65005

62952

ABSTRACT OF STATEMENT

FOR THE YEAR ENDING DECEMBER 31, 2024

700,401,698 145,187,116

The Cincinnati Casualty Company In the state of Ohio

28665

## ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2024 of the RiverSource Life Insurance Company In the state of Minnesota In the state of Minnesota Total Assets Total Liabilities Aggregate write-ins for special surplus funds Common Capital Stock Aggregate Write-ins for Other Than Special Surplus Funds Surplus Notes Gross Paid in and Contributed Surplus 113,683,456,398 111,017,564,985 2,448,383,755 3,000,000 0 500,000,000

Contributed Surplus Unassigned Funds Total Capital and Surplus Total Liabilities, Capital 450,731,922 -736,224,264 2,665,891,413 113.683.456.398 And Surplus NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2024 Total Life and 
 Total Life and
 36,667,358

 Annuity Premiums Written
 36,667,358

 Total Life and
 42,687,810

 Total Accident and
 42,687,810

 Health Direct Premiums
 1,062,036

Written Total Accident and Health Direct Losses Paid 2,865,316

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.

this office. IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of March, A.D. 2025 (SEAL). JON GODFREAD

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 busi-ness for the year ending December 31, 2024 conformable to the requirements of the laws of this State regarding the business of insurance and 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 afore-orid

said, NOW THEREFORE, I, JON GODFREAD, Commis-NOW THEREFORE, I, JON GODFREAD, Commis-sioner 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 busi-ness of authorized insurance in the state according to the laws thereof, until the 30th day of April, A.D. 2026. IN TESTIMONY WHEREOF, I have hereunto set my here and the insurance this first day of March A.D. 2025.

## hand and seal at Bismarck this first day of March, A.D., 2025

JON GODFREAD

of Insurance

(4/23, 30, 5/7)

FOR THE Y	DF STATEMENT EAR ENDING
	BER 31, 2024
	f the
The Cincinnati Indemnity Co In the state of Ohio	ompany
Total Assets Total Liabilities	200,274,712 62,296,915
Aggregate write-ins	
for special surplus funds	0
Common Capital Stock	3,600,000
Preferred Capital Stock Aggregate Write-ins for	0
Other Than	0
Special Surplus Funds	
Surplus Notes	0
Gross Paid in and	21,600,000
Contributed Surplus Unassigned funds (surplus)	112,777,797
Total Capital and Surplus	137,977,797
Total Liabilities, Capital	
And Surplus	200,274,712
NORTH DAKOTA BUSINESS ONLY	
FOR THE	2 YEAR 2024
Total Direct Premiums	
Earned	1,577,366
Total Direct Losses	000 1 52
Incurred Total Accident and	999,152
Health Direct Premiums	0
Earned	
Total Accident and	
Health Direct Losses	0
Incurred	
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 March, A.D. 2025 (SEAL). JON GODFREAD

ner of Insurance STATE OF NORTH DAKOTA

	OF STATEMENT YEAR ENDING
	BER 31, 2024
	of the
Rural Community Insurance In the state of Minnesota	e Company
Total Assets Total Liabilities Aggregate write-ins	2,790,934,806 2,614,130,643
for special surplus funds Common Capital Stock Preferred Capital Stock Aggregate Write-ins for	0 3,000,000 0
Other Than	0
Special Surplus Funds Surplus Notes Gross Paid in and	0
Contributed Surplus Unassigned funds (surplus) Total Capital and Surplus Total Liabilities, Capital	168,029,758 5,774,405 176,804,163
And Surplus	2,790,934,806
	TA BUSINESS ONLY E YEAR 2024
Total Direct Premiums Earned	255,005,662

Total Direct Premiums	
Earned	255,005,662
Total Direct Losses	
Incurred	161,846,642
Total Accident and	
Health Direct Premiums	0
Earned	
Total Accident and	
Health Direct Losses	0
Incurred	

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 March, A.D. 2025 (SEAL). JON GODFREAD

March, A.D. 2025 (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 busi-ness for the year ending December 31, 2024 conformable to the requirements of the laws of this State regarding the 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 afore-

NOW THEREFORE, I, JON GODFREAD, Commis-NOW THEREFORE, I, JON GODIREAD, Commis-sioner 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 busi-ness of authorized insurance in the state according to the state of the state according to the laws thereof, until the 30th day of April, A.D. 2026. IN TESTIMONY WHEREOF. I have hereunto set hand and seal at Bism (SEAL) JON GODFREAD smarck this first day of March, A.D., 2025

ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2024

of the

22,730,881,278 14,128,191,090

3,586,355

363,410,416 8,235,693,417 8,602,690,188

22,730,881,278

14,293,753

4.059.770

NORTH DAKOTA BUSINESS ONLY

FOR THE YEAR 2024

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 the office

IN TESTIMONY WHEREOF, I have hereunto set my hand

and affixed the seal of this office at Bismarck, the first day of March, A.D. 2025 (SEAL). JON GODFREAD

### oner of Insurance

The Cincinnati Insurance Compan

In the state of Ohio

Aggregate write-ins

for special surplus funds

Common Capital Stock Preferred Capital Stock Aggregate Write-ins for Other Than

Special Surplus Funds

Contributed Surplus Unassigned funds (surplus) Total Capital and Surplus Total Liabilities, Capital

Surplus Notes Bross Paid in and

Total Direct Premiums

Earned Total Direct Losses

Incurred Total Accident and

Earned Total Accident and

Health Direct Losses Incurred

this office

Health Direct Premiums

Total Assets Total Liabilities

(4/23, 30, 5/7)

23280

01	uie
SILAC Insurance Company In the state of Indiana	
Total Assets Total Liabilities Aggregate write-ins	995,086,143 9,426,811,525
for special surplus funds Common Capital Stock Preferred Capital Stock Aggregate Write-ins for	0 2,500,000 0
Other Than	0
Special Surplus Funds Surplus Notes Gross Paid in and	120,000,000
Contributed Surplus Unassigned Funds Total Capital and Surplus Total Liabilities, Capital	209,250,000 203,656,423 535,406,423
And Surplus	9,962,217,948
	A BUSINESS ONLY YEAR 2024
Total Life and Annuity Premiums Written Total Life and	5,288,960
Annuity Direct Losses Paid Total Accident and	6,742,595
Health Direct Premiums	1,395,051

39039

Written Total Accident and Health Direct Losses Paid 3,144,209

ABSTRACT OF STATEMENT

FOR THE YEAR ENDING DECEMBER 31, 2024

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.

this office. IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of March, A.D. 2025 (SEAL). JON GODFREAD

# sioner of Insurance STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE COMPANY'S CERTIFICATE OF AUTHORITY

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 busi-ness for the year ending December 31, 2024 conformable to the requirements of the laws of this State regarding the business of insurance and 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 afore-orid

said, NOW THEREFORE, I, JON GODFREAD, Commis-NOW THEREFORE, 1, JON GODFREAD, Commis-sioner 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 busi-ness of authorized insurance in the state according to the laws thereof, until the 30th day of April, A.D. 2026. IN TESTIMONY WHEREOF, I have hereunto set my hered end can let Piermergic this first day of March A.D. 2025 d and seal at Bismarck this first day of March, A.D., 2025

## JON GODFREAD

(4/23, 30, 5/7)

10677

ABSTRACT C	F STATEMENT
FOR THE Y	EAR ENDING
DECEMB	ER 31, 2024
o	the
The Fidelity And Deposit Co	mpany Of Maryland
In the state of Illinois	
Total Assets	248,444,067
Total Liabilities	45,108,495
for special surplus funds	0
	5,000,000
	0
	0
Special Surplus Funds	
	0
	146 842 402
	146,842,402 51,493,170
	203,335,572
Total Liabilities Capital	205,555,572
	248,444,067
rind Surprus	2.0,,007
NORTH DAKOT	A BUSINESS ONLY
FOR THE	YEAR 2024
	FOR THE Y DECEMB of The Fidelity And Deposit Co In the state of Illinois Total Assets Total Liabilities Aggregate write-ins for special surplus funds Common Capital Stock Aggregate Write-ins for Other Than Special Surplus Funds Surplus Notes Gross Paid in and Contributed Surplus Unassigned funds (surplus) Total Capital and Surplus Total Liabilities, Capital And Surplus

10	A THE TEAK 202
Total Direct Premiur	ns
Earned	1,348,006
Total Direct Losses	
Incurred	1,283,670
Total Accident and	
Health Direct Premi	ums 0
Earned	
Total Accident and	
Health Direct Losse	s 0

## STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER

OFINE 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 March, A.D. 2025 (SEAL). JON GODFREAD

