.000 ..	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY .....	.. NO ..	
		00000	29718	73-1507369 ..		GHS GENERAL INSURANCE AGENCY, INC. .....	.. OK..... NIA.....	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY .....	.. OK..... NIA.....	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY	Ownership, Board of Directors, Management	100.000 ..	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY .....	.. NO ..	
		00000	73-1514691 ..			GHS HEALTH MAINTENANCE ORGANIZATION, INC. D/B/A BLUELINC'S HMO .....	.. OK..... IA.....	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY .....	.. OK..... IA.....	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY	Ownership, Board of Directors, Management	100.000 ..	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY .....	.. NO ..	
		00000	11814	73-1191843 ..		MEDECISION, INC. .....	.. PA..... NIA.....	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY .....	.. PA..... NIA.....	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY	Ownership, Board of Directors, Management	100.000 ..	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY .....	.. NO ..	
		00000	23-2530889 ..		0001367705 ..	CMH TECHNOLOGY SUBSIDIARY, LLC .....	.. DE..... NIA.....	MEDECISION, INC. .....	.. DE..... NIA.....	MEDECISION, INC.	Ownership	100.000 ..	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY .....	.. NO ..	
		00000	82-4418148 ..			GSI HEALTH, LLC .....	.. PA..... NIA.....	MEDECISION, INC. .....	.. PA..... NIA.....	MEDECISION, INC.	Ownership	100.000 ..	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY .....	.. NO ..	
		00000	80-0849331 ..			HEALTH INTELLIGENCE COMPANY LLC D/B/A BLUE HEALTH INTELLIGENCE .....	.. DE..... NIA.....	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY .....	.. DE..... NIA.....	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY	Ownership, Board of Directors	10.600 ..	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY .....	.. NO ..	
		00000	27-4269034 ..		0001508432 ..	INNOVISTA, LLC .....	.. DE..... NIA.....	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY .....	.. DE..... NIA.....	INNOVISTA, LLC	Ownership, Board of Directors, Management	100.000 ..	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY .....	.. NO ..	
		00000	30-0802612 ..			ESSENTIAL HEALTH PARTNERS, LLC .....	.. IL..... NIA.....	INNOVISTA, LLC .....	.. IL..... NIA.....	INNOVISTA, LLC	Ownership, Board of Directors	40.000 ..	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY .....	.. NO ..	
		00000	83-3093990 ..			GENOVISTA HEALTH, LLC .....	.. TX..... NIA.....	INNOVISTA, LLC .....	.. TX..... NIA.....	INNOVISTA, LLC	Ownership, Board of Directors	49.000 ..	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY .....	.. NO ..	
		00000	83-4283301 ..												

