

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

2658

NAIC Group Code

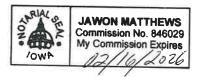
ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2023 OF THE CONDITION AND AFFAIRS OF THE

AEL Re Vermont II, Inc

NAIC Company Code 17553 Employer's ID Number 93-3948200

Organized under the	Laws of	(Current) (Prior) Vermont	, Sta	te of Domicile or Port of Entry		VT	
Country of Domicile	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		United States of A	America			
Licensed as busines	s type:	Life, Accide	ent and Health [X] Frat	ernal Benefit Societies []			-
Incorporated/Organia	zed	10/19/2023	<u>-</u>	Commenced Business	1	10/19/2023	
Statutory Home Office	ce	6000 Westown Parkway			s Moines, IA, US 5		
	0.55	(Street and Number)			n, State, Country a	ina Zip Coae)	
Main Administrative	Office		6000 Westown P (Street and Nu				
	West Des Moines	s, IA, US 50266-5921	(Olicet and Na	This city	515-221-0002		
	(City or Town, State	, Country and Zip Code)		(Area 0	Code) (Telephone I	Number)	
Mail Address		PO Box 71216			s Moines, IA, US 5		
	(Stree	t and Number or P.O. Box)		(City or Tow	n, State, Country a	ind Zip Code)	
Primary Location of	Books and Records		6000 Westown (Street and Nu				
	West Des Moines	s, IA, US 50266-5921	(Street and No		515-221-0002		
	(City or Town, State	, Country and Zip Code)		(Area	Code) (Telephone I	Number)	
Internet Website Ad	dress		https://www.americar	n-equity.com/			
Statutory Statement	Contact	Chelsea Jennifer	Fichtner		515-273-3	876	
		(Name)		(A	Area Code) (Teleph	one Number)	
		gamerican-equity.com il Address)			515-440-2715 (FAX Number)		-
	\	,					
			OFFICER	RS			
_				e President, Accounting			
	resident			& Controller Vice President		on Boushek # njeev Doss #	
30	ecretary	Andrew Taktajian #		-	38	njeev Doss #	
Sco	ott Peterson #, Treasur	er	OTHER	<u> </u>			
-			DIRECTORS OR 1	TPI ISTEES			
:	Jesse Crary #		Jeffrey Lorer		So	cott Peterson #	
State of	lowa		SS				
County of	Polk						
all of the herein des statement, together condition and affairs in accordance with rules or regulations respectively. Further	scribed assets were the with related exhibits, so of the said reporting either NAIC Annual State require differences in reguire the scope of the for formatting differences.	e absolute property of the chedules and explanations in the property as of the reporting periment Instructions and Accorn reporting not related to his attestation by the describer.	said reporting entity, fre therein contained, anne- iod stated above, and of ounting Practices and P accounting practices a bed officers also include	escribed officers of said reporting the and clear from any liens or of exed or referred to, is a full and the fits income and deductions their rocedures manual except to the and procedures, according to the steep the related corresponding element. The electronic filing may be a	claims thereon, exc rue statement of all refrom for the perion e extent that: (1) stathed the best of their in ectronic filing with the	cept as herein state the assets and like dended, and have the law may differ information, know the NAIC, when re	ated, and that this abilities and of the e been completed c; or, (2) that state ledge and belief, equired, that is an
	UHA	1_	\ \mathcal{L}		Aa	Ba	Mh
15	rey Lorenzen President		Andrew Takt Secretary	-	Vice Presi	Aaron Boushek dent, Accounting	& Controller
Subscribed and swo 16 JaWon Matthews Financial and Accou	day of	February		a. Is this an original filing? b. If no, 1. State the amendment r 2. Date filed	number	Yes [X] No	P[]



ASSETS

			Current Year		Prior Year
		1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
1.	Bonds (Schedule D)				
	Stocks (Schedule D):				
۷.	2.1 Preferred stocks				
•					
3.	Mortgage loans on real estate (Schedule B):				
	3.1 First liens				
	3.2 Other than first liens				
4.	Real estate (Schedule A):				
	4.1 Properties occupied by the company (less \$				
	encumbrances)				
	4.2 Properties held for the production of income (less				
	\$ encumbrances)				
	4.3 Properties held for sale (less \$				
	encumbrances)				
5.	Cash (\$12,586,200 , Schedule E - Part 1), cash equivalents				
٥.	(\$				
	investments (\$, Schedule DA)	20 035 807		20 035 807	
^					
	Contract loans (including \$ premium notes)				
7.	Derivatives (Schedule DB)				
8.	Other invested assets (Schedule BA)				
9.	Receivables for securities				
10.	Securities lending reinvested collateral assets (Schedule DL)				
11.	Aggregate write-ins for invested assets				
12.	Subtotals, cash and invested assets (Lines 1 to 11)	20,035,807		20,035,807	
13.	Title plants less \$ charged off (for Title insurers				
	only)				
14.	Investment income due and accrued				
15.	Premiums and considerations:				
10.	15.1 Uncollected premiums and agents' balances in the course of collection				
	15.2 Deferred premiums, agents' balances and installments booked but				
	deferred and not yet due (including \$				
	earned but unbilled premiums)				
	15.3 Accrued retrospective premiums (\$				
	contracts subject to redetermination (\$)				
16.	Reinsurance:				
	16.1 Amounts recoverable from reinsurers				
	16.2 Funds held by or deposited with reinsured companies	82,226,452		82,226,452	
	16.3 Other amounts receivable under reinsurance contracts	110,790,662		110,790,662	
17.	Amounts receivable relating to uninsured plans				
	Current federal and foreign income tax recoverable and interest thereon				
	Net deferred tax asset				
19.	Guaranty funds receivable or on deposit				
	·				
20.	Electronic data processing equipment and software				
21.	Furniture and equipment, including health care delivery assets				
	(\$)				
22.	Net adjustment in assets and liabilities due to foreign exchange rates				
23.	Receivables from parent, subsidiaries and affiliates				
24.	Health care (\$) and other amounts receivable				
25.	Aggregate write-ins for other than invested assets	934 , 185 , 129		934 , 185 , 129	
26.	Total assets excluding Separate Accounts, Segregated Accounts and				
	Protected Cell Accounts (Lines 12 to 25)	1,147,238,050			
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts				
28.	Total (Lines 26 and 27)	1,147,238,050		1,147,238,050	
	DETAILS OF WRITE-INS				
1101.					
1102.					
1102.					
1198.	Summary of remaining write-ins for Line 11 from overflow page				
1199.	Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)	***		AA. :== :::	
2501.	XOL Asset				
2502.					
2503.					
2598.	Summary of remaining write-ins for Line 25 from overflow page				
2599.	Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	934, 185, 129		934, 185, 129	

LIABILITIES, SURPLUS AND OTHER FUNDS

		1 Current Year	2 Prior Year
1.	Aggregate reserve for life contracts \$		
2	included in Line 6.3 (including \$ Modco Reserve)		
2. 3.	Aggregate reserve for accident and health contracts (including \$		
4.	Contract claims:		
	4.1 Life (Exhibit 8, Part 1, Line 4.4, Col. 1 less Col. 6)		
	4.2 Accident and health (Exhibit 8, Part 1, Line 4.4, Col. 6)		
5.	Policyholders' dividends/refunds to members \$		
6.	and unpaid (Exhibit 4, Line 10)		
0.	amounts:		
	6.1 Policyholders' dividends and refunds to members apportioned for payment (including \$		
	Modco)		
	6.2 Policyholders' dividends and refunds to members not yet apportioned (including \$		
	Amount provisionally held for deferred dividend policies not included in Line 6		
	Premiums and annuity considerations for life and accident and health contracts received in advance less		
	\$ accident and health premiums (Exhibit 1,		
	Part 1, Col. 1, sum of lines 4 and 14)		
9.	Contract liabilities not included elsewhere: 9.1 Surrender values on canceled contracts		
	9.2 Provision for experience rating refunds, including the liability of \$ accident and health		
	experience rating refunds of which \$ is for medical loss ratio rebate per the Public Health		
	Service Act		
	9.3 Other amounts payable on reinsurance, including \$ assumed and \$		
	ceded		
10	9.4 Interest maintenance reserve (IMR, Line 6)		
10.	\$		
11.	Commissions and expense allowances payable on reinsurance assumed		
12.	General expenses due or accrued (Exhibit 2, Line 12, Col. 7)		
13.	Transfers to Separate Accounts due or accrued (net) (including \$ accrued for expense		
14.	allowances recognized in reserves, net of reinsured allowances)		
	Current federal and foreign income taxes, including \$ on realized capital gains (losses)		
	Net deferred tax liability		
	Unearned investment income		
	Amounts withheld or retained by reporting entity as agent or trustee		
18. 19.	Amounts held for agents' account, including \$ agents' credit balances		
20.	Net adjustment in assets and liabilities due to foreign exchange rates		
	Liability for benefits for employees and agents if not included above		
22.	Borrowed money \$ and interest thereon \$		
	Dividends to stockholders declared and unpaid		
24.	Miscellaneous liabilities:		
	24.01 Asset valuation reserve (AVR, Line 16, Col. 7)		
	24.03 Funds held under reinsurance treaties with unauthorized and certified (\$		
	24.04 Payable to parent, subsidiaries and affiliates	306,761	
	24.05 Drafts outstanding		
	24.06 Liability for amounts held under uninsured plans		
	24.07 Funds held under coinsurance		
	24.09 Payable for securities		
	24.10 Payable for securities lending		
	24.11 Capital notes \$ and interest thereon \$		
	Aggregate write-ins for liabilities		
26. 27.	Total liabilities excluding Separate Accounts business (Lines 1 to 25)		
28.	Total liabilities (Lines 26 and 27)	1,128 443 188	
29.	Common capital stock	5.000	
30.	Preferred capital stock		
	Aggregate write-ins for other than special surplus funds		
32. 33.	Surplus notes		
	Aggregate write-ins for special surplus funds		
35.	Unassigned funds (surplus)	(935,390,267)	
	Less treasury stock, at cost:		
	36.1 shares common (value included in Line 29 \$)		
	36.2 shares preferred (value included in Line 30 \$)		
	Totals of Lines 29, 30 and 37 (Page 4, Line 55)	18,794,862	
	Totals of Lines 28 and 38 (Page 2, Line 28, Col. 3)	1,147,238,050	
	DETAILS OF WRITE-INS	, , , , ,	
	Due to Canada Life Re	934 , 185	
2502.			
2503. 2598.	Summany of remaining write-ins for Line 25 from overflow page		
2598. 2599.	Summary of remaining write-ins for Line 25 from overflow page	934 , 185	
3101.	Totals (Lines 2501 tillu 2505 pius 2596)(Line 25 above)	,	
3102.			
3103.			
	Summary of remaining write-ins for Line 31 from overflow page		
3199.	Totals (Lines 3101 thru 3103 plus 3198)(Line 31 above) XOL	004 405 400	
3401. 3402.	XUL	, ,	
3403.			
	Summary of remaining write-ins for Line 34 from overflow page		
3499.	Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	934, 185, 129	