STATE OF NORTH DAKOTA FFICE OF THE COMMISSION

OF INSURANCE

71420 ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2024 of the		
Sierra Health And Life Insura In the state of Nevada	nce Company, Inc.	
Total Assets Total Liabilities Aggregate write-ins	6,995,982,163 3,712,763,700	
for special surplus funds Common Capital Stock Preferred Capital Stock Aggregate Write-ins for	0 3,600,000 0	
Other Than Special Surplus Funds	0	
Surplus Notes Gross Paid in and	0	
Contributed Surplus Unassigned Funds Total Capital and Surplus Total Liabilities, Capital	632,364,614 2,647,253,849 3,283,218,463	
And Surplus	6,995,982,163	
NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2024 ACCIDENT & HEALTH		
Total Premiums Earned Total Amount Incurred	27,835,692 24,490,012	
STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER		

OFICE 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 March, A.D. 2025 (SEAL). JON GODFREAD

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 busi-ness for the year ending December 31, 2024 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

certified copy of its charter with certificate of organization in compliance with the requirements of insurance law afore-

NOW THEREFORE, I, JON GODFREAD, Comm sioner of Insurance of the State of North Dakota, pursuant to the provisions of said laws, do hereby certify that the above agents and representatives, do netery certify that the above agents and representatives, to transact its appropriated busi-ness of authorized insurance in the state according to the laws thereof, until the 30th day of April, A.D. 2026. **IN TESTIMONY WHEREOF**, I have hereunto set my hand and seal at Bismarck this first day of March, A.D., 2025 (SEA1)

ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2024

rance Compan

330,203,724 6,020,845

14,960,700

310,872,945 10,390,924 336,224,569

342,245,414

NORTH DAKOTA BUSINESS ONLY

FOR THE YEAR 2024

6,489

9,702

0

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 the office

IN TESTIMONY WHEREOF, I have hereunto set my hand

and affixed the seal of this office at Bismarck, the first day of March, A.D. 2025 (SEAL). JON GODFREAD

er of Insurance STATE OF NORTH DAKOTA FFICE OF THE COMMISSION

of the

(SEAL) JON GODFREAD

Universal Underwriters Insu

In the state of Illinois

Total Assets Total Liabilities

Aggregate write-ins

Aggregate write-ins for special surplus funds Common Capital Stock Preferred Capital Stock Aggregate Write-ins for Other Than

Special Surplus Funds

Total Direct Premium:

Earned Total Direct Losses

Total Accident and

Earned Total Accident and

Health Direct Losses

Health Direct Premiums

Contributed Surplus Unassigned funds (surplus) Total Capital and Surplus Total Liabilities, Capital

Surplus Notes Gross Paid in and

And Surplus

Incurred

this office

(4/23, 30, 5/7)

39306

In the state of Maine Total Assets Total Liabilities Aggregate write-ins for special surplus funds Common Capital Stock Aggregate Write-ins for Other Than Special Surplus Funds Surplus Notes Gross Paid in and Costributed Surplus 224,308 3,000,000 0 0 Contributed Surplus Unassigned Funds Total Capital and Surplus Total Liabilities, Capital 174.080.000 112,408,386 289,712,694 376,587,175 And Surplus NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2024 Total Life and Written Total Accident and Health Direct Losses Paid 1,535,673 A 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. tins office. IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of March, A.D. 2025 (SEAL). JON GODFREAD 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 busi-ness for the year ending December 31, 2024 conformable to the requirements of the laws of this State regarding the business of insurance and

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 afore-orid said, NOW THEREFORE, I, JON GODFREAD, Commis-Now THEREPORE, 1, JON COMPREME, commis-sioner 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 busi-ness of authorized insurance in the state according to the laws thereof until the 30th days of April A D 2026 laws thereof, until the 30th day of April, A.D. 2026. IN TESTIMONY WHEREOF, I have hereunto set my and and seal at Bismarck this first day of March, A.D., 2025

### JON GODFREAD er of Insurance

(4/23, 30, 5/7)

41181

40843 ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2024 of the Universal Underwriters Of Texas Insurance Company In the state of Illinois Total Assets Total Liabilities 11,366,303 76,821 Aggregate write-i for special surplus funds 4,500,000 Common Capital Stock Preferred Capital Stock Aggregate Write-ins for Other Than 0 Special Surplus Funds Surplus Notes Gross Paid in and 3,900,000 2,889,482 11,289,482 Contributed Surplus Unassigned funds (surplus) Total Capital and Surplus Total Liabilities, Capital 11,366,303 And Surplus NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2024 Total Direct Premiums 0 Earned Total Direct Losses Incurred 926 Total Accident and Health Direct Premiums 0 Earned Total Accident and Health Direct Losses 0 Incurred