STATEMENT AS OF MARCH 31, 2025 OF THE AMERICAN RETIREMENT LIFE INSURANCE COMPANY

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 Domestic- ciliary Loca- tion	10 Rela- tionship 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 Owner- ship Provide Per- centage	14 Ultimate Controlling Entity(es)/Person(s)	15 Is an SCA Filing Re- quired? (Yes/No)	16 *
		00000	99-4379181			INNOVISTA HEALTH PARTNERS, LLC	INNOVISTA, LLC	TX.....NIA.....		INNOVISTA, LLC	Ownership.....	100.000	HEALTH CARE SERVICE CORPORATION, A	NO.....	
		00000	83-4213500			INNOVISTA MEDICAL CENTER TEXAS, LLC D/B/A INNOVISTA MEDICAL CENTER	INNOVISTA, LLC	TX.....NIA.....		INNOVISTA, LLC	Ownership, Board of Directors	100.000	MUTUAL LEGAL RESERVE COMPANY	NO.....	
		00000	85-3005773			SILVER CROSS MSO, LLC	INNOVISTA, LLC	IL.....NIA.....		INNOVISTA, LLC	Ownership, Board of Directors	13.300	HEALTH CARE SERVICE CORPORATION, A	NO.....	
		00000	47-5298764			SOLERA HEALTH, INC.	LEGAL RESERVE COMPANY	DE.....NIA.....		LEGAL RESERVE COMPANY	Ownership, Board of Directors	28.750	MUTUAL LEGAL RESERVE COMPANY		
		00000	86-0813402			TRIWEST ALLIANCE, INC.	HEALTH CARE SERVICE CORPORATION, A MUTUAL	DE.....NIA.....		HEALTH CARE SERVICE CORPORATION, A MUTUAL	Ownership, Board of Directors	15.610	HEALTH CARE SERVICE CORPORATION, A	YES.....	
		00000	37-1789176			HCSC VENTURES, INC.	HEALTH CARE SERVICE CORPORATION, A MUTUAL	DE.....NIA.....		HEALTH CARE SERVICE CORPORATION, A MUTUAL	Ownership, Board of Directors, Management	100.000	MUTUAL LEGAL RESERVE COMPANY	YES.....	
		00000	83-2215567			ALACURA HOLDINGS, INC.	ALACURA HOLDINGS, INC.	DE.....NIA.....		ALACURA HOLDINGS, INC.	Ownership, Board of Directors	23.180	HEALTH CARE SERVICE CORPORATION, A	NO.....	0000007
		00000	46-3019902			AVALON HEALTH SERVICES, LLC D/B/A AVALON	AVALON HEALTH SERVICES, LLC D/B/A AVALON	DE.....NIA.....		AVALON HEALTH SERVICES, LLC D/B/A AVALON	Ownership, Board of Directors	18.000	HEALTH CARE SERVICE CORPORATION, A	NO.....	
		00000	26-2930757		0001439779 ..	HEALTHCARE SOLUTIONS	HEALTHCARE SOLUTIONS	DE.....NIA.....		HEALTHCARE SOLUTIONS	Ownership, Board of Directors	21.600	MUTUAL LEGAL RESERVE COMPANY		
		00000	26-2936839		0001439778 ..	BLUECROSS BLUESHIELD VENTURES, INC.	HCSC VENTURES, INC.	DE.....NIA.....		HCSC VENTURES, INC.	Ownership, Board of Directors	1.000	HEALTH CARE SERVICE CORPORATION, A	NO.....	0000003
		00000	26-2936839		0001439778 ..	BLUECROSS BLUESHIELD VENTURE PARTNERS, L.P.	BLUECROSS BLUESHIELD VENTURES, INC.	DE.....NIA.....		BLUECROSS BLUESHIELD VENTURES, INC.	Ownership, Management	21.300	MUTUAL LEGAL RESERVE COMPANY	NO.....	0000003
		00000	47-1692551			COGITATIVO, INC.	HCSC VENTURES, INC.	DE.....NIA.....		HCSC VENTURES, INC.	Ownership, Board of Directors	11.900	MUTUAL LEGAL RESERVE COMPANY	NO.....	
		00000	82-1682951			HCSC ITC, LLC	HCSC VENTURES, INC.	DE.....NIA.....		HCSC VENTURES, INC.	Ownership, Board of Directors, Management	100.000	HEALTH CARE SERVICE CORPORATION, A	NO.....	
