

MAY 15, 2024

g December 31, 2023 conformable to the requirements of the laws of this State regarding the business of insurance and **WHEREAS**, the said company has filed in this office a duly certified copy of its charter with certificate of organization in compliance with the requirements of insurance law aforesaid, **NOW THEREFORE, I, JON GODFREAD**, Commissioner of Insurance of the State of North Dakota, pursuant to the provisions of said laws, do hereby certify that the above named company is fully empowered through its authorized agents and representatives, to transact its appropriated business of authorized insurance in the state according to the laws thereof, until the 30th day of April, A.D. 2025. **IN TESTIMONY WHEREOF**, I have hereunto set my hand and seal at Bismarck this first day of May, A.D., 2024 (SEAL) **JON GODFREAD** Commissioner of Insurance (May 15, 22, 29) 92738 **ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2023 of the** American Equity Investment Life Insurance Company In the state of Iowa Total Assets 59,829,070,316.00 Total Liabilities 56,098,130,785.00 Aggregate write-ins for special surplus funds 0.00 Common Capital Stock 2,500,000.00 Preferred Capital Stock 0.00 Aggregate Write-ins for Other Than Special Surplus Funds 0.00 Surplus Notes 51,000,000.00 Gross Paid in and Contributed Surplus 1,619,100,037.00 Unassigned funds (surplus) 2,058,339,494.00 Total Capital and Surplus 3,730,939,531.00 Total Liabilities, Capital And Surplus 59,829,070,316.00 **NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2023** Total Life and Annuity Premiums written 11,006,825.00 Total Life and Annuity Direct Losses Paid 17,780,193.00 Total Accident and Health Direct Premiums Earned 0.00 Total Accident and Health Direct Losses Incurred 0.00 **STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE** I, Jon Godfread, Commissioner of Insurance of the State of North Dakota, do hereby certify that the foregoing is a true Abstract of Statement, as officially filed by the Company in this office. **IN TESTIMONY WHEREOF**, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of May, A.D. 2024 (SEAL). **JON GODFREAD** Commissioner of Insurance **STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE COMPANY'S CERTIFICATE OF AUTHORITY** **WHEREAS**, the above corporation duly organized under the laws of its state or country of domicile, has filed in this office a sworn statement exhibiting its condition and business for the year ending December 31, 2023 conformable to the requirements of the laws of this State

regarding the business of insurance and **WHEREAS**, the said company has filed in this office a duly certified copy of its charter with certificate of organization in compliance with the requirements of insurance law aforesaid, **NOW THEREFORE, I, JON GODFREAD**, Commissioner of Insurance of the State of North Dakota, pursuant to the provisions of said laws, do hereby certify that the above named company is fully empowered through its authorized agents and representatives, to transact its appropriated business of authorized insurance in the state according to the laws thereof, until the 30th day of April, A.D. 2025. **IN TESTIMONY WHEREOF**, I have hereunto set my hand and seal at Bismarck this first day of May, A.D., 2024 (SEAL) **JON GODFREAD** Commissioner of Insurance (May 15, 22, 29) 94250 **ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2023 of the** Banner Life Insurance Company In the state of Maryland Total Assets 10,385,805,949.00 Total Liabilities 9,748,798,075.00 Aggregate write-ins for special surplus funds 0.00 Common Capital Stock 5,691,868.00 Preferred Capital Stock 664,557.00 Aggregate Write-ins for Other Than Special Surplus Funds 0.00 Surplus Notes 0.00 Gross Paid in and Contributed Surplus 2,051,213,433.00 Unassigned funds (surplus) -1,420,561,984.00 Total Capital and Surplus 637,007,874.00 Total Liabilities, Capital And Surplus 10,385,805,949.00 **NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2023** Total Life and Annuity Premiums written 4,198,393.00 Total Life and Annuity Direct Losses Paid 7,175,000.00 Total Accident and Health Direct Premiums Earned 49,813.00 Total Accident and Health Direct Losses Incurred 0.00 **STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE** I, Jon Godfread, Commissioner of Insurance of the State of North Dakota, do hereby certify that the foregoing is a true Abstract of Statement, as officially filed by the Company in this office. **IN TESTIMONY WHEREOF**, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of May, A.D. 2024 (SEAL). **JON GODFREAD** Commissioner of Insurance **STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE COMPANY'S CERTIFICATE OF AUTHORITY** **WHEREAS**, the above corporation duly organized under the laws of its state or country of domicile, has filed in this office a sworn statement exhibiting its condition and business for the year ending December 31, 2023 conformable to the requirements of the laws of this State regarding the business of insurance and **WHEREAS**, the said company has filed in this office a duly