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 the office this office. IN TESTIMONY WHEREOF, I have hereunto set my hand

and affixed the seal of this office at Bismarck, the first day of March, A.D. 2025 (SEAL). JON GODFREAD

ioner of Insurance STATE OF NORTH DAKOTA OFFICE OF THE COMMISSION

JON GODFREAD sioner of Insurance STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER

In the state of Onto Total Assets Total Liabilities Aggregate write-ins for special surplus funds Common Capital Stock Preferred Capital Stock Aggregate Write-ins for Other Than Special Surplus Funds 3,750,000 0 Special Surplus Funds Surplus Notes Gross Paid in and Contributed Surplus Unassigned funds (surplus) Total Capital and Surplus Total Liabilities, Capital 18.000.000 533,464,582 555,214,582 700,401,698 And Surplus NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2024 Total Direct Premium 135,862 Earned Total Direct Losses 39,713 Incurred Total Accident and Health Direct Premiums Earned Total Accident and 0 Health Direct Losses Incurred

68985

ABSTRACT OF STATEMENT

151,770,40 86,874,481

FOR THE YEAR ENDING DECEMBER 31, 2024 of the Starmount Life Insurance Company

In the state of Maine

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 March, A.D. 2025 (SEAL). JON GODFREAD

March, A.D. 2025 (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 sworm statement exhibiting its condition and busi-ness for the year ending December 31, 2024 conformable to the requirements of the laws of this State regarding the business of insurance and

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 afore-

NOW THEREFORE, I, JON GODFREAD, Commis-NOW THEREFORE, I, JON GODFREAD, Commis-sioner 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 busi-ness of authorized insurance in the state according to the laws thereof, until the 30th day of April, A.D. 2026. IN TESTIMONY WHEREOF, I have hereunto set my hand and seal at Bismarck this first day of March, A.D., 2025 (SEAL) JON GODFREAD

ner of Insurance

(4/23, 30, 5/7)

## 67601 ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2024

0	i the
Unum Insurance Company In the state of Maine	
Total Assets Total Liabilities Aggregate write-ins	165,605,040 91,150,319
for special surplus funds Common Capital Stock Preferred Capital Stock	0 2,500,000 0
Aggregate Write-ins for Other Than	0
Special Surplus Funds Surplus Notes Gross Paid in and	0
Contributed Surplus Unassigned Funds Total Capital and Surplus Total Liabilities, Capital	48,800,000 23,154,721 74,454,721
And Surplus	165,605,040
NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2024	
Total Life and	

Annuity Premiums Written 1,064 Total Life and Annuity Direct Losses Paid 0 Total Accident and Health Direct Premiums 1.713.959

Total Accident and Health Direct Losses Paid 206,494

COMPANY'S CERTIFICATE OF

office a sword state of counter exhibiting its condition and busi-ness for the year ending December 31, 2024 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 complicate with the requirements of insurance laws form

in compliance with the requirements of insurance law afore-NOW THEREFORE I JON CODEREAD Commit

sioner 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

206,494 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 March, A.D. 2025 (SEAL).

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 busi-ness for the year ending December 31, 2024 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

certified copy of its charter with certificate of organization in compliance with the requirements of insurance law afore-

NOW THEREFORE, I, JON GODFREAD, Commis sioner of Insurance of the State of North Dakota, pursuant to the provisions of said laws, do hereby certify that the above agents and representatives, to hereby certify that the above named company is fully empowered through its authorized agents and representatives, to transact its appropriated busi-ness of authorized insurance in the state according to the laws thereof, until the 30th day of April, A.D. 2026. **IN TESTIMONY WHEREOF**, I have hereunto set my hand and seal at Bismarck this first day of March, A.D., 2025 (SEA1) (SEAL) JON GODFREAD

of Insurance

(4/23, 30, 5/7)

### ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2024 of the Unum Life Insurance Company Of America In the state of Maine Total Assets Total Liabilities 24,192,101,369 22,698,540,706 Aggregate write-ins Aggregate Write-ins for special surplus funds Common Capital Stock Preferred Capital Stock Aggregate Write-ins for Other Than Special Surplus Funds Surplus Notes Gross Paid in and Contributed Surplus 25,853,4665,000,00012,176,135 0 1,097,211,213 353,319,848 1,493,560,662 Contributed Surplus Unassigned Funds Total Capital and Surplu Total Liabilities, Capital 24,192,101,368 And Surplus