		00000	47-0970280		0001612123 ..	HEALTHBOX CHICAGO III LLC	HCSC VENTURES, INC.	DE.....NIA.....		HCSC VENTURES, INC.	Ownership.....	36.300	MUTUAL LEGAL RESERVE COMPANY	NO.....	
		00000	87-4386908			HCSC INVESTMENTS, LLC	HEALTH CARE SERVICE CORPORATION, A MUTUAL	DE.....NIA.....		HEALTH CARE SERVICE CORPORATION, A MUTUAL	Ownership, Board of Directors, Management	100.000	MUTUAL LEGAL RESERVE COMPANY	NO.....	
0917	HCSC GROUP	16013	61-1782332			ILLINOIS BLUE CROSS BLUE SHIELD INSURANCE COMPANY	ILLINOIS BLUE CROSS BLUE SHIELD INSURANCE COMPANY	IL.....IA.....		ILLINOIS BLUE CROSS BLUE SHIELD INSURANCE COMPANY	Ownership, Board of Directors, Management	100.000	MUTUAL LEGAL RESERVE COMPANY	NO.....	
0917	HCSC GROUP	16359	38-3984430			505 INSURANCE COMPANY	HEALTH CARE SERVICE CORPORATION, A MUTUAL	NM.....IA.....		505 INSURANCE COMPANY	Ownership, Board of Directors, Management	100.000	MUTUAL LEGAL RESERVE COMPANY	NO.....	
0917	HCSC GROUP	15941	36-4836697			TEXAS BLUE CROSS BLUE SHIELD INSURANCE COMPANY	HEALTH CARE SERVICE CORPORATION, A MUTUAL	TX.....IA.....		TEXAS BLUE CROSS BLUE SHIELD INSURANCE COMPANY	Ownership, Board of Directors, Management	100.000	MUTUAL LEGAL RESERVE COMPANY	NO.....	
		00000	84-2710924			SOUTH WATER INSURANCE COMPANY	HEALTH CARE SERVICE CORPORATION, A MUTUAL	UT.....NIA.....		SOUTH WATER INSURANCE COMPANY	Ownership, Board of Directors, Management	100.000	MUTUAL LEGAL RESERVE COMPANY	YES.....	0000004
		00000	35-1846036			LUMINARE HEALTH BENEFITS, INC.	HEALTH CARE SERVICE CORPORATION, A MUTUAL	DE.....NIA.....		LUMINARE HEALTH BENEFITS, INC.	Ownership, Board of Directors, Management	100.000	MUTUAL LEGAL RESERVE COMPANY	YES.....	
		00000	99-1184798			HCSC MEDICARE HOLDINGS INC.	HEALTH CARE SERVICE CORPORATION, A MUTUAL	DE.....UIC.....		HCSC MEDICARE HOLDINGS INC.	Ownership, Board of Directors, Management	100.000	MUTUAL LEGAL RESERVE COMPANY	YES.....	
		00000	99-1194574			HCSC MEDICARE INC.	HEALTH CARE SERVICE CORPORATION, A MUTUAL	DE.....UIC.....		HCSC MEDICARE INC.	Ownership, Board of Directors, Management	100.000	MUTUAL LEGAL RESERVE COMPANY	NO.....	
		00000	34-1970892			CERES SALES OF OHIO, LLC	HEALTH CARE SERVICE CORPORATION, A MUTUAL	OH.....NIA.....		CERES SALES OF OHIO, LLC	Ownership, Management	100.000	MUTUAL LEGAL RESERVE COMPANY		
0917	HCSC GROUP	95604	84-1004500			CIGNA HEALTHCARE OF COLORADO, INC.	HEALTH CARE SERVICE CORPORATION, A	CO.....IA.....		CIGNA HEALTHCARE OF COLORADO, INC.	Ownership, Board, Management	100.000	MUTUAL LEGAL RESERVE COMPANY		
0917	HCSC GROUP	61727	34-0970995			CIGNA NATIONAL HEALTH INSURANCE COMPANY	HEALTH CARE SERVICE CORPORATION, A	OH.....IA.....		CIGNA NATIONAL HEALTH INSURANCE COMPANY	Ownership, Board, Management	100.000	MUTUAL LEGAL RESERVE COMPANY		
0917	HCSC GROUP	67903	23-1335885			PROVIDENT AMERICAN LIFE & HEALTH INSURANCE COMPANY	HEALTH CARE SERVICE CORPORATION, A	OH.....IA.....		PROVIDENT AMERICAN LIFE & HEALTH INSURANCE COMPANY	Ownership, Board, Management	100.000	MUTUAL LEGAL RESERVE COMPANY		