certified copy of its charter with certificate of organization in compliance with the requirements of insurance law aforesaid, **NOW THEREFORE, I, JON GODFREAD**, Commissioner of Insurance of the State of North Dakota, pursuant to the provisions of said laws, do hereby certify that the above named company is fully empowered through its authorized agents and representatives, to transact its appropriated business of authorized insurance in the state according to the laws thereof, until the 30th day of April, A.D. 2025. **IN TESTIMONY WHEREOF**, I have hereunto set my hand and seal at Bismarck this first day of May, A.D., 2024 (SEAL) **JON GODFREAD** Commissioner of Insurance (May 15, 22, 29) 66974 **ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2023 of the** North American Company For Life and Health Insurance in the state of Iowa Total Assets 39,625,115,715.09 Total Liabilities 37,584,181,140.36 Aggregate write-ins for special surplus funds 30,655,171.70 Common Capital Stock 2,500,000.00 Preferred Capital Stock 0.00 Aggregate Write-ins for Other Than Special Surplus Funds 0.00 Surplus Notes 431,000,000.00 Gross Paid in and Contributed Surplus 627,491,131.04 Unassigned funds (surplus) 949,288,271.99 Total Capital and Surplus 2,040,934,574.73 Total Liabilities, Capital And Surplus 39,625,115,715.09 **NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2023** Total Life and Annuity Premiums written 11,760,622.57 Total Life and Annuity Direct Losses Paid 17,406,569.98 Total Accident and Health Direct Premiums Earned 0.00 Total Accident and Health Direct Losses Incurred 0.00 **STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE** I, Jon Godfread, Commissioner of Insurance of the State of North Dakota, do hereby certify that the foregoing is a true Abstract of Statement, as officially filed by the Company in this office. **IN TESTIMONY WHEREOF**, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of May, A.D. 2024 (SEAL). **JON GODFREAD** Commissioner of Insurance **STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE COMPANY'S CERTIFICATE OF AUTHORITY** **WHEREAS**, the above corporation duly organized under the laws of its state or country of domicile, has filed in this office a sworn statement exhibiting its condition and business for the year ending December 31, 2023 conformable to the requirements of the laws of this State regarding the business of insurance and **WHEREAS**, the said company has filed in this office a duly certified copy of its charter with certificate of organization in compliance with the

requirements of insurance law aforesaid, **NOW THEREFORE, I, JON GODFREAD**, Commissioner of Insurance of the State of North Dakota, pursuant to the provisions of said laws, do hereby certify that the above named company is fully empowered through its authorized agents and representatives, to transact its appropriated business of authorized insurance in the state according to the laws thereof, until the 30th day of April, A.D. 2025. **IN TESTIMONY WHEREOF**, I have hereunto set my hand and seal at Bismarck this first day of May, A.D., 2024 (SEAL) **JON GODFREAD** Commissioner of Insurance (May 15, 22, 29) 67466 **ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2023 of the** Pacific Life Insurance Company in the state of Nebraska Total Assets 193,235,443,410.00 Total Liabilities 181,443,374,416.00 Aggregate write-ins for special surplus funds 230,923,277.00 Common Capital Stock 30,000,000.00 Preferred Capital Stock 0.00 Aggregate Write-ins for Other Than Special Surplus Funds 82,800,396.00 Surplus Notes 82,800,396.00 Gross Paid in and Contributed Surplus 2,535,788,610.00 Unassigned funds (surplus) 7,457,480,216.00 Total Capital and Surplus 7,457,480,216.00 Total Liabilities, Capital And Surplus 7,457,480,216.00 **NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2023** Total Life and Annuity Premiums written 108,364,911.00 Total Life and Annuity Direct Losses Paid 38,966,094.00 Total Accident and Health Direct Premiums Earned 0.00 Total Accident and Health Direct Losses Incurred 0.00 **STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE** I, Jon Godfread, Commissioner of Insurance of the State of North Dakota, do hereby certify that the foregoing is a true Abstract of Statement, as officially filed by the Company in this office. **IN TESTIMONY WHEREOF**, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of May, A.D. 2024 (SEAL). **JON GODFREAD** Commissioner of Insurance **STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE COMPANY'S CERTIFICATE OF AUTHORITY** **WHEREAS**, the above corporation duly organized under the laws of its state or country of domicile, has filed in this office a sworn statement exhibiting its condition and business for the year ending December 31, 2023 conformable to the requirements of the laws of this State regarding the business of insurance and **WHEREAS**, the said company has filed in this office a duly certified copy of its charter with certificate of organization in compliance with the requirements of insurance law aforesaid, **NOW THEREFORE, I, JON GODFREAD**, Commissioner of