## NORTH DAKOTA BUSINESS ONLY

NORTH DIRECTIVE DOBITEDS OF	
FOR THE YEAR 2024	
Total Life and	
Annuity Premiums Written	10,372,808
Total Life and	
Annuity Direct Losses Paid Total Accident and	4,725,348
Health Direct Premiums	12,367,454
Written	12,307,434
Total Accident and	
Health Direct Losses Paid	6.322.353
	0,0 ==,0 0 0

## 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 March, A.D. 2025 (SEAL). JON GODFREAD

## isioner of Insurance STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE

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 busi-ness for the year ending December 31, 2024 conformable

ness for the year ending December 31, 2024 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 afore-

NOW THEREFORE, I. JON GODFREAD, Commis sioner 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 busi-ness of authorized insurance in the state according to the In the state according to the laws there of, until the 30th day of April, A.D. 2026. IN TESTIMONY WHEREOF, I have hereunto set my hand and seal at Bismarck this first day of March, A.D., 2025 (SEAL)

## JON GODFREAD

er of Insurance

(4/23, 30, 5/7)

ioner of Insurance STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONI OF INSURANCE

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 busi-ness for the year ending December 31, 2024 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 cony of its charter with certificate of organization

certified copy of its charter with certificate of organization in compliance with the requirements of insurance law afore-

sioner of Insurance of the State of North Dakota, pursuant to the provisions of said laws, do hereby certify that the above 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 busi-ness of authorized insurance in the state according to the laws thereof, until the 30th day of April, A.D. 2026. **IN TESTIMONY WHEREOF**, I have hereunto set my hand and seal at Bismarck this first day of March, A.D., 2025 (SEAL) JON GODFREAD

ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2024

62235

(4/23, 30, 5/7)

NOW THEREFORE, I, JON GODFREAD, Commis

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 busi-ness for the year ending December 31, 2024 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 conv of its charter with certificate of organization certified copy of its charter with certificate of organization in compliance with the requirements of insurance law afore-

NOW THEREFORE, I, JON GODFREAD, Commis sioner of Insurance of the State of North Dakota, pursuant to the provisions of said laws, do hereby certify that the above agents and representatives, to hereby certify that the above agents and representatives, to transact its appropriated busi-ness of authorized insurance in the state according to the laws thereof, until the 30th day of April, A.D. 2026. **IN TESTIMONY WHEREOF**, I have hereunto set my hand and seal at Bismarck this first day of March, A.D., 2025 (SEAL) JON GODFREAD

ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2024

of the

498,904,583 151,017,549

2,500,000

38,462,582 306,924,452 347,887,034

498,904,583

0

NORTH DAKOTA BUSINESS ONLY

FOR THE YEAR 2024 ACCIDENT & HEALTH

Total Premiums Earned4,298,939Total Amount Incurred2,756,226

Vision Service Plan Insurance Company

(4/23, 30, 5/7)

In the state of Ohio

Aggregate write-ins

Funds Surplus Notes Gross Paid in and

And Surplus

Aggregate write-ins for special surplus funds Common Capital Stock Preferred Capital Stock Aggregate Write-ins for Other Than Special Surplus

Contributed Surplus Unassigned Funds Total Capital and Surplus Total Liabilities, Capital

Total Assets Total Liabilities

13137

## OF INSURANCE

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 busi-ness for the year ending December 31, 2024 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 conv of its charter with certificate of organization

certified copy of its charter with certificate of organization in compliance with the requirements of insurance law afore-

NOW THEREFORE, I, JON GODFREAD, Commis sioner of Insurance of the State of North Dakota, pursuant to the provisions of said laws, do hereby certify that the above agents and representatives, do netery certify that the above agents and representatives, to transact its appropriated busi-ness of authorized insurance in the state according to the laws thereof, until the 30th day of April, A.D. 2026. **IN TESTIMONY WHEREOF**, I have hereunto set my hand and seal at Bismarck this first day of March, A.D., 2025 (SEA1) (SEAL) JON GODFREAD r of Insurance