SUMMARY OF OPERATIONS

		1	2
1.	Premiums and annuity considerations for life and accident and health contracts (Exhibit 1, Part 1, Line 20.4, Col. 1 less	Current Year	Prior Year
1.	Col. 8)	650 , 469 , 148	
2.	Considerations for supplementary contracts with life contingencies		
3. 4.	Net investment income (Exhibit of Net Investment Income, Line 17) Amortization of Interest Maintenance Reserve (IMR, Line 5)		
5.	Separate Accounts net gain from operations excluding unrealized gains or losses		
6.	Commissions and expense allowances on reinsurance ceded (Exhibit 1, Part 2, Line 26.1, Col. 1)		
7.	Reserve adjustments on reinsurance ceded		
8.	Miscellaneous Income: 8.1 Income from fees associated with investment management, administration and contract guarantees from Separate		
	Accounts		
	8.2 Charges and fees for deposit-type contracts		
_	8.3 Aggregate write-ins for miscellaneous income		
9.	Total (Lines 1 to 8.3)	655,964,957	
10. 11.	Matured endowments (excluding guaranteed annual pure endowments)		
12.	Annuity benefits (Exhibit 8, Part 2, Line 6.4, Cols. 4 + 5 minus Analysis of Operations Summary, Line 18, Col. 1)		
13.	Disability benefits and benefits under accident and health contracts		
14.	Coupons, guaranteed annual pure endowments and similar benefits		
15. 16.	Surrender benefits and withdrawals for life contracts Group conversions		
17.	Interest and adjustments on contract or deposit-type contract funds		
18.	Payments on supplementary contracts with life contingencies		
19.	Increase in aggregate reserves for life and accident and health contracts		
20.	Totals (Lines 10 to 19)	1,127,202,242	
21.	Commissions on premiums, annuity considerations, and deposit-type contract funds (direct business only) (Exhibit 1, Part 2, Line 31, Col. 1)		
22.	Commissions and expense allowances on reinsurance assumed (Exhibit 1, Part 2, Line 26.2, Col. 1)	462,911,669	
23.	General insurance expenses and fraternal expenses (Exhibit 2, Line 10, Cols. 1, 2, 3, 4 and 6)	290,527	
24. 25	Insurance taxes, licenses and fees, excluding federal income taxes (Exhibit 3, Line 7, Cols. 1 + 2 + 3 + 5)		
25. 26.	Increase in loading on deferred and uncollected premiums		
27.	Aggregate write-ins for deductions	934, 185	
28.	Totals (Lines 20 to 27)	1,591,355,224	
29.	Net gain from operations before dividends to policyholders, refunds to members and federal income taxes (Line 9 minus Line 28)	(035 300 367)	
30.	Dividends to policyholders and refunds to members	(933,390,207)	
31.	Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29		
	minus Line 30)	(935, 390, 267)	
32.	Federal and foreign income taxes incurred (excluding tax on capital gains)		
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)	(935.390.267)	
34.	Net realized capital gains (losses) (excluding gains (losses) transferred to the IMR) less capital gains tax of	, , , ,	
	\$ (excluding taxes of \$ transferred to the IMR)		
35.	Net income (Line 33 plus Line 34)	(935, 390, 267)	
36.	CAPITAL AND SURPLUS ACCOUNT Capital and surplus, December 31, prior year (Page 3, Line 38, Col. 2)		
37.	Net income (Line 35)	(935,390,267)	
38.	Change in net unrealized capital gains (losses) less capital gains tax of \$		
39.	Change in net unrealized foreign exchange capital gain (loss)		
40.	Change in net deferred income tax		
41. 42.	Change in nonadmitted assets		
43.	Change in reserve on account of change in valuation basis, (increase) or decrease		
44.	Change in asset valuation reserve		
45.	Change in treasury stock (Page 3, Lines 36.1 and 36.2, Col. 2 minus Col. 1)		
46. 47.	Surplus (contributed to) withdrawn from Separate Accounts during period		
48.	Change in surplus notes		
49.	Cumulative effect of changes in accounting principles		
50.	Capital changes:	5 000	
	50.1 Paid in		
	50.3 Transferred to surplus		
51.	Surplus adjustment:		
	51.1 Paid in		
	51.2 Transferred to capital (Stock Dividend)		
	51.3 Transferred from capital		
52.	Dividends to stockholders		
53.	Aggregate write-ins for gains and losses in surplus	934, 185, 129	
54.	Net change in capital and surplus for the year (Lines 37 through 53)	18,794,862	
55.	Capital and surplus, December 31, current year (Lines 36 + 54) (Page 3, Line 38) DETAILS OF WRITE-INS	18,794,862	
08.301	Miscellaneous Income	5 . 459 . 635	
	Summary of remaining write-ins for Line 8.3 from overflow page		
	Totals (Lines 08.301 thru 08.303 plus 08.398)(Line 8.3 above) Canada Life Re Risk Charges	5,459,635 934,185	
	Canada Life ne nisk Charges		
	Summary of remaining write-ins for Line 27 from overflow page		
	Totals (Lines 2701 thru 2703 plus 2798)(Line 27 above)	934, 185	
5301.	XOL		
5303			
5303.			

CASH FLOW

		1	2
		Current Year	Prior Year
	Cash from Operations	457, 450, 004	
1.	Premiums collected net of reinsurance		
2.	Net investment income		
3.	Miscellaneous income		
4.	Total (Lines 1 through 3)	462,947,843	
5.	Benefit and loss related payments		
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts		
7.	Commissions, expenses paid and aggregate write-ins for deductions		
8.	Dividends paid to policyholders		
9.	Federal and foreign income taxes paid (recovered) net of \$ tax on capital gains (losses)		
10.	Total (Lines 5 through 9)	464,152,982	
11.	Net cash from operations (Line 4 minus Line 10)	(1,205,139)	
	Cash from Investments		
12.	Proceeds from investments sold, matured or repaid:		
	12.1 Bonds		
	12.2 Stocks		
	12.3 Mortgage loans		
	12.4 Real estate		
	12.5 Other invested assets		
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments		
	12.7 Miscellaneous proceeds		
	12.8 Total investment proceeds (Lines 12.1 to 12.7)		
13.	Cost of investments acquired (long-term only):		
13.	13.1 Bonds		
	13.2 Stocks		
	13.3 Mortgage loans		
	13.4 Real estate		
	13.5 Other invested assets		
	13.6 Miscellaneous applications		
	13.7 Total investments acquired (Lines 13.1 to 13.6)		
14.	Net increase/(decrease) in contract loans and premium notes		
15.	Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14)		
	Cash from Financing and Miscellaneous Sources		
16.	Cash provided (applied):		
	16.1 Surplus notes, capital notes		
	16.2 Capital and paid in surplus, less treasury stock	20,000,000	
	16.3 Borrowed funds		
	16.4 Net deposits on deposit-type contracts and other insurance liabilities		
	16.5 Dividends to stockholders		
	16.6 Other cash provided (applied)	1,240,946	
17.	Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)	21,240,946	
	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)	20,035,807	
19.	Cash, cash equivalents and short-term investments (Line 11, plus Lines 13 and 17)	20,000,001	
19.	19.1 Beginning of year		
		20,035,807	
	19.2 End of year (Line 18 plus Line 19.1)	20,000,007	