STATEMENT AS OF MARCH 31, 2025 OF THE AMERICAN RETIREMENT LIFE INSURANCE COMPANY

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 Domestic- ciliary Location	10 Relation- ship 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 Owner- ship Provide Percent- age	14 Ultimate Controlling Entity(es)/Person(s)	15 Is an SCA Filing Required? (Yes/No)	16 *
0917	HCSC GROUP	65629	75-2305400			CIGNA INSURANCE COMPANY		OH	IA	PROVIDENT AMERICAN LIFE & HEALTH INSURANCE COMPANY	Ownership, Board, Management	100.00	HEALTH CARE SERVICE CORPORATION, A		
		00000	20-1821898			HEALTHSPRING, INC.		DE	NIA	HCSC MEDICARE INC.	Ownership, Board, Management	100.00	MUTUAL LEGAL RESERVE COMPANY		
		00000	76-0628370			NEWQUEST, LLC		TX	NIA	HEALTHSPRING, INC.	Ownership, Board, Management	100.00	HEALTH CARE SERVICE CORPORATION, A		
						HEALTHSPRING LIFE & HEALTH INSURANCE COMPANY, INC.		IL	IA	NEWQUEST, LLC	Ownership, Board, Management	100.00	MUTUAL LEGAL RESERVE COMPANY		
		0917	12902	20-8534298		HEALTHSPRING MANAGEMENT OF AMERICA, LLC		DE	NIA	NEWQUEST, LLC	Ownership, Management	100.00	HEALTH CARE SERVICE CORPORATION, A		
			00000	20-8647386		HEALTHSPRING OF FLORIDA, INC.		FL	IA	NEWQUEST, LLC	Ownership, Board, Management	100.00	MUTUAL LEGAL RESERVE COMPANY		
		0917	11532	65-1129599		HEALTHSPRING USA, LLC		TN	NIA	NEWQUEST, LLC	Ownership, Management	100.00	HEALTH CARE SERVICE CORPORATION, A		
			00000	72-1559530		HOUQUEST, LLC		DE	NIA	NEWQUEST, LLC	Ownership, Management	100.00	MUTUAL LEGAL RESERVE COMPANY		
			00000	75-3108521		GULFQUEST, LP		TX	NIA	HOUQUEST, LLC	Ownership, Management	99.00	HEALTH CARE SERVICE CORPORATION, A		
			00000	76-0657035		NEWQUEST MANAGEMENT NORTHEAST, LLC		DE	NIA	NEWQUEST, LLC	Ownership, Management	100.00	MUTUAL LEGAL RESERVE COMPANY		0000003
			00000	52-1929677		BRAVO HEALTH PENNSYLVANIA, INC.		PA	IA	NEWQUEST MANAGEMENT NORTHEAST, LLC	Ownership, Board, Management	100.00	HEALTH CARE SERVICE CORPORATION, A		
		0917	11524	52-2363406		BRAVO HEALTH MID-ATLANTIC, INC.		MD	IA	NEWQUEST MANAGEMENT NORTHEAST, LLC	Ownership, Board, Management	100.00	MUTUAL LEGAL RESERVE COMPANY		
		0917	10095	52-2259087		NEWQUEST MANAGEMENT ALABAMA, LLC		AL	NIA	NEWQUEST, LLC	Ownership, Management	100.00	HEALTH CARE SERVICE CORPORATION, A		
			00000	33-1033586		NEWQUEST MANAGEMENT OF FLORIDA, LLC		FL	NIA	NEWQUEST, LLC	Ownership, Management	100.00	MUTUAL LEGAL RESERVE COMPANY		
			00000	20-4954206		NEWQUEST MANAGEMENT OF ILLINOIS, LLC		IL	NIA	NEWQUEST, LLC	Ownership, Management	100.00	HEALTH CARE SERVICE CORPORATION, A		
			00000	77-0632665		TENNESSEE QUEST, LLC		TN	NIA	NEWQUEST, LLC	Ownership, Management	100.00	MUTUAL LEGAL RESERVE COMPANY		
			00000	20-5524622		TEXQUEST, LLC		DE	NIA	NEWQUEST, LLC	Ownership, Management	100.00	HEALTH CARE SERVICE CORPORATION, A		
			00000	75-3108527		GULFQUEST, LP		TX	NIA	TEXQUEST, LLC	Ownership, Management	1.00	MUTUAL LEGAL RESERVE COMPANY		0000003
			00000	76-0657035		LOYAL AMERICAN LIFE INSURANCE COMPANY		OH	UDP	HCSC MEDICARE INC.	Ownership, Board, Management	100.00	HEALTH CARE SERVICE CORPORATION, A		
		0917	65722	63-0343428		AMERICAN RETIREMENT LIFE INSURANCE COMPANY		OH	RE	LOYAL AMERICAN LIFE INSURANCE COMPANY	Ownership, Board, Management	100.00	MUTUAL LEGAL RESERVE COMPANY		
		0917	88366	59-2760189		MEDCO CONTAINMENT INSURANCE COMPANY OF NEW YORK		NY	IA	HCSC MEDICARE INC.	Ownership, Board, Management	100.00	HEALTH CARE SERVICE CORPORATION, A		
		0917	34720	13-3506395		MEDCO CONTAINMENT LIFE INSURANCE COMPANY		PA	IA	HCSC MEDICARE INC.	Ownership, Board, Management	100.00	MUTUAL LEGAL RESERVE COMPANY		
		0917	63762	42-1425239		STERLING LIFE INSURANCE COMPANY		IL	IA	HCSC MEDICARE INC.	Ownership, Board, Management	100.00	HEALTH CARE SERVICE CORPORATION, A		
		0917	77399	13-1867829		CIVICASCIPT, LLC		DE	NIA	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY	Board of Directors	0.00	MUTUAL LEGAL RESERVE COMPANY	NO	0000008
			00000	84-4777602		CARING FOR CHILDREN FOUNDATION OF TEXAS, INC.		TX	NIA	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY	Board of Directors, Management	0.00	HEALTH CARE SERVICE CORPORATION, A	NO	0000004
			00000	75-2393811		THE CARING FOUNDATION OF MONTANA, INC.		MT	NIA	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY	Board of Directors, Management	0.00	HEALTH CARE SERVICE CORPORATION, A	NO	0000004
			00000	35-2613131											

STATEMENT AS OF MARCH 31, 2025 OF THE AMERICAN RETIREMENT LIFE INSURANCE COMPANY

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 Domi-ciliary Loca-tion	10 Rela-tion-ship 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 Owner-ship Provide Percen-tage	14 Ultimate Controlling Entity(ies)/Person(s)	15 Is an SCA Filing Re-quired? (Yes/No)	16 *
		00000	73-1470846			THE OKLAHOMA CARING FOUNDATION, INC.	OK	NIA	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY	Board of Directors, Management	0.000	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY	NO	0000005	
		00000	36-6057472			PLANITES CREDIT UNION	IL	NIA	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY	Board of Directors, Management	0.000	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY	NO	0000006	
		00000	75-6020171			LIFETIME FEDERAL CREDIT UNION	TX	NIA	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY	Board of Directors, Management	0.000	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY	NO	0000006	

Asterisk	Explanation
0000001	Except in this case, Column 11 includes only those entities with an ownership interest in a corresponding downstream subsidiary (DS) listed in Column 8
0000002	Ownership (shell company)
0000003	Reflect direct ownership percentages only
0000004	Majority of the directors are employees or directors of HCSC
0000005	6 of 10 directors are employees of HCSC, all officers are HCSC employees, and HCSC provides support and staffing
0000006	All members and directors are current or former HCSC and affiliate employees and their families, and HCSC provides support
0000007	Includes 2.78% passive investment through private equity funds
0000008	HCSC controls 1 of 10 board seats

STATEMENT AS OF MARCH 31, 2025 OF THE AMERICAN RETIREMENT LIFE INSURANCE COMPANY
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing. 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.