ABSTRACT OF STATEMENT FOR THE YEAR ENDING

**DECEMBER 31, 2024** 

of the

0

NORTH DAKOTA BUSINESS ONLY

FOR THE YEAR 2024

30,375,715,491 24,541,183,850

3,993,000 5,000,000

4,393,615,052 1,431,923,589 5,834,531,641

30.375.715.491

24,185,721

Zurich American Insurance Company

In the state of New York

for special surplus funds Common Capital Stock Preferred Capital Stock Aggregate Write-ins for Other Than

Special Surplus Funds Surplus Notes Gross Paid in and

Total Direct Premiums

Earned Total Direct Losses

And Surplus

Contributed Surplus Unassigned funds (surplus) Total Capital and Surplus Total Liabilities, Capital

Total Assets Total Liabilities

Aggregate write-ins

(4/23, 30, 5/7)

39616

AUTHORITY WHEREAS, the above corporation duly organized under the laws of its state or country of domicile, has filed in this

27855

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 busi-ness for the year ending December 31, 2024 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

certified copy of its charter with certificate of organization in compliance with the requirements of insurance law afore-

NOW THEREFORE, I, JON GODFREAD, Commi sioner of Insurance of the State of North Dakota, pursuant to the provisions of said laws, do hereby certify that the above agents and representatives, to hereby certify that the above agents and representatives, to transact its appropriated busi-ness of authorized insurance in the state according to the laws thereof, until the 30th day of April, A.D. 2026. **IN TESTIMONY WHEREOF**, I have hereunto set my hand and seal at Bismarck this first day of March, A.D., 2025 (CEA1) (SEAL) JON GODFREAD

ABSTRACT OF STATEMENT FOR THE YEAR ENDING

**DECEMBER 31, 2024** 

of the Zurich American Insurance Company Of Illinois

55,553,681 21,254,632

5,000,000

28,295,295 1,003,754 34,299,049

55,553,681

280.856

82.686

0

0

0

NORTH DAKOTA BUSINESS ONLY

FOR THE YEAR 2024

r of Insurance

In the state of Illinois

Total Assets Total Liabilities

And Surplus

Aggregate write-ins

Aggregate write-ins for special surplus funds Common Capital Stock Preferred Capital Stock Aggregate Write-ins for Other Than Special Surplus Funds Surplus Notes Gross Paid in and Contributed Surplus

Contributed Surplus Unassigned funds (surplus) Total Capital and Surplus Total Liabilities, Capital

Total Direct Premiums

Earned Total Direct Losses

Incurred Total Accident and

Earned Fotal Accident and

Health Direct Losses

Health Direct Premiums

16535

(4/23, 30, 5/7)

agents and representatives, to transact its appropriated busi-ness of authorized insurance in the state according to the less of autority insufator in the state according to the laws thereof, until the 30th day of April, A.D. 2026. IN TESTIMONY WHEREOF. I have hereunto set my hand and seal at Bismarck this first day of March, A.D., 2025 (SEAL) JON GODFREAD (4/23, 30, 5/7) ABSTRACT OF STATEMENT FOR THE YEAR ENDING

90552

<b>DECEMBER 31, 2024</b>	
of	fthe
Zurich American Life Insura	nce Company
In the state of Illinois	
Total Assets	17,780,599,641
Total Liabilities	17,628,995,953
Aggregate write-ins	
for special surplus funds	8,660,760
Common Capital Stock	2,500,000
Preferred Capital Stock	0
Aggregate Write-ins for	
Other Than	0
Special Surplus Funds	
Surplus Notes	0
Gross Paid in and	
Contributed Surplus	980,969,385
Unassigned Funds	840,526,457
Total Capital and Surplus	1,832,656,602
Total Liabilities, Capital	
And Surplus	19,461,652,555
NODTH DAVOT	A DUCINECS ON

### NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2024

Total Life and Annuity Premiums Written 885,043 Total Life and Annuity Direct Losses Paid 4,088,878 Total Accident and Health Direct Premiums 6.293 Written Total Accident and Health Direct Losses Paid 0

## 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 March, A.D. 2025 (SEAL). JON GODFREAD

## Commissioner of Insurance STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER

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 the laws of its state or country of domicile, has filed in this office a sworn statement exhibiting its condition and busi-ness for the year ending December 31, 2024 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 afore-