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

ANALYSIS OF OPERATIONS BY LINES OF BUSINESS - SUMMARY

	<u> </u>	ANAL 1313 UF								
		1	2	3	4	5	6	7	8	9
		T. (.)	1. 30 2.1 (1.126)	0 1.16	Land Call at According	0	A	E	Other Lines of	YRT Mortality
		Total	Individual Life	Group Life	Individual Annuities	Group Annuities	Accident and Health	Fraternal	Business	Risk Only
1.	Premiums and annuity considerations for life and accident and health contracts	650,469,148			650,469,148					
2.	Considerations for supplementary contracts with life contingencies		XXX	XXX			XXX	XXX		XXX
3.	Net investment income	36,174			36,174					
4.	Amortization of Interest Maintenance Reserve (IMR)									
5.	Separate Accounts net gain from operations excluding unrealized gains or losses							XXX		
6.	Commissions and expense allowances on reinsurance ceded							XXX		
7.	Reserve adjustments on reinsurance ceded							XXX		
8.	Miscellaneous Income:									
	8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts							xxx		
	8.2 Charges and fees for deposit-type contracts						XXX	XXX		
	8.3 Aggregate write-ins for miscellaneous income	5,459,635			5,459,635					
9.	Totals (Lines 1 to 8.3)	655,964,957			655,964,957					
10.	Death benefits						XXX	XXX		
11.	Matured endowments (excluding guaranteed annual pure endowments)						XXX			
12.	Annuity benefits		XXX	XXX			XXX	XXX		XXX
13.	Disability benefits and benefits under accident and health contracts							XXX		
14.	Coupons, guaranteed annual pure endowments and similar benefits							XXX		
15.	Surrender benefits and withdrawals for life contracts				•		XXX	XXX		
16.	Group conversions							XXX		
17.	-							XXX		
	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,									
18.	Payments on supplementary contracts with life contingencies				1,127,202,242		XXX	XXX		
19.	Increase in aggregate reserves for life and accident and health contracts	1,127,202,242						XXX		
20.	Totals (Lines 10 to 19)	1, 127, 202, 242			1, 127, 202, 242			XXX		
21.										1001
	(direct business only)				400 044 000					XXX
22.	Commissions and expense allowances on reinsurance assumed				462,911,669			XXX		
23.	General insurance expenses and fraternal expenses				290,527					
24.	Insurance taxes, licenses and fees, excluding federal income taxes				16,601					
25.	Increase in loading on deferred and uncollected premiums							XXX		
26.	Net transfers to or (from) Separate Accounts net of reinsurance							XXX		
27.	Aggregate write-ins for deductions				934, 185					
28.	Totals (Lines 20 to 27)	1,591,355,224			1,591,355,224					
29.	Net gain from operations before dividends to policyholders, refunds to members and									
	federal income taxes (Line 9 minus Line 28)	(935,390,267).			(935,390,267)					
30.	Dividends to policyholders and refunds to members							XXX		
31.	before federal income taxes (Line 29 minus Line 30)	(935,390,267).			(935,390,267)					
32.	Federal income taxes incurred (excluding tax on capital gains)									
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	(005,000,007)			(005,000,005)					
	Line 32)	(935,390,267)			(935, 390, 267)					
34.	Policies/certificates in force end of year							XXX		
	DETAILS OF WRITE-INS									
	Miscellaneous Income	.,,			5,459,635					
08.303										
	Summary of remaining write-ins for Line 8.3 from overflow page									
08.399	Totals (Lines 08.301 thru 08.303 plus 08.398) (Line 8.3 above)	5,459,635			5,459,635					
2701.	Hannover Risk Charge									
2702.										
2703.										
2798.	Summary of remaining write-ins for Line 27 from overflow page									
2799.	Totals (Lines 2701 thru 2703 plus 2798) (Line 27 above)	934 . 185			934 . 185					
		55.,.00		i .	55.,100	l .	1		1	

Analysis of Operations by Lines of Business - Individual Life Insurance ${f N} \ {f O} \ {f N} \ {f E}$

Analysis of Operations by Lines of Business - Group Life Insurance ${f N} \ {f O} \ {f N} \ {f E}$

ANALYSIS OF OPERATIONS BY LINES OF BUSINESS - INDIVIDUAL ANNUITIES (a)

	ANALISIS OF OFERATIONS BY LIN	1	Deferred			6	7	
			2	3	4 Variable Annuities	5 Variable Annuities	Life Contingent Payout (Immediate	
		Total	Fixed Annuities	Indexed Annuities	with Guarantees	Without Guarantees	and Annuitizations)	Other Annuities
	Premiums for individual annuity contracts	650,469,148		650,469,148				
	Considerations for supplementary contracts with life contingencies		XXX	XXX	XXX	XXX		XXX
3.		36, 174						
4.	Amortization of Interest Maintenance Reserve (IMR)							
5.	Separate Accounts net gain from operations excluding unrealized gains or losses							
6.								
7.	The second secon							
8.	Miscellaneous Income:							
	8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts							
	8.2 Charges and fees for deposit-type contracts							
	8.3 Aggregate write-ins for miscellaneous income	5,459,635		5,459,635				
9.	Totals (Lines 1 to 8.3)	655,964,957		655,964,957				
10.	Death benefits							
11.	Matured endowments (excluding guaranteed annual pure endowments)							
	· · · · · · · · · · · · · · · · · · ·							
	Disability benefits and benefits under accident and health contracts							
	Coupons, quaranteed annual pure endowments and similar benefits							
	, , ,							
_								
	Increase in aggregate reserves for life and accident and health contracts	1,127,202,242		1,127,202,242				
	Totals (Lines 10 to 19)			1, 127, 202, 242				
21.		1, 121, 202, 242		1, 121, 202, 272				•••••
22.								•••••
23.	General insurance expenses							•••••
24.		16,601		16.601				
	3 · · · · · · · · · · · · · · · · · · ·	10,001		10,001				
	Net transfers to or (from) Separate Accounts net of reinsurance							
	Aggregate write-ins for deductions	934 . 185		934 . 185				
		,		,				
	Totals (Lines 20 to 27)	1,591,355,224		1,591,355,224				
		(935, 390, 267)		(935,390,267)				
30.	Dividends to policyholders and refunds to members	/00F 000 05F:		(00= 000 5==				
	Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30)	(935, 390, 267)		(935, 390, 267)				
	Federal income taxes incurred (excluding tax on capital gains)							
33.	Net gain from operations after dividends to policyholders, refunds to members and federal income taxes and before realized capital	(005 000 007)		(005,000,007)				
	gains or (losses) (Line 31 minus Line 32)	(935, 390, 267)		(935, 390, 267)				
34.	Policies/certificates in force end of year							
	DETAILS OF WRITE-INS							
	Miscellaneous Income	5,459,635						
	Summary of remaining write-ins for Line 8.3 from overflow page							
	Totals (Lines 08.301 thru 08.303 plus 08.398) (Line 8.3 above)	5,459,635		5,459,635				
		934 , 185		934 , 185				
2702.								
2703.								
2799.	Totals (Lines 2701 thru 2703 plus 2798) (Line 27 above)	934, 185		934, 185				
	tail blocks of business in run-off that comprise less than 5% of premiums and less than 5% of receive and loans liability are apprended with material blocks.				I .	1	I.	·

(a) Indicate if blocks of business in run-off that comprise less than 5% of premiums and less than 5% of reserve and loans liability are aggregated with material blocks of business and which which columns are affected.

Analysis of Operations by Lines of Business - Group Annuities ${f N}$ ${f O}$ ${f N}$ ${f E}$

Analysis of Operations by Lines of Business - Accident and Health **NONE**

Analysis of Increase in Reserves During the Year - Individual Life Insurance

NONE

Analysis of Increase in Reserves During the Year - Group Life Insurance ${f N}$ ${f O}$ ${f N}$ ${f E}$

ANALYSIS OF INCREASE IN RESERVES DURING THE YEAR - INDIVIDUAL ANNUITIES (a)

	1	Deferred			6	7	
		2	3	4	5	Life Contingent	
				Variable Annuities	Variable Annuities	Payout (Immediate	
	Total	Fixed Annuities	Indexed Annuities	with Guarantees	without Guarantees	and Annuitizations)	Other Annuities
Involving Life or Disability Contingencies (Reserves)							
(Net of Reinsurance Ceded)							
1. Reserve December 31 of prior year							
2. Tabular net premiums or considerations	1,190,069,836		1, 190, 069, 836				
Present value of disability claims incurred	XXX	XXX			XXX	XXX	XXX
4. Tabular interest	(62,867,594)		(62,867,594)				
5. Tabular less actual reserve released							
6. Increase in reserve on account of change in valuation basis							
7. Other increases (net)							
8. Totals (Lines 1 to 7)	1,127,202,242						
9. Tabular cost							
10. Reserves released by death	XXX	XXX	XXX	XXX	XXX	XXX	XXX
11. Reserves released by other terminations (net)							
12. Annuity, supplementary contract and disability payments involving life contingencies							
13. Net transfers to or (from) Separate Accounts							
14. Total Deductions (Lines 9 to 13)							
15. Reserve December 31 of current year	1,127,202,242		1,127,202,242				
Cash Surrender Value and Policy Loans							
16. CSV Ending balance December 31, current year							
17. Amount Available for Policy Loans Based upon Line 16 CSV							

(a) Indicate if blocks of business in run-off that comprise less than 5% of premiums and less than 5% of reserve and loans liability are aggregated with material blocks of business and which columns are affected.

ANALYSIS OF INCREASE IN RESERVES DURING THE YEAR - GROUP ANNUITIES (a)

(N/A Fraternal)

cilial					
	Def	erred		6	7
2	3	4	5	Life Contingent	
		Variable Annuities			
Fixed Annuities	Indexed Annuities	with Guarantees	without Guarantees	and Annuitizations)	Other Annuities
XXX	XXX	XXX	XXX	XXX	XXX
\					
	XXX	XXX	XXX	XXX	XXX
		Fixed Annuities Indexed Annuities XXX XXX XXX	Fixed Annuities Indexed Annuities with Guarantees XXX XXX XXX XXX XXX XXX XXX	2 3 Variable Annuities Variable Annuities with Guarantees Variable Annuities without Guarantees XXX XXX XXX XXX XXX XXX XXX	2

⁽a) Indicate if blocks of business in run-off that comprise less than 5% of premiums and less than 5% of reserve and loans liability are aggregated with material blocks of business and which columns are affected.