Insurance of the State of North Dakota, pursuant to the provisions of said laws, do hereby certify that the above named company is fully empowered through its authorized agents and representatives, to transact its appropriated business of authorized insurance in the state according to the laws thereof, until the 30th day of April, A.D. 2025. **IN TESTIMONY WHEREOF**, I have hereunto set my hand and seal at Bismarck this first day of May, A.D., 2024 (SEAL) **JON GODFREAD** Commissioner of Insurance (May 15, 22, 29) 68136 **ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2023 of the** Protective Life Insurance Company in the state of Tennessee Total Assets 82,597,474,333.00 Total Liabilities 77,280,808,867.00 Aggregate write-ins for special surplus funds 0.00 Common Capital Stock 5,000,000.00 Preferred Capital Stock 0.00 Aggregate Write-ins for Other Than Special Surplus Funds 0.00 Surplus Notes 110,000,000.00 Gross Paid in and Contributed Surplus 3,240,393,339.00 Unassigned funds (surplus) 1,961,272,127.00 Total Capital and Surplus 5,316,665,466.00 Total Liabilities, Capital And Surplus 82,597,474,333.00 **NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2023** Total Life and Annuity Premiums written 22,640,494.00 Total Life and Annuity Direct Losses Paid 14,175,095.00 Total Accident and Health Direct Premiums Earned 240,322.00 Total Accident and Health Direct Losses Incurred 0.00 **STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE** I, Jon Godfread, Commissioner of Insurance of the State of North Dakota, do hereby certify that the foregoing is a true Abstract of Statement, as officially filed by the Company in this office. **IN TESTIMONY WHEREOF**, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of May, A.D. 2024 (SEAL). **JON GODFREAD** Commissioner of Insurance **STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE COMPANY'S CERTIFICATE OF AUTHORITY** **WHEREAS**, the above corporation duly organized under the laws of its state or country of domicile, has filed in this office a sworn statement exhibiting its condition and business for the year ending December 31, 2023 conformable to the requirements of the laws of this State regarding the business of insurance and **WHEREAS**, the said company has filed in this office a duly certified copy of its charter with certificate of organization in compliance with the requirements of insurance law aforesaid, **NOW THEREFORE, I, JON GODFREAD**, Commissioner of Insurance of the State of North Dakota, pursuant to the provisions of said laws, do

hereby certify that the above named company is fully empowered through its authorized agents and representatives, to transact its appropriated business of authorized insurance in the state according to the laws thereof, until the 30th day of April, A.D. 2025. **IN TESTIMONY WHEREOF**, I have hereunto set my hand and seal at Bismarck this first day of May, A.D., 2024 (SEAL) **JON GODFREAD** Commissioner of Insurance (May 15, 22, 29) 68195 **ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2023 of the** Protective Life Insurance Company in the state of Tennessee Total Assets 5,952,114,935.00 Total Liabilities 5,290,811,120.00 Aggregate write-ins for special surplus funds 0.00 Common Capital Stock 43,501,205.00 Preferred Capital Stock 0.00 Aggregate Write-ins for Other Than Special Surplus Funds 11,875,739.00 Surplus Notes 0.00 Gross Paid in and Contributed Surplus 600,208,526.00 Unassigned funds (surplus) 5,718,345.00 Total Capital and Surplus 661,303,815.00 Total Liabilities, Capital And Surplus 5,952,114,935.00 **NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2023** Total Life and Annuity Premiums written 682,487.00 Total Life and Annuity Direct Losses Paid 281,878.00 Total Accident and Health Direct Premiums Earned 583,276.00 Total Accident and Health Direct Losses Incurred 291,726.00 **STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE** I, Jon Godfread, Commissioner of Insurance of the State of North Dakota, do hereby certify that the foregoing is a true Abstract of Statement, as officially filed by the Company in this office. **IN TESTIMONY WHEREOF**, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of May, A.D. 2024 (SEAL). **JON GODFREAD** Commissioner of Insurance **STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE COMPANY'S CERTIFICATE OF AUTHORITY** **WHEREAS**, the above corporation duly organized under the laws of its state or country of domicile, has filed in this office a sworn statement exhibiting its condition and business for the year ending December 31, 2023 conformable to the requirements of the laws of this State regarding the business of insurance and **WHEREAS**, the said company has filed in this office a duly certified copy of its charter with certificate of organization in compliance with the requirements of insurance law aforesaid, **NOW THEREFORE, I, JON GODFREAD**, Commissioner of Insurance of the State of North Dakota, pursuant to the provisions of said laws, do hereby certify that the above named company is fully empowered through its authorized agents and