NOW THEREFORE, I, JON GODFREAD, Commi sioner of Insurance of the State of North Dakota, pursuant to the provisions of said laws, do hereby certify that the above and company is fully empowered through its autorized agents and representatives, to transact its appropriated busi-ness of authorized insurance in the state according to the laws thereof, until the 30th day of April, A.D. 2026. IN TESTIMONY WHEREOF, I have hereunto set my hand and seal at Bismarck this first day of March, A.D., 2025 (CEA1) (SEAL) JON GODFREAD

ner of Insurance

## 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

# and attixed the seal of this office at Bismarck, the fir March, A.D. 2025 (SEAL). JON GODFREAD Commissioner of Insurance STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE

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

the laws of its state or country of domicile, has filed in this office a sworn statement exhibiting its condition and busi-ness for the year ending December 31, 2024 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 afore-eaid

NOW THEREFORE, I. JON GODFREAD, Commis sioner 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 busi-ness of authorized insurance in the state according to the I and the second method in the state according to the laws thereof, until the 30th day of April, A.D. 2026.
IN TESTIMONY WHEREOF, I have hereunto set my hand and seal at Bismarck this first day of March, A.D., 2025 (SEAL) JON GODFREAD

## er of Insurance

(4/23, 30, 5/7)

ner of Insurance

(4/23, 30, 5/7)

of the Viking Insurance Company Of Wisconsin In the state of Wisconsin Total Assets Total Liabilities 252,563,970 40,055,126 Aggregate write-ins Aggregate write-ins for special surplus funds Common Capital Stock Preferred Capital Stock Aggregate Write-ins for Other Than Special Surplus Funds Surplus Notes Gross Paid in and Contributed Surplus 3,000,000 179,336,765 30,172,080 212,508,845 Contributed Surplus Unassigned funds (surplus) Total Capital and Surplus Total Liabilities, Capital And Surplus 252,563,971 NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2024 Total Direct Premiums 355,346 Earned Total Direct Losses

180,508 Incurred Total Accident and Health Direct Premiums 0 Earned Total Accident and Health Direct Losses

> 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 IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of March, A.D. 2025 (SEAL). JON GODFREAD

# 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 gruen statement as whiting its condition and buei

the laws of its state or country of domicne, has filed in this office a sworn statement exhibiting its condition and busi-ness for the year ending December 31, 2024 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 afore-

said, NOW THEREFORE, I, JON GODFREAD, Commis-sioner of Insurance of the State of North Dakota, pursuant to the provisions of said laws, do hereby certify that the above agents and representatives, do hereby certuly that the above named company is fully empowered through its authorized agents and representatives, to transact its appropriated busi-ness of authorized insurance in the state according to the laws thereof, until the 30th day of April, A.D. 2026. **IN TESTIMONY WHEREOF**, I have hereunto set my hand and seal at Bismarck this first day of March, A.D., 2025 (CEA1) (SEAL) JON GODFREAD

March, A.D. 2025 (SEAL). JON GODFREAD r of Insurance AUTHORITY

to the requirements of the laws of this State regarding the usiness of insurance and

somer 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 busiess of authorized insurance in the state according to the laws thereof, until the 30th day of April, A.D. 2026. IN TESTIMONY WHEREOF. I have hereunto set my

seal at Bismarck this first day of March, A.D., 2025 (SEAL) JON GODFREAD

oner of Insurance

(4/23, 30, 5/7)

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 the office Abstract of Statement, as Similar In TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of 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 busi-ness for the year ending December 31, 2024 conformable

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 afore-

NOW THEREFORE, I, JON GODFREAD, Commis-

4,170,182 ncurred Total Accident and Health Direct Premiums Earned Total Accident and Health Direct Losses 0 Incurred STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER 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 March, A.D. 2025 (SEAL). JON GODFREAD

(SEAL)

JON GODFREAD

(4/23, 30, 5/7)

ner of Insurance

sioner of Insurance STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER

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 the laws of its state or country of domicile, has filed in this office a sworn statement exhibiting its condition and busi-ness for the year ending December 31, 2024 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 afore-NOW THEREFORE, I, JON GODFREAD, Commis

sioner of Insurance of the State of North Dakota, pursuant to the provisions of said laws, do hereby certify that the above

agents and representatives, do hereby certury that the above named company is fully empowered through its authorized agents and representatives, to transact its appropriated busi-ness of authorized insurance in the state according to the laws thereof, until the 30th day of April, A.D. 2026. **IN TESTIMONY WHEREOF**, I have hereunto set my hand and seal at Bismarck this first day of March, A.D., 2025 (SEA1)