EXHIBIT OF NET INVESTMENT INCOME

1		1	2
		Collected During Year	
1.	U.S. Government bonds	(a)	
1.1	Bonds exempt from U.S. tax	(a)	
1.2	Other bonds (unaffiliated)	(a)	
1.3	Bonds of affiliates	(a)	
2.1	Preferred stocks (unaffiliated)	(b)	
2.11	Preferred stocks of affiliates	(b)	
2.2	Common stocks (unaffiliated)		
2.21	Common stocks of affiliates		
3.	Mortgage loans	* *	
4.	Real estate	(d)	
5	Contract loans		
6	Cash, cash equivalents and short-term investments		
7	Derivative instruments	* *	
8.	Other invested assets		
9.	Aggregate write-ins for investment income		
10.	Total gross investment income	28,213	36,174
11.	Investment expenses		
12.	Investment taxes, licenses and fees, excluding federal income taxes		
13.	Interest expense		` '
14. 15.	Depreciation on real estate and other invested assets		
16.	Total deductions (Lines 11 through 15)		
17.	Net investment income (Line 10 minus Line 16)		36, 174
17.	DETAILS OF WRITE-INS		00, 17
0901.	DETAILS OF WATE-ING		
0902.			
0903.			
0998.	Summary of remaining write-ins for Line 9 from overflow page		
0999.	Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above)		
1501.			
1502.			
1503.			
1598.	Summary of remaining write-ins for Line 15 from overflow page		
1599.	Totals (Lines 1501 thru 1503 plus 1598) (Line 15, above)		
(a) Inclu	des \$ accrual of discount less \$ amortization of premium and less \$	paid for accrued int	erest on purchases.
(b) Inclu	des \$ accrual of discount less \$ amortization of premium and less \$	paid for accrued div	vidends on purchases.
(c) Inclu	des \$ accrual of discount less \$ amortization of premium and less \$	paid for accrued int	erest on purchases.
(d) Inclu	des \$ for company's occupancy of its own buildings; and excludes \$ interest on en	cumbrances.	
(e) Inclu	des \$	paid for accrued int	erest on purchases.
(f) Includ	des \$ accrual of discount less \$ amortization of premium.		
(g) Inclu	des \$ investment expenses and \$ investment taxes, licenses and fees, excluding fe	ederal income taxes. att	ributable to
	egated and Separate Accounts.		
(h) Inclu	des \$ interest on surplus notes and \$ interest on capital notes.		

EXHIBIT OF CAPITAL GAINS (LOSSES)

(i) Includes \$ depreciation on real estate and \$ depreciation on other invested assets.

	EVUIDI I	OF CAPI	IAL GAIN	9 (F099E	.S)	
		1	2	3	4	5
				Total Realized	Change in	Change in Unrealized
		Realized Gain (Loss)	Other Realized	Capital Gain (Loss)	Unrealized	Foreign Exchange
		On Sales or Maturity	Adjustments	(Columns 1 + 2)	Capital Gain (Loss)	Capital Gain (Loss)
1.	U.S. Government bonds					
1.1	Bonds exempt from U.S. tax					
1.2	Other bonds (unaffiliated)					
1.3	Bonds of affiliates					
2.1	Preferred stocks (unaffiliated)					
2.11	Preferred stocks of affiliates					
2.2	Common stocks (unaffiliated)					
2.21	Common stocks of affiliates					
3.	Mortgage loans					
4.	Real estate					
5.	Contract loans					
6.	Cash, cash equivalents and short-term investmen					
7.	Derivative instruments					
8.	Other invested assets					
9.	Aggregate write-ins for capital gains (losses)					
10.	Total capital gains (losses)					
	DETAILS OF WRITE-INS					
0901.						
0902.						
0903.						
0998.	Summary of remaining write-ins for Line 9 from					
	overflow page					
0999.	Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above)					

EXHIBIT - 1 PART 1 - PREMIUMS AND ANNUITY CONSIDERATIONS FOR LIFE AND ACCIDENT AND HEALTH CONTRACTS

	EXHIBIT - 1 PART 1 - PREMIUMS AND AN	1		3	AND ACCIDE		LIII CONTIN	7	8
		1	2	3	Individual	5	б	1	Other Lines of
		Total	Individual Life	Group Life	Annuities	Group Annuities	Accident & Health	Fraternal	Business
	FIRST YEAR (other than single)					•			
1.	Uncollected								
2.									
3.	Deferred , accrued and uncollected:								1
	3.1 Direct								
	3.2 Reinsurance assumed								
	3.3 Reinsurance ceded								
	3.4 Net (Line 1 + Line 2)								
4.	Advance								
5.	Line 3.4 - Line 4								
6.	Collected during year:								1
	6.1 Direct								
	6.2 Reinsurance assumed	650, 469, 148			650,469,148				
	6.3 Reinsurance ceded								
	6.4 Net	650,469,148			650,469,148				
7.	Line 5 + Line 6.4	650,469,148			650,469,148				
	Prior year (uncollected + deferred and accrued - advance)								
9.	First year premiums and considerations:			1			1	1	i '
	9.1 Direct								
	9.2 Reinsurance assumed	650, 469, 148			650,469,148				ļ'
	9.3 Reinsurance ceded								
	9.4 Net (Line 7 - Line 8)	650,469,148			650,469,148				
	SINGLE								1
10.	Single premiums and considerations:								1
	10.1 Direct								
	10.2 Reinsurance assumed								
	10.3 Reinsurance ceded								
	10.4 Net								
	RENEWAL								1
	Uncollected								ļ'
	Deferred and accrued								ļ'
13.	Deferred, accrued and uncollected:								1
	13.1 Direct								
	13.2 Reinsurance assumed								
	13.3 Reinsurance ceded								
	13.4 Net (Line 11 + Line 12)								
	Advance								ļ
	Line 13.4 - Line 14								
16.	Collected during year:			1			1	1	İ
	16.1 Direct								
	16.2 Reinsurance assumed								
	16.3 Reinsurance ceded								
	16.4 Net								
17.	Line 15 + Line 16.4								
18.	Prior year (uncollected + deferred and accrued - advance)								
19.	Renewal premiums and considerations:								1
	19.1 Direct								
	19.2 Reinsurance assumed			ļ			ļ		
	19.3 Reinsurance ceded								
	19.4 Net (Line 17 - Line 18)			1			1	1	
	TOTAL			1			1	1	İ
20.	Total premiums and annuity considerations:								İ
	20.1 Direct								
	20.2 Reinsurance assumed	650,469,148			650,469,148				
	20.3 Reinsurance ceded								
	20.4 Net (Lines 9.4 + 10.4 + 19.4)	650,469,148			650,469,148				i .

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ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AEL RE VERMONT II, INC

EXHIBIT - 1 PART 2 - POLICYHOLDERS' DIVIDENDS, REFUNDS TO MEMBERS AND COUPONS APPLIED, REINSURANCE COMMISSIONS AND EXPENSE ALLOWANCES AND COMMISSIONS INCURRED (Direct Business Only)

EXPENSE ALLOWA	ANCES AND CO		HICOKIKED	(Direct Dusii	iess Offig)			
	1	2	3	4 Individual	5	6	7	8 Other Lines of
	Total	Individual Life	Group Life	Annuities	Group Annuities	Accident & Health	Fraternal	Business
POLICYHOLDERS' DIVIDENDS, REFUNDS TO MEMBERS AND COUPONS APPLIED (included in Part 1)								
21. To pay renewal premiums								
22. All other								
REINSURANCE COMMISSIONS AND EXPENSE ALLOWANCES INCURRED								
23. First year (other than single):								
23.1 Reinsurance ceded								
23.2 Reinsurance assumed								
23.3 Net ceded less assumed								
24. Single:								
24.1 Reinsurance ceded								
24.2 Reinsurance assumed	462,911,669							
24.3 Net ceded less assumed	(462,911,669)			(462,911,669)				
25. Renewal:								
25.1 Reinsurance ceded								
25.2 Reinsurance assumed								
25.3 Net ceded less assumed								
26. Totals:								
26.1 Reinsurance ceded (Page 6, Line 6)								
26.2 Reinsurance assumed (Page 6, Line 22)				462,911,669				
26.3 Net ceded less assumed	(462,911,669)			(462,911,669)				
COMMISSIONS INCURRED (direct business only)								
27. First year (other than single)								
28. Single								
29. Renewal								
30. Deposit-type contract funds								
31. Totals (to agree with Page 6, Line 21)								

EXHIBIT 2 - GENERAL EXPENSES

			Insur			5	6	7
		1	Accident a	nd Health	4			
		Life	2 Cost Containment	3 All Other	All Other Lines of Business	Investment	Fraternal	Total
1.	Rent			All Other		investment		Total
2.	The state of the s							
	Salaries and wages							35
	Contributions for benefit plans for employees							
3.12	Contributions for benefit plans for agents							
3.21	Payments to employees under non-funded benefit							
	plans							
3.22	Payments to agents under non-funded benefit							
	plans							
3.31	Other employee welfare							
	Other agent welfare							
		7,673						7
4.2	Medical examination fees							
4.3	Inspection report fees							
	Fees of public accountants and consulting							
4.4								
4 5								• • • • • • • • • • • • • • • • • • • •
4.5	Expense of investigation and settlement of policy							
								• • • • • • • • • • • • • • • • • • • •
5.1	Traveling expenses							
5.2	Advertising							
5.3	Postage, express, telegraph and telephone							
5.4								
	_ , , , , , , , , , , , , , , , , , , ,			•••••				
5.6	Rental of equipment							
5.7	Cost or depreciation of EDP equipment and							
٠	software							
6.1	Books and periodicals							
6.2	Bureau and association fees							
6.3	Insurance, except on real estate							
6.4	Miscellaneous losses							
	Collection and bank service charges							
6.6	Sundry general expenses							
6.7	Group service and administration fees	246,572						246
6.8	Reimbursements by uninsured plans							
7.1	Agency expense allowance							
1.2	Agents' balances charged off (less \$							
	\$recovered)							
7.3	Agency conferences other than local meetings							
	Official publication (Fraternal Benefit Societies							
0.1	Only)	YYY	VVV	VVV	xxx	xxx		
0 2	Expense of supreme lodge meetings (Fraternal	۸۸۸						• • • • • • • • • • • • • • • • • • • •
0.2		VVV	VVV	VVV	VVV	VVV		
	Benefit Societies Only)							
9.1	Real estate expenses							
9.2	Investment expenses not included elsewhere							
9.3	Aggregate write-ins for expenses							
10.	General expenses incurred	200 527			+		(h)	(a) 00/
							(b)	(a)290
11.								
12.	General expenses unpaid Dec. 31, current year							
13.	Amounts receivable relating to uninsured plans.	***		****	1		1	1
	prior year							
14.	Amounts receivable relating to uninsured plans,							
14.								
4-	current year							
15.	General expenses paid during year (Lines 10+11-	000 507						000
	12-13+14)	290,527						290
	DETAILS OF WRITE-INS				İ			
301.								
302.								
303.								
398.	Summary of remaining write-ins for Line 9.3 from				İ			
	overflow page							
	Totals (Lines 09.301 thru 09.303 plus 09.398)							
399.	(Line 9.3 above)				İ			
399.					I .	I	1	ı
		40 - CH-1	and f					
nclude	es management fees of \$			to	non-affiliates.			
nclud		es (Fraternal Bene	efit Societies Only):					