	Response
1. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC with this statement?	NO
2. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	NO
3. Will the Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC?	NO
4. 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?	NO
5. 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?	NO
6. 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?	NO
7. 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?	NO
8. Will the Life PBR Statement of Exemption be filed with the state of domicile by July 1st and electronically with the NAIC with the second quarterly filing per the Valuation Manual (by August 15)? (2nd Quarter Only) The response for 1st and 3rd quarters should be N/A. A NO response resulting with a bar code is only appropriate in the 2nd quarter. In the case of an ongoing statement of exemption, enter "SEE EXPLANATION" and provide as an explanation that the company is utilizing an ongoing statement of exemption.	N/A
AUGUST FILING	
9. Will the regulator-only (non-public) Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile and electronically with the NAIC (as a regulator-only non-public document) by August 1? The response for 1st and 3rd quarters should be N/A. A NO response resulting with a bar code is only appropriate in the 2nd quarter.	N/A

Explanation:

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.

Bar Code:

1. Trusteed Surplus Statement [Document Identifier 490]
2. Medicare Part D Coverage Supplement [Document Identifier 365]
3. Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV [Document Identifier 445]
4. Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXV [Document Identifier 446]
5. Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI [Document Identifier 447]
6. Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI [Document Identifier 448]
7. Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value) [Document Identifier 449]



STATEMENT AS OF MARCH 31, 2025 OF THE AMERICAN RETIREMENT LIFE INSURANCE COMPANY
OVERFLOW PAGE FOR WRITE-INS

NONE

SCHEDULE A - VERIFICATION

Real Estate

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year		
2. Cost of acquired:		
2.1 Actual cost at time of acquisition		
2.2 Additional investment made after acquisition		
3. Current year change in encumbrances		
4. Total gain (loss) on disposals		
5. Deduct amounts received on disposals		
6. Total foreign exchange change in book/adjusted carrying value		
7. Deduct current year's other than temporary impairment recognized		
8. Deduct current year's depreciation		
9. Book/adjusted carrying value at the end of current period (Lines 1+2+3+4-5+6-7-8)		
10. Deduct total nonadmitted amounts		
11. Statement value at end of current period (Line 9 minus Line 10)		

NONE**SCHEDULE B - VERIFICATION**

Mortgage Loans

	1 Year to Date	2 Prior Year Ended December 31
1. Book value/recorded investment excluding accrued interest, December 31 of prior year		
2. Cost of acquired:		
2.1 Actual cost at time of acquisition		
2.2 Additional investment made after acquisition		
3. Capitalized deferred interest and other		
4. Accrual of discount		
5. Unrealized valuation increase/(decrease)		
6. Total gain (loss) on disposals		
7. Deduct amounts received on disposals		
8. Deduct amortization of premium and mortgage interest paid and committed fees		
9. Total foreign exchange change in book value/recorded investment excluding accrued interest		
10. Deduct current year's other than temporary impairment recognized		
11. Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)		
12. Total valuation allowance		
13. Subtotal (Line 11 plus Line 12)		
14. Deduct total nonadmitted amounts		
15. Statement value at end of current period (Line 13 minus Line 14)		

NONE**SCHEDULE BA - VERIFICATION**

Other Long-Term Invested Assets

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year	1,055,412	
2. Cost of acquired:		
2.1 Actual cost at time of acquisition	0	1,060,380
2.2 Additional investment made after acquisition	0	0
3. Capitalized deferred interest and other	0	0
4. Accrual of discount	0	0
5. Unrealized valuation increase/(decrease)	0	0
6. Total gain (loss) on disposals	0	
7. Deduct amounts received on disposals	0	
8. Deduct amortization of premium, depreciation and proportional amortization	1,300	4,968
9. Total foreign exchange change in book/adjusted carrying value	0	0
10. Deduct current year's other than temporary impairment recognized	0	0
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)	1,054,112	1,055,412
12. Deduct total nonadmitted amounts	0	
13. Statement value at end of current period (Line 11 minus Line 12)	1,054,112	1,055,412

SCHEDULE D - VERIFICATION

Bonds and Stocks

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year	129,834,006	126,503,944
2. Cost of bonds and stocks acquired	29,858,377	28,512,934
3. Accrual of discount	56,314	188,381
4. Unrealized valuation increase/(decrease)	0	
5. Total gain (loss) on disposals	0	263
6. Deduct consideration for bonds and stocks disposed of	2,000,000	25,250,000
7. Deduct amortization of premium	29,599	121,516
8. Total foreign exchange change in book/adjusted carrying value	0	
9. Deduct current year's other than temporary impairment recognized	0	
10. Total investment income recognized as a result of prepayment penalties and/or acceleration fees	0	
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10)	157,719,097	129,834,006
12. Deduct total nonadmitted amounts	0	
13. Statement value at end of current period (Line 11 minus Line 12)	157,719,097	129,834,006