EXHIBIT 3 - TAXES, LICENSES AND FEES (EXCLUDING FEDERAL INCOME TAXES)

			Insurance		4	5	6
		1	2 Accident and	3 All Other Lines		.	Ŧ
		Life	Health	of Business	Investment	Fraternal	Total
1.	Real estate taxes						
2.	State insurance department licenses and fees	15,000					15,000
3.	State taxes on premiums						
4.	Other state taxes, including \$						
	for employee benefits						
5.	U.S. Social Security taxes						1.601
6.	All other taxes	,					,
7.	Taxes, licenses and fees incurred	16.601					16.601
8.	Taxes, licenses and fees unpaid Dec. 31, prior year						, , , , , , , , , , , , , , , , , , , ,
9.	Taxes, licenses and fees unpaid Dec. 31, current year						
10.	Taxes, licenses and fees paid during year (Lines 7 + 8 - 9)	16.601					16.601

EXHIBIT 4 - DIVIDENDS OR REFUNDS

		1	2
		Life	Accident and Health
1.	Applied to pay renewal premiums		
2.	Applied to shorten the endowment or premium-paying period		
3.	Applied to provide paid-up additions		
4.	Applied to provide paid-up annuities		
5.	Total Lines 1 through 4		
6.	Paid in cash		
7.	Left on deposit		
8.	Aggregate write-ins for dividend or refund options		
9.	Total Lines 5 through 8		
10.	Amount due and unpaid		
11.	Provision for dividends or refunds payable in the following lendar or		
12.	Terminal dividends		
13.	Provision for deferred dividend contracts		
14.	Amount provisionally held for deferred dividend contract but it is a function Limit 3 3		
15.	Total Lines 10 through 14		
16.	Total from prior year		
17.	Total dividends or refunds (Lines 9 + 15 - 16)		
	DETAILS OF WRITE-INS		
0801.			
0802.			
0803.			
0898.	Summary of remaining write-ins for Line 8 from overflow page		
0899.	Totals (Lines 0801 thru 0803 plus 0898) (Line 8 above)		

EXHIBIT 5 - AGGREGATE RESERVE FOR LIFE CONTRACTS

1	2	3	4	5 Credit	6
				(Group and	
Valuation Standard	Total (a)	Industrial	Ordinary	Îndividual)	Group
0199998. Reinsurance ceded					
0199999. Life Insurance: Totals (Net)					
0200001. Flex Prem Def 2.95%	1,027,629,773	XXX	1,027,629,773	XXX	
0200002. Flex Prem Def 1%	99,572,469	XXX	99,572,469	XXX	
0299997. Totals (Gross)	1,127,202,242	XXX	1,127,202,242	XXX	
0299998. Reinsurance ceded		XXX		XXX	
0299999. Annuities: Totals (Net)	1,127,202,242	XXX	1,127,202,242	XXX	
0399998. Reinsurance ceded					
0399999. SCWLC: Totals (Net)					
0499998. Reinsurance ceded					
0499999. Accidental Death Benefits: Totals (Net)					
0599998. Reinsurance ceded					
0599999. Disability-Active Lives: Totals (Net)					
0699998. Reinsurance ceded					
0699999. Disability-Disabled Lives: Totals (Net)					
0799998. Reinsurance ceded					
0799999. Miscellaneous Reserves: Totals (Net)					
(***)					

				•••••	
0000000 T-t-t- (Nt-t) D 0 Line 4	4 407 000 040		4 407 000 040		
9999999. Totals (Net) - Page 3, Line 1 i) Included in the above table are amounts of deposit-type co	1,127,202,242		1,127,202,242		

a) Included in the above table are amo	ounts of deposit-type contracts that originally of	contained a mortality risk. Amounts of deposit-type contr	acts in Column 2 that no longer contain
	a mortality risk are Life Insurance \$; Annuities \$; Supplementary Contracts with Life Co	ontingencies \$;
	Accidental Death Benefits \$; Disability - Active Lives \$; Disability - Disabled Lives \$	·····;
	Miscellaneous Reserves \$			

EXHIBIT 5 - INTERROGATORIES

1.1	Has the reporting entity ever issued both participating and non-participating contracts?	Yes []	No [X]	
1.2	If not, state which kind is issued. Non-Participating	-			
2.1	Does the reporting entity at present issue both participating and non-participating contracts?	Yes [1	No [X]	
2.2	If not, state which kind is issued.		•		
	Non-Participating				
3.	Does the reporting entity at present issue or have in force contracts that contain non-guaranteed elements?	Yes [1	No [X]	
	If so, attach a statement that contains the determination procedures, answers to the interrogatories and an actuarial opinion as described in the instructions.	-			
4.	Has the reporting entity any assessment or stipulated premium contracts in force?	Yes []	No [X]	
	If so, state:				
	4.1 Amount of insurance?\$				
	4.2 Amount of reserve?\$				
	4.3 Basis of reserve:				
	4.4 Basis of regular assessments:				
	4.5 Basis of special assessments:				
	4.6 Assessments collected during the year \$				
5.	If the contract loan interest rate guaranteed in any one or more of its currently issued contracts is less than 5%, not in advance, state the				••
J.	contract loan rate guarantees on any such contracts.				
6.	Does the reporting entity hold reserves for any annuity contracts that are less than the reserves that would be held on a standard basis?	Yes [•		
	6.1 If so, state the amount of reserve on such contracts on the basis actually held:				
	6.2 That would have been held (on an exact or approximate basis) using the actual ages of the annuitants; the interest rate(s) used in 6.1; and the same mortality basis used by the reporting entity for the valuation of comparable annuity benefits issued to standard lives. If the reporting entity has no comparable annuity benefits for standard lives to be valued, the mortality basis shall be the table most recently approved by the state of domicile for valuing individual annuity benefits: \$\text{\$\text{\$\text{\$}}\$}\$				
	Attach statement of methods employed in their valuation.				
7.	Does the reporting entity have any Synthetic GIC contracts or agreements in effect as of December 31 of the current year?				
	7.1 If yes, state the total dollar amount of assets covered by these contracts or agreements\$				
	7.2 Specify the basis (fair value, amortized cost, etc.) for determining the amount:				
	7.3 State the amount of reserves established for this business: \$				
	7.4 Identify where the reserves are reported in the blank:				
8.	Does the reporting entity have any Contingent Deferred Annuity contracts or agreements in effect as of December 31 of the current year?]	No [X]	
	8.1 If yes, state the total dollar amount of account value covered by these contracts or agreements:\$				
	8.2 State the amount of reserves established for this business: \$				
	8.3 Identify where the reserves are reported in the blank:				
9.	Does the reporting entity have any Guaranteed Lifetime Income Benefit contracts, agreements or riders in effect as of December 31 of the		V 1	N. f. 1	
	current year?	res [λJ	NO []	
	9.1 If yes, state the total dollar amount of any account value associated with these contracts, agreements or riders: \$ 9.2 State the amount of reserves established for this business: \$ \$\$				
			I ,	121,202,2	+2
	9.3 Identify where the reserves are reported in the blank:				
_,	CHIDIT EA CHANGEO IN DAGES OF MALHATION BURNIO	T	\ \		
	(HIBIT 5A - CHANGES IN BASES OF VALUATION DURING)	IHE	<u> Y</u>		Ĺ
	1 Valuation Basis			4	

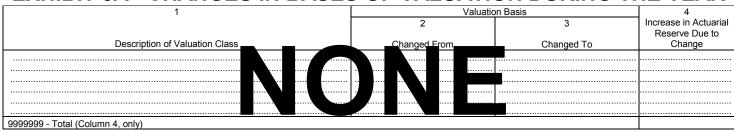


Exhibit 6 - Aggregate Reserves for Accident and Health Contracts

NONE

Exhibit 7 - Deposit-Type Contracts **NONE**

Exhibit 8 - Contract Claims - Part 1 - Liability End of Current Year **NONE**

Exhibit 8 - Contract Claims - Part 2 - Incurred During the Year **NONE**

Exhibit of Nonadmitted Assets **NONE**

NOTE 1 Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

The Financial Statements of the Company are presented on the basis of accounting practices prescribed or permitted by the Vermont Department of Financial Regulation, Insurance Division (the "Insurance Division").

The Insurance Division recognizes only statutory accounting practices prescribed or permitted by the State of Vermont for determining and reporting the financial condition and results of operations of an insurance company and for determining its solvency under Vermont 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 Insurance Division. The Company differs from NAIC SAP under Vermont Statute, Title 8, Chapter 141 – Subchapter 4 (8 V.S.A. § 6048d) Special Purpose Financial Companies, a permitted practice issued by the Insurance Division. Under this permitted practice, is it deemed allowable that the Company treat excess of loss ("XOL") treaty as an admitted asset on its statutory financials which is otherwise disallowed by NAIC SAP.

	SSAP#	F/S Page	F/S Line #		2023		2022	
NET INCOME (1) State basis (Page 4, Line 35, Columns 1 & 2)	XXX	XXX	XXX	\$	(935,390,267)	\$		-
(2) State Prescribed Practices that are an increase/ (decrease) from NAIC SAP: NONE								
(3) State Permitted Practices that are an increase/(decrease) from NAIC SAP: NONE								
	VVV	Y	VVV	Φ.	(005,000,007)	.		
(4) NAIC SAP (1-2-3=4) SURPLUS	XXX	XXX	XXX	\$	(935,390,267)	\$		-
(5) State basis (Page 3, Line 38, Columns 1 & 2)	XXX	XXX	XXX	\$	18,794,862	\$		-
(6) State Prescribed Practices that are an increase/(decrease NONE) from NAIC SA	AP:						
(7) State Permitted Practices that are an increase/(decrease) XOL Asset	from NAIC SAI 61R	P: 2	2501	\$	934,185,129			
(8) NAIC SAP (5-6-7=8)	xxx	XXX	XXX	\$	(915,390,267)	\$		-

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

The preparation of financial statements in conformity with Statutory Accounting Principles requires management to make certain estimates that affect the reported assets and liabilities, including reporting or disclosure of contingent assets and liabilities as of the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Future events, including changes in interest rates and asset valuations, could cause actual results to differ in the near term from the estimates used in the financial statements.

The most significant estimates include those used in determining policy reserves and federal income taxes. Although some variability is inherent in these estimates, the recorded amounts reflect management;s best estimates based on facts and circumstances as of the date of the financial statements. Management believes the amounts provided are appropriate.

C. Accounting Policy

The Company follows 8 V.S.A. § 6048d, a permitted practice issued by the Insurance Division, which allows admission of XOL assets related to assumed lifetime income benefit riders ("LIBR") policies.

The Company utilizes actuarial tables to estimate the liabilities for losses.

D. Going Concern

The Company's management has evaluated its ability to continue as a going concern and does not have any substantial doubt the entity will continue as a going concern.

NOTE 2 Accounting Changes and Corrections of Errors

The Company had no material changes in accounting principles or correction of errors to report for the year ended December 31, 2023.

NOTE 3 Business Combinations and Goodwill

A. Statutory Purchase Method

During 2023, the Company did not have any business combinations taking the form of a statutory purchase.

B. Statutory Merger

During 2023, the Company did not have any business combinations taking the form of a statutory merger.

C. Assumption Reinsurance

As of December 31, 2023, the Company did not have goodwill resulting from assumption reinsurance.

D. Impairment Loss

As of December 31,2023, the Company did not have any impaired assets related to business combinations or goodwill.

E. Subcomponents and Calculation of Adjusted Surplus and Total Admitted Goodwill

As of December 31, 2023, the Company did not have any goodwill.

NOTE 4 Discontinued Operations

The Company did not have any discontinued operations during 2023.

NOTE 5 Investments

A. Mortgage Loans, including Mezzanine Real Estate Loans

The Company did not have any mortgage loans, including mezzanine real estate loans in 2023.

B. Debt Restructuring

The Company had no debt restructuring during the twelve months ended December 31, 2023.

- C. Reverse Mortgages
 - (1) The Company does not have any areverse mortgages as of December 31, 2023.
- D. Loan-Backed Securities
 - (1) At December 31, 2023 the Company had no exposure to subprime loan-backed securities. Substantilly, all of the owned securities are in the highest rated tranche of the pool in which they are structured and are not subordinated to any other tranche.
 - a) The aggregate amount of unrealized losses:
 - 1. Less than 12 Months
 - 2. 12 Months or Longer
 - b)The aggregate related fair value of securities with unrealized losses:
 - 1. Less than 12 Months
 - 2. 12 Months or Longer
- E. Dollar Repurchase Agreements and/or Securities Lending Transactions

The Company did not have any dollar repurchase agreements or securities lending transactions in 2023.

F. Repurchase Agreements Transactions Accounted for as Secured Borrowing

The Company did not have any repurchase agreements transactions accounted for as secured borrowing in 2023.

G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing

The Company did not have any reverse repurchase agreements transactions accounted for as secured borrowing as of December 31, 2023.

H. Repurchase Agreements Transactions Accounted for as a Sale

The Company did not have any repurchase agreements transactions accounted for as a sale as of December 31,2023.

I. Reverse Repurchase Agreements Transactions Accounted for as a Sale

The Company did not have any reverse repurchase agreements transactions accounted for as a sale as of December 31, 2023.

J. Real Estate

The Company did not have any investments in real estate as of December 31, 2023.

K. Low Income Housing tax Credits (LIHTC)

The Company did not have any investments in low-icome housing tax credits as of December 31, 2023.

Restricted Assets

The Company did not hold any restricted or pledged assets as of December 31, 2023.

M. Working Capital Finance Investments

The Company did not have any working capital finance investments as of December 31, 2023.

N. Offsetting and Netting of Assets and Liabilities

The Company did not have any offsetting and netting of assets and liabilities as of December 31, 2023.

O. 5GI Securities

The Company did not have any investments in 5GI securities as of December 31, 2023.

P. Short Sales

The Company did not have unsettled and settled short sale transactions outstanding as of December 31, 2023.

Q. Prepayment Penalty and Acceleration Fees

The Company did not have prepayment penalty and acceleration fees as of December 31, 2023.

R. Reporting Entity's Share of Cash Pool by Asset Type

Asset Type	Percent Share
(1) Cash	62.8%
(2) Cash Equivalents	37.2%
(3) Short-Term Investments	
(4) Total (Must equal 100%)	100.0%

NOTE 6 Joint Ventures, Partnerships and Limited Liability Companies

- A. The Company did not have any investments in joint ventures, partnerships, or limited liability companies that exceed 10% of its admitted assets as of December 31, 2023.
- B. The Company did not recognize any impairments write down for its investments in joint ventures, partnerships, or limited liability companies as of December 31, 2023.

NOTE 7 Investment Income

A. Interest income is recognized on an accrual basis. Due and accrued income was excluded from surplus on the following bases:

The Company does not accrue income on bonds in default which are delinquent more than six months. Further, income is not accrued when collection is uncertain. Accrued income on bonds that are over 90 days past due is nonadmitted.

B. At December 31, 2023, no amounts were excluded from investment income due and accrued.

NOTE 8 Derivative Instruments

A. Derivatives under SSAP No. 86—Derivatives

The Company did not have any derivative instruments as of December 31, 2023.

NOTE 9 Income Taxes

A. The components of the net deferred tax asset/(liability) at the end of current period are as follows:

(1) Ordinary 196,431,956	(2) Capit	al	(3) (Col. 1 + 2)		(4)		(5)		(6)	(7)		(8)	(9)	
		al												
		al							l. 4 + 5)	(Col. 1 - 4)		. 2 - 5)	(Col. 7	
196,431,956		ui	Total	(Ordinary	C	apital		Total	Ordinary	Ca	apital	Tota	al
	\$	-	\$196,431,956	\$	-	\$	-	\$	-	\$196,431,956	\$	-	\$196,43	1,956
196,431,956	\$	-	\$196,431,956	\$	-	\$	-	\$	-	\$196,431,956	\$	-	\$196,43	1,956
-	\$	-	\$ -	\$	-	\$	-	\$	-	\$ -	\$	-	\$	-
-	\$	-	\$ -	\$	-	\$	-	\$	-	\$ -	\$	-	\$	-
-	\$	_	\$ -	\$	-	\$	_	\$	_	\$ -	\$	-	\$	_
-	\$	-	\$ -	\$	-	\$	-	\$	-	\$ -	\$	-	\$	-
	- - -	- \$	- \$ -	- \$ - \$ -	- \$ - \$ - \$	- \$ - \$ - \$	- \$ - \$ - \$ - \$ - \$ - \$ - \$	- s - s - s - s -	- \$ - \$ - \$ - \$ - \$ - \$	- s - s - s - s - s - s - s - s - s - s	- \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$	- \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$	- \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$	- \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$

2.

	As of	End of Current	Period		12/31/2022			Change	
	(1) Ordinary	(2) Capital	(3) (Col. 1 + 2) Total	(4) Ordinary	(5) Capital	(6) (Col. 4 + 5) Total	(7) (Col. 1 - 4) Ordinary	(8) (Col. 2 - 5) Capital	(9) (Col. 7 + 8) Total
Admission Calculation Components SSAP No. 101	Ordinary	Сарпа	Total	Ordinary	Сарпаі	iotai	Ordinary	Сарпа	iotai
(a) Federal Income Taxes Paid In Prior Years Recoverable Through Loss Carrybacks	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
(b) Adjusted Gross Deferred Tax Assets Expected To Be Realized (Excluding The Amount Of Deferred Tax Assets From 2(a) above) After Application of the Threshold Limitation. (The Lesser of 2(b)1 and 2(b)2 Below)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Adjusted Gross Deferred Tax Assets Expected to be Realized Following the Balance Sheet Date.	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold.	xxx	xxx	\$ -	xxx	xxx	\$ -	xxx	xxx	\$ -
(c) Adjusted Gross Deferred Tax Assets (Excluding The Amount Of Deferred Tax Assets From 2(a) and 2(b) above) Offset by Gross Deferred Tax Liabilities.	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
(d) Deferred Tax Assets Admitted as the result of application of SSAP No. 101. Total (2(a) + 2(b) + 2(c))	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

a. Ratio Percentage Used To Determine Recovery Period And Threshold Limitation Amount.

516.085% 0.000%

b. Amount Of Adjusted Capital And Surplus Used To Determine Recovery Period And Threshold Limitation In 2(b)2 Above.

18,794,862

3.

	As of End of 0	Current Period	12/31	/2022	Cha	ange
	(1)	(2)	(3)	(4)	(5) (Col. 1 - 3)	(6) (Col. 2 - 4)
	Ordinary Capita		Ordinary	Capital	Ordinary	Capital
Impact of Tax Planning Strategies: (a) Determination of adjusted gross deferred tax assets and net admitted deferred tax assets, by tax character as a percentage. 1. Adjusted Gross DTAs amount from Note 9A1(c)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Percentage of adjusted gross DTAs by tax character attributable to the impact of tax planning strategies Net Admitted Adjusted Gross DTAs amount from Note 9A1(e)	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%
Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of tax planning strategies	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%

b. Do the Company's tax-planning strategies include the use of reinsurance?

Yes [] No [X]

Regarding deferred tax liabilites that not recognized:

The Company has no temporary differences for which deferred tax liabilities have not been established.