STATEMENT AS OF MARCH 31, 2025 OF THE AMERICAN RETIREMENT LIFE INSURANCE COMPANY

SCHEDULE D - PART 1B

Showing the Acquisitions, Dispositions and Non-Trading Activity
During the Current Quarter for all Bonds and Preferred Stock by NAIC Designation

NAIC Designation	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
ISSUER CREDIT OBLIGATIONS (ICO)								
1. NAIC 1 (a)	34,024,447	29,858,377	2,000,000	5,364,558	67,247,381	0	0	34,024,447
2. NAIC 2 (a)	95,311,071	0	0	(5,337,907)	89,973,164	0	0	95,311,071
3. NAIC 3 (a)	498,498	0	0	64	498,562	0	0	498,498
4. NAIC 4 (a)	0	0	0	0	0	0	0	0
5. NAIC 5 (a)	0	0	0	0	0	0	0	0
6. NAIC 6 (a)	0	0	0	0	0	0	0	0
7. Total ICO	129,834,016	29,858,377	2,000,000	26,715	157,719,107	0	0	129,834,016
ASSET-BACKED SECURITIES (ABS)								
8. NAIC 1	0	0	0	0	0	0	0	0
9. NAIC 2	0	0	0	0	0	0	0	0
10. NAIC 3	0	0	0	0	0	0	0	0
11. NAIC 4	0	0	0	0	0	0	0	0
12. NAIC 5	0	0	0	0	0	0	0	0
13. NAIC 6	0	0	0	0	0	0	0	0
14. Total ABS	0	0	0	0	0	0	0	0
PREFERRED STOCK								
15. NAIC 1	0	0	0	0	0	0	0	0
16. NAIC 2	0	0	0	0	0	0	0	0
17. NAIC 3	0	0	0	0	0	0	0	0
18. NAIC 4	0	0	0	0	0	0	0	0
19. NAIC 5	0	0	0	0	0	0	0	0
20. NAIC 6	0	0	0	0	0	0	0	0
21. Total Preferred Stock	0	0	0	0	0	0	0	0
22. Total ICO, ABS & Preferred Stock	129,834,016	29,858,377	2,000,000	26,715	157,719,107	0	0	129,834,016

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of short-term and cash equivalent bonds by NAIC designation:

NAIC 1 \$0 ; NAIC 2 \$0 ; NAIC 3 \$0 NAIC 4 \$0 ; NAIC 5 \$0 ; NAIC 6 \$0

Schedule DA - Part 1 - Short-Term Investments

N O N E

Schedule DA - Verification - Short-Term Investments

N O N E

Schedule DB - Part A - Verification - Options, Caps, Floors, Collars, Swaps and Forwards

N O N E

Schedule DB - Part B - Verification - Futures Contracts

N O N E

Schedule DB - Part C - Section 1 - Replication (Synthetic Asset) Transactions (RSATs) Open

N O N E

Schedule DB-Part C-Section 2-Reconciliation of Replication (Synthetic Asset) Transactions Open

N O N E

Schedule DB - Verification - Book/Adjusted Carrying Value, Fair Value and Potential Exposure of Derivatives

N O N E

SCHEDULE E - PART 2 - VERIFICATION

(Cash Equivalents)

	1 Year To Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year	12,498,132	14,449,248
2. Cost of cash equivalents acquired	81,239,789	245,763,884
3. Accrual of discount	0	0
4. Unrealized valuation increase/(decrease)	0	0
5. Total gain (loss) on disposals	0	0
6. Deduct consideration received on disposals	93,684,592	247,715,000
7. Deduct amortization of premium	0	0
8. Total foreign exchange change in book/adjusted carrying value	0	0
9. Deduct current year's other than temporary impairment recognized	0	0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	53,329	12,498,132
11. Deduct total nonadmitted amounts	0	0
12. Statement value at end of current period (Line 10 minus Line 11)	53,329	12,498,132

Schedule A - Part 2 - Real Estate Acquired and Additions Made
N O N E

Schedule A - Part 3 - Real Estate Disposed
N O N E

Schedule B - Part 2 - Mortgage Loans Acquired and Additions Made
N O N E

Schedule B - Part 3 - Mortgage Loans Disposed, Transferred or Repaid
N O N E

Schedule BA - Part 2 - Other Long-Term Invested Assets Acquired and Additions Made
N O N E

Schedule BA - Part 3 - Other Long-Term Invested Assets Disposed, Transferred or Repaid
N O N E

STATEMENT AS OF MARCH 31, 2025 OF THE AMERICAN RETIREMENT LIFE INSURANCE COMPANY

SCHEDULE D - PART 3

Show All Long-Term Bonds and Stock Acquired During the Current Quarter

1 CUSIP Identification	2 Description	3 Date Acquired	4 Name of Vendor	5 Number of Shares of Stock	6 Actual Cost	7 Par Value	8 Paid for Accrued Interest and Dividends	9 NAIC Designation, NAIC Designation Modifier and SVO Adminis- trative Symbol
91282C-MC-2	UNITED STATES TREASURY	01/29/2025	Unknown	5,997,730	6,000,000	21,630	21,630	1.A
91282C-MD-0	UNITED STATES TREASURY	01/29/2025	Unknown	5,985,905	6,000,000	21,029	21,029	1.A
91282C-MG-3	UNITED STATES TREASURY	02/13/2025	Unknown	8,936,773	9,000,000	8,629	8,629	1.A
91282C-NK-4	UNITED STATES TREASURY	02/13/2025	Unknoin	8,937,968	9,000,000	8,883	8,883	1.A
0019999999. Subtotal - Issuer Credit Obligations - U.S. Government Obligations (Exempt from RBC)						29,858,377	30,000,000	60,171 XXX
0489999999. Total - Issuer Credit Obligations (Unaffiliated)						29,858,377	30,000,000	60,171 XXX
0499999999. Total - Issuer Credit Obligations (Affiliated)						0	0	0 XXX
0509999997. Total - Issuer Credit Obligations - Part 3						29,858,377	30,000,000	60,171 XXX
0509999998. Total - Issuer Credit Obligations - Part 5						XXX	XXX	XXX XXX
0509999999. Total - Issuer Credit Obligations						29,858,377	30,000,000	60,171 XXX
1889999999. Total - Asset-Backed Securities (Unaffiliated)						0	0	0 XXX
1899999999. Total - Asset-Backed Securities (Affiliated)						0	0	0 XXX
1909999997. Total - Asset-Backed Securities - Part 3						0	0	0 XXX
1909999998. Total - Asset-Backed Securities - Part 5						XXX	XXX	XXX XXX
1909999999. Total - Asset-Backed Securities						0	0	0 XXX
2009999999. Total - Issuer Credit Obligations and Asset-Backed Securities						29,858,377	30,000,000	60,171 XXX
4509999997. Total - Preferred Stocks - Part 3						0	XXX	0 XXX
4509999998. Total - Preferred Stocks - Part 5						XXX	XXX	XXX XXX
4509999999. Total - Preferred Stocks						0	XXX	0 XXX
5989999997. Total - Common Stocks - Part 3						0	XXX	0 XXX
5989999998. Total - Common Stocks - Part 5						XXX	XXX	XXX XXX
5989999999. Total - Common Stocks						0	XXX	0 XXX
5999999999. Total - Preferred and Common Stocks						0	XXX	0 XXX
6009999999 - Totals						29,858,377	XXX	60,171 XXX

STATEMENT AS OF MARCH 31, 2025 OF THE AMERICAN RETIREMENT LIFE INSURANCE COMPANY

SCHEDULE D - PART 4

Show All Long-Term Bonds and Stock Sold, Redeemed or Otherwise Disposed of During the Current Quarter