- Current income taxes incurred consist of the following major components:
 - 1. Current Income Tax
 - (a) Federal
 - (b) Foreign
 - (c) Subtotal (1a+1b)
 - (d) Federal income tax on net capital gains
 - (e) Utilization of capital loss carry-forwards

 - (g) Federal and foreign income taxes incurred (1c+1d+1e+1f)
 - 2. Deferred Tax Assets:

 - (a) Ordinary:(1) Discounting of unpaid losses
 - (2) Unearned premium reserve
 - (3) Policyholder reserves
 - (4) Investments
 - (5) Deferred acquisition costs
 - (6) Policyholder dividends accrual
 - (7) Fixed assets
 - (8) Compensation and benefits accrual
 - (9) Pension accrual
 - (10) Receivables nonadmitted
 - (11) Net operating loss carry-forward
 - (12) Tax credit carry-forward
 - (13) Other
 - (99) Subtotal (sum of 2a1 through 2a13)
 (b) Statutory valuation allowance adjustment
 (c) Nonadmitted

 - (d) Admitted ordinary deferred tax assets (2a99 2b 2c)
 - (e) Capital:
 - (1) Investments
 - (2) Net capital loss carry-forward (3) Real estate
 - (4) Other
 - - (99) Subtotal (2e1+2e2+2e3+2e4)
 - (f) Statutory valuation allowance adjustment
 - (g) Nonadmitted
 - (h) Admitted capital deferred tax assets (2e99 2f 2g)
 - (i) Admitted deferred tax assets (2d + 2h)

	(1) As of End of		(2)		(3) (Col. 1 - 2)
	Current Period		12/31/2022		Change
\$	-	\$	-	\$	-
\$	-	\$	-	\$	-
\$	-	\$	-	\$	-
\$	-	\$	-	\$	-
\$	-	\$	-	\$	-
\$	-	\$	-	\$	-
\$	-	\$	-	\$	-
\$	-	\$	-	\$	-
\$	-	\$	-	\$	- 47 000 500
\$	17,209,592	\$	-	\$	17,209,592
\$	-	\$	-	\$	-
\$	-	\$	-	\$	-
\$	-	\$	-	\$	-
\$ \$	-	\$	-	\$ \$	-
\$	-		-	\$	-
\$	-	\$ \$	-	\$	-
\$	179,222,364	\$	-	\$	179,222,364
\$	179,222,304	\$	-	\$	179,222,304
\$	_	\$	-	\$	_
\$	196,431,956	\$	_	\$	196,431,956
\$	196,431,956	\$	_	\$	196,431,956
\$	190,431,930	\$	-	\$	190,431,930
\$	_	\$	_	\$	_
*		ľ		Ψ	_
\$	_	\$	_	\$	_
\$	_	\$	_	\$	_
\$	-	\$	_	\$	-
\$	_	\$	_	\$	_
\$	-	\$	-	\$	-
\$	-	\$	-	\$	-
\$	-	\$	-	\$	-
\$	-	\$	-	\$	-
\$	-	\$	-	\$	-
•		•			

3. Deferred Tax Liabilities:			
(a) Ordinary:			
(1) Investments	\$ -	\$ -	\$ -
(2) Fixed assets	\$ -	\$ -	\$ -
(3) Deferred and uncollected premium	\$ -	\$ -	\$ -
(4) Policyholder reserves	\$ -	\$ -	\$ -
(5) Other	\$ -	\$ -	\$ -
(99) Subtotal (3a1+3a2+3a3+3a4+3a5)	\$ -	\$ -	\$ -
(b) Capital:			
(1) Investments	\$ -	\$ -	\$ -
(2) Real estate	\$ -	\$ -	\$ -
(3) Other	\$ -	\$ -	\$ -
(99) Subtotal (3b1+3b2+3b3)	\$ -	\$ -	\$ -
(c) Deferred tax liabilities (3a99 + 3b99)	\$ -	\$ -	\$ -
4. Net deferred tax assets/liabilities (2i - 3c)	\$ -	\$ -	\$ -

D. Reconciliation of Federal Income Tax Rate to Actual Effective Rate

The significant items causing a difference between the statutory federal income tax rate and the Company's effective income tax rate are as follows:

	Amounts	12/31/2023 Tax Effected	Effective Tax Rate (1%)
Income Before Taxes	(935,390,268)	(196,431,956)	-21.00%
Interest Maintenance Reserve	0	0	0.00%
Dividends Received Deduction	0	0	0.00%
Return to Provision	0	0	0.00%
Change in non-admitted assets	0	0	0.00%
Deferred Revalue	0	0	0.00%
TSA Relief	0	0	0.00%
NOL Reattribution to NCNY	0	0	0.00%
Other, including prior year true-up	0	0	0.00%
Valuation Allowance	935,390,268	<u>196,431,956</u>	21.00%
Total	<u>\$</u>	\$ <u>-</u>	0.00%

E. Carryforwards, Recoverable Taxes, and IRC 6603 Deposits:

The Company has net operating carryforwards of \$1,1668,254,682 which does not expire.

Consolidated Federal Income Tax Return

The Company is included in the consolidated federal income tax return filed by the Holding Company (the "common parent") and it's other The Company computes federal income tax expense as if it were filing a separate tax return and remits amounts due to the common parent which

G. Federal or Foreign Federal Income Tax Loss Contingencies

The Company has no tax loss contingencies for which it is reasonable possible that the total liability will significantly increase within twelve months.

- H. Repatriation Transition Tax (RTT)
 The Company has no Repatriation Transition Tax.
- Alternative Minimum Tax (AMT) Credit
 The Company has no Alternative Minimum Tax (AMT) Credit

NOTE 10 Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties

- A. Please see Schedule Y, Part 2 for all reportable transactions by the Company and its affiliated insurers with other affiliates.
- B. The Company is wholly owned by American Equity Investment Life Insurance Company ("American Equity Life"), a life insurance company domiciled in the State of Iowa. American Equity Life is wholly owned by American Equity Investment Life Holding Company ("Holding Company").

Please see Schedule Y, Part 2 for all reportable transactions by the Company and its affiliated insurers with other affiliates.

The Company was capitalized by issuing 5,000 shares of \$1 par common stock on December 19, 2023 to American Equity Life in exchange for \$19,995,000 in cash. At December 31, 2023, the Company reported amounts receivable from American Equity Life of \$110,790,662 related to amounts from reinsurance treaty with Hannover Life Reassurance Company of America ("HLRA"), further discussed in Note 23.

At December 31, 2023, the Company reported amounts payable to American Equity Life of \$306,761 and the Holding Company of \$0.

The Company entered into a Management Services Agreement effective December 31, 2023 with the Holding Company. Under this agreement, the Holding Company and its affiliates agree to provide general administrative services, sales and marketing services, technical services, intellectual property and licenses, as well as insurance and product services. In exchange for providing these administrative functions, the Company reimburses the Holding Company and its affiliates for their allocated share of such costs arrived at in a fair and equitable manner. During the twelve months ended December 31, 2023 the Company incurred fees of \$246,573 in accordance with this agreement.

The Company entered into an Investment Advisory Agreement effective December 31, 2023 with the Holding Company. The Company is paying fees at an annual rate of 0.25% on amounts up to \$100,000,000 and is paying fees at an annual rate of 0.20% on the amount in excess of \$100,000,000 of the market value of invested assets. These fees are paid quarterly. In exchange for these fees, the Holding Company provides investment advice and make investment decisions based on the investment provisions of the State of Iowa. During the twelve months ended December 31, 2023 the Company incurred fees of \$0 in accordance with this agreement.

On July 4, 2023, American Equity Investment Life Holding Company entered into an Agreement and Plan of Merger (the "Agreement") with Brookfield Reinsurance Ltd. The Agreement provides that each issued and outstanding share of AEL common stock will be converted into the right to receive \$38.85 per share in cash and a number of fully-paid and nonassessable share of class A limited voting shares of Brookfield Asset Management Ltd (BAM) equal to the Exchange Ratio as defined in the Agreement. The Exchange Ratio is subject to adjustment based on the 10-day volume-weighted average share price of BAM Class A Stock with total consideration ranging between \$54.00 and \$56.50 per share. The Agreement does not provide for the payment of any consideration with respect to the issued and outstanding shares of AEL Series A and Series B preferred stock. As such, these shares will be unaffected by the Agreement and will remain outstanding.

The closing of the Agreement is subject to a number of contingencies, including (1) receipt of American Equity Investment Life Holding Company shareholder approval, (2) receipt of certain regulatory approvals, (3) the absence of any injunction or restraint making illegal or otherwise prohibiting the consummation of the merger, (4) the effectiveness of the applicable registration statement on Form F-4 to be filed by BAM, (5) listing approval of the shares of BAM Class A Stock on the New York Stock Exchange and the Toronto Stock Exchange. BAM's obligations to close the merger are also conditioned upon the absence of a Company Material Adverse Effect (as defined in the Agreement) and the absence of the imposition of a Burdensome Condition (as defined in the Agreement) by any regulator as part of the regulatory approval process. The Agreement contains Company representations and warranties and provides for pre-closing covenants, including, subject to certain exceptions, covenants relating to the conduct by the Company in the ordinary course consistent with past practice.

The closing of the merger may not occur prior to January 5, 2024, unless BAM's parent agrees otherwise. The Agreement also provides termination rights for each of the Company and BAM, including, among others, in the event the closing of the merger does not occur on or before April 4, 2024, subject to extension under certain circumstances be extended. Should the Agreement be terminated under certain circumstances, the Company may be required to pay BAM's parent a termination fee of \$102 million.

A special meeting of shareholders of American Equity Investment Life Holding Company was held on November 10, 2023 in order to vote upon the Agreement. The Agreement was approved, having received "For" votes from a majority of the votes cast by shareholders who were present and voting toghether as a single class at the special meeting.

C. Transactions with related party who are not reported on Schedule Y

Please see Schedule Y, Part 2 for all reportable transactions by the Company and its affiliated insurers with other affiliates.

- D. At December 31, 2023, the Company reported amounts payable to American Equity Life of \$306,761 and the Holding Company of \$0.
- E. Please see Schedule Y, Part 2 for all reportable transactions by the Company and its affiliated insurers with other affiliates.
- F. Please see Schedule Y, Part 2 for all reportable transactions by the Company and its affiliated insurers with other affiliates.
- G. Please see Schedule Y, Part 2 for all reportable transactions by the Company and its affiliated insurers with other affiliates.
- H. The Company did not own shares of another upstream or intermediate parent, either directly or indirectly, via a downstream SCA company.
- The Company does not own any interest in SCA entities whose carrying value is equal to or exceeds 10% of the admitted assets of the Company as of December 31, 2023.
- J. The Company did not recognize any impairment write-downs for investments in SCA entities during 2023.
- K. The Company did not own any investments in a foreign insurance subsidiary where CARVM and related Actuarial Guidelines were calculated as of December 31, 2023
- L. The Company did not own any investment in a downstream noninsurance holding companies as of December 31, 2023.
- M. All SCA Investments

The Company did not have any SCA investments, as of December 31, 2023.

N. Investment in Insurance SCAs

The Company did not report any investments in an insurance SCA for which the statutory capital and surplus reflects a departure from the NAIC statutory accounting practices and procedures during the year ended December 31, 2023.

O. SCA or SSAP 48 Entity Loss Tracking

The Company did not have any SCA investments, as of December 31, 2023.

NOTE 11 Debt

- A. The Company has no debentures outstanding or any reverse repurchase agreements.
- B. FHLB (Federal Home Loan Bank) Agreements

The Company does not have any FHLB agreements for the twelve months ended December 31, 2023.

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

As of December 31, 2023, the Company did not sponsor any retirement plans, deferred compensation, postemployment benefits and compensated absences and other postretirement plans.

NOTE 13 Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations

- A. The Company has 5,000 shares of \$1.00 per share stated par value common stock authorized, issued and outstanding, at December 31, 2023.
- B. The Company has no preferred stock.

- C. Prior approval of the Insurance Division is required for payment of dividends.
- D. The Company did not pay cash dividends during 2023.
- E. Within the limitation of (C) above, there are no restrictions placed on the portion of Company profits that may be paid as ordinary dividends to the Company's stockholder.
- F. No restrictions have been placed on the Company's unassigned surplus.
- G. The Company does not have any advances to surplus not repaid
- H. The Company held none of its stock or stock of affiliated companies for special purposes.
- The Company has not issued any surplus notes or debentures or similar obligations.
- J. The portion of unassigned funds (surplus) represented or reduced by cumulative unrealized gains and losses is \$0.
- K. The Company has not issued any surplus notes or debentures or similar obligations during 2023.
- L. The Company did not have any quasi-reorganizations during 2023.
- M. The Company did not have any quasi-reorganizations during 2023.

NOTE 14 Liabilities, Contingencies and Assessments

A. Contingent Commitments

The Company has no contingent commitments as of December 31, 2023.

B. Assessments

Assessments are from time to time, levied on the Company by life and health guaranty associations by most states in which the Company is licensed to cover losses to policyholders of insolvent or rehabilitated companies. In some states, these assessments can be partially recovered through a reduction in future premium taxes. The Company paid no assessments during 2023.

C. Gain Contingencies

The Company did not have any gain contingencies as of December 31, 2023.

D. Claims related extra contractual obligations and bad faith losses stemming from lawsuits

The Company did not pay amounts during the reporting period to settle claims related to extra contractual obligations or bad faith claims stemming from lawsuits.

E. Joint and Several Liabilities

The Company did not have any joint or several liabilities as of December 31, 2023.

F. All Other Contingencies

The Company is occasionally involved in litigation, both as a defendant and as a plaintiff. In addition, state regulatory bodies, such as state insurance departments, the Securities and Exchange Commission, the Department of Labor, and other regulatory bodies regularly make inquiries and conduct examinations or investigations concerning its compliance with, among other things, insurance laws, securities laws, and the Employee Retirement Income Security Act of 1974, as amended.

In accordance with applicable accounting guidelines, the Company will establish an accrued liability for litigation and regulatory matters when those matters present loss contingencies that are both probable and estimable. As a litigation or regulatory matter is developing, the Company, in conjunction with outside counsel, evaluates on an ongoing basis whether the matter presents a loss contingency that meets conditions indicating the need for accrual and/or disclosure. There can be no assurance that any pending or future litigation will not have a material adverse effect on its business, financial condition, or results of operations.

NOTE 15 Leases

No significant changes have occurred in disclosure from prior year end December 31, 2023.

NOTE 16 Information About Financial Instruments With Off-Balance Sheet Risk and Financial Instruments With Concentrations of Credit Risk

As of December 31, 2023, the Company had no financial instruments with off-balance sheet risk or any financial instruments with concentrations of credit risk.

NOTE 17 Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

A. Transfers of Receivables Reported as Sales

For the year ended December 31, 2023, the Company had \$0 of receivable reported as sales.

B. Transfer and Servicing of Financial Assets

The Company did not have any transactions surrounding the transfers and servicing of financial assets during the year ended December 31, 2023.

C. Wash Sales

In the course of the Company's asset management, securities are sold and reacquired within 30 days of the sale date. During the year ended December 31, 2023, the Company did not have any transactions qualifying as wash sales.

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

A. ASO Plans:

The Company did not have ASO plans during 2023.

B. ASC Plans:

The Company did not have any ASC plans during 2023.

C. Medicare or Similarly Structured Cost Based Reimbursement Contract

The Company did not have any Medicare or other similarly structured cost based reimbursement contracts during 2023.

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

The Company did not have any direct premiums written by managing general agents or third party administrators during 2023.

NOTE 20 Fair Value Measurements

- A. (1) None
 - (2) None
 - (3) Transfers of securities among the levels occur at times and depend on the type of inputs used to determine fair value of each security. There were no transfers between levels during any period presented.
 - (4) Fair value is the price that would be received to sell an asset or paid to transfer a liability (exit price) in an orderly transaction between market participants at the measurement date. The objective of a fair value measurement is to determine that price for each financial instrument at each measurement date. The Company met this objective using various methods of valuation that include market, income and cost approaches.

The Company categorizes its financial instruments into three levels of fair value hierarchy based on the priority of inputs used in determining fair value. The hierarchy defines the highest priority inputs (Level 1) as quoted prices in active markets for identical assets or liabilities. The lowest priority inputs (Level 3) are the Company's assumptions about what a market participant would use in determining fair value such as estimated future cash flows. In certain cases, the inputs used to measure fair value may fall into different levels of the fair value hierarchy. In such cases, a financial instrument's level within the fair value hierarchy is based on the lowest level of input that is significant to the fair value measurement. The Company's assessment of the significance of a particular input to the fair value measurement in its entirety requires judgment and considers factors specific to the financial instrument. The Company categorizes its financial assets and liabilities recorded at fair value in the consolidated balance sheets as follows:

- Level 1 Quoted prices are available in active markets for identical financial instruments as of the reporting date. The Company does not adjust the quoted price for these financial instruments, even in situations where it holds a large position and a sale could reasonably impact the quoted price.
- Level 2 Quoted prices in active markets for similar financial instruments, quoted prices for identical or similar financial instruments in markets that are not active; and models and other valuation methodologies using inputs other than quoted prices that are observable.
- Level 3 Models and other valuation methodologies using significant inputs that are unobservable for financial instruments and include situations where there is little, if any, market activity for the financial instrument. The inputs into the determination of fair value require significant management judgment or estimation. Financial instruments that are included in Level 3 are securities for which no market activity or data exists and for which the Company used discounted expected future cash flows with its own assumptions about what a market participant would use in determining fair value.
- (5) None at December 31, 2023.
- B. None at December 31, 2023.
- C. Aggregate fair value for all financial instruments and the level within the fair value hierarchy in which the fair value measurements in their entirety fall.

The following table represents the fair values and admitted values of all admitted assets and liabilities that are financial instruments. The fair values are also categorized into the twelve-level fair value hierarchy.

Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Not Practicable (Carrying Value)
\$ 20,035,807	\$ 20,035,807				
\$ 1,127,202,242			\$ 1,127,202,242		
9	\$ 20,035,807	\$ 20,035,807 \$ 20,035,807	\$ 20,035,807 \$ 20,035,807	\$ 20,035,807 \$ 20,035,807	\$ 20,035,807 \$ 20,035,807

The following methods and assumptions were used by the Company in estimating the fair values of financial instruments

Cash, cash equivalents, and short term investments: Amounts reported in the statutory-basis balance sheets for these instruments are reported at their historical cost which approximates fair value due to the nature of the assets assigned to this category.

- D. At December 31, 2023, the Company had no investments where it was not practicable to estimate fair value.
- E. NONE

NOTE 21 Other Items

A. Unusual or Infrequent Items

The Company did not have any unusual or infrequent items during 2023.

B. Troubled Debt Restructuring: Debtors

During the year ended December 31, 2023, the Company did not have any troubled debt restructuring.

C. Other Disclosures

The Company did not have any unusual items or investments pledged as collateral as of December 31, 2023.

D. Business Interruption Insurance Recoveries

The Company did not have any business interruption insurance recoveries during 2023.

E. State Transferable and Non-transferable Tax Credits

 $The \ Company \ did \ not \ have \ any \ state \ transferable \ or \ non-transferable \ tax \ credits \ as \ of \ December \ 31, \ 2023.$

F. Subprime Mortgage Related Risk Exposure

The Company had no direct exposure through investments in subprime loans during 2023.

G. Retained Assets

As of December 31, 2023, the Company does not have any retained assets.

H. Insurance-Linked Securities (ILS) Contracts

As of December 31, 2023, the Company does not have any insurance-linked securities.

I. The Amount That Could Be Realized on Life Insurance Where the Reporting Entity is Owner and Beneficiary or Has Otherwise Obtained Rights to Control the Policy

The Company is not an owner and beneficiary of any life insurance policies during 2023.

NOTE 22 Events Subsequent