1 CUSIP Ident- ification	2 Description	3 Disposal Date	4 Name of Purchaser	5 Number of Shares of Stock	6 Consid- eration	7 Par Value	8 Actual Cost	9 Prior Year Book/ Adjusted Carrying Value	Change In Book/Adjusted Carrying Value					15 Book/ Adjusted Carrying Value at Disposal Date	16 Foreign Exchange Gain (Loss) on Disposal	17 Realized Gain (Loss) on Disposal	18 Total Gain (Loss) on Disposal	19 Bond Interest/ Stock Dividends Received During Year	20 Stated Con- tractual Maturity Date	21 NAIC Design- ation, NAIC Design- ation Modifier and SVO Admini- stra- tive Symbol	
									10 Unrealized Valuation Increase/ (Decrease)	11 Current Year's (Amor- tization)/ Accretion	12 Current Year's Other Than Temporary Impairment Recogn- ized	13 Total Change in Book/ Adjusted Carrying Value (10 + 11 - 12)	14 Total Foreign Exchange Change in Book/ Adjusted Carrying Value								
.37331N-AH-4	GEORGIA-PACIFIC LLC	03/01/2025	Maturity @ 100.00		1,000,000	1,000,000	999,610	999,920	0	.80	0	.80	0	1,000,000	0	0	0	0	18,000	03/01/2025	1.G FE
.96950F-AQ-7	WILLIAMS COMPANIES INC	01/15/2025	Maturity @ 100.00		1,000,000	1,000,000	1,005,600	1,000,000	0	0	0	0	0	1,000,000	0	0	0	0	19,500	01/15/2025	2.B FE
0089999999. Subtotal - Issuer Credit Obligations - Corporate Bonds (Unaffiliated)					2,000,000	2,000,000	2,005,210	1,999,920	0	80	0	80	0	2,000,000	0	0	0	0	37,500	XXX	XXX
0489999999. Total - Issuer Credit Obligations (Unaffiliated)					2,000,000	2,000,000	2,005,210	1,999,920	0	80	0	80	0	2,000,000	0	0	0	0	37,500	XXX	XXX
0499999999. Total - Issuer Credit Obligations (Affiliated)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
0509999997. Total - Issuer Credit Obligations - Part 4					2,000,000	2,000,000	2,005,210	1,999,920	0	80	0	80	0	2,000,000	0	0	0	0	37,500	XXX	XXX
0509999998. Total - Issuer Credit Obligations - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0509999999. Total - Issuer Credit Obligations					2,000,000	2,000,000	2,005,210	1,999,920	0	80	0	80	0	2,000,000	0	0	0	0	37,500	XXX	XXX
1889999999. Total - Asset-Backed Securities (Unaffiliated)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
1899999999. Total - Asset-Backed Securities (Affiliated)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
1909999997. Total - Asset-Backed Securities - Part 4					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
1909999998. Total - Asset-Backed Securities - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1909999999. Total - Asset-Backed Securities					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
2009999999. Total - Issuer Credit Obligations and Asset-Backed Securities					2,000,000	2,000,000	2,005,210	1,999,920	0	80	0	80	0	2,000,000	0	0	0	0	37,500	XXX	XXX
4509999997. Total - Preferred Stocks - Part 4					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
4509999998. Total - Preferred Stocks - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
4509999999. Total - Preferred Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
5989999997. Total - Common Stocks - Part 4					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
5989999998. Total - Common Stocks - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
5989999999. Total - Common Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
5999999999. Total - Preferred and Common Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
6009999999 - Totals					2,000,000	XXX	2,005,210	1,999,920	0	80	0	80	0	2,000,000	0	0	0	0	37,500	XXX	XXX

Schedule DB - Part A - Section 1 - Options, Caps, Floors, Collars, Swaps and Forwards Open
N O N E

Schedule DB - Part B - Section 1 - Futures Contracts Open
N O N E

Schedule DB - Part B - Section 1B - Brokers with whom cash deposits have been made
N O N E

Schedule DB - Part D - Section 1 - Counterparty Exposure for Derivative Instruments Open
N O N E

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged By
N O N E

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged To
N O N E

Schedule DB - Part E - Derivatives Hedging Variable Annuity Guarantees
N O N E

Schedule DL - Part 1 - Reinvested Collateral Assets Owned
N O N E

Schedule DL - Part 2 - Reinvested Collateral Assets Owned
N O N E

STATEMENT AS OF MARCH 31, 2025 OF THE AMERICAN RETIREMENT LIFE INSURANCE COMPANY

SCHEDULE E - PART 1 - CASH

Month End Depository Balances

1 Depository	2 Restricted Asset Code	3 Rate of Interest	4 Amount of Interest Received During Current Quarter	5 Amount of Interest Accrued at Current Statement Date	Book Balance at End of Each Month During Current Quarter			9 *
					6 First Month	7 Second Month	8 Third Month	
Bank of America Depository ... Richmond, VA .....	...0.000	.....0	.....0	.....(1,776,708)	.....(1,871,197)	.....30,129,463	.....	....XXX
Austin, TX/San Antonio, TX								
JPMorgan Chase—Depository ...	...0.000	.....0	.....0	.....283,074	.....1,622,364	.....(855,648)	.....	....XXX
JPMorgan Chase Investments ... Brooklyn, NY .....	...0.000	.....0	.....0	.....17,282	.....25,690	.....(1)	.....	....XXX
Wells Fargo San Francisco, CA .....	.....	.....	.....	.....742,457	.....722,582	.....736,811	.....	....XXX
0199998. Deposits in ... 0 depositaries that do not exceed the allowable limit in any one depository (See instructions) - Open Depositories	XXX	XXX	0	0	0	0	0	XXX
0199999. Totals - Open Depositories	XXX	XXX	0	0	(733,895)	499,439	30,010,625	XXX
0299998. Deposits in ... 0 depositaries that do not exceed the allowable limit in any one depository (See instructions) - Suspended Depositories	XXX	XXX	0	0	0	0	0	XXX
0299999. Totals - Suspended Depositories	XXX	XXX	0	0	0	0	0	XXX
0399999. Total Cash on Deposit	XXX	XXX	0	0	(733,895)	499,439	30,010,625	XXX
0499999. Cash in Company's Office	XXX	XXX	XXX	XXX	0	0	0	XXX
.....
.....
.....
.....
.....
.....
0599999. Total - Cash	XXX	XXX	0	0	(733,895)	499,439	30,010,625	XXX

STATEMENT AS OF MARCH 31, 2025 OF THE AMERICAN RETIREMENT LIFE INSURANCE COMPANY

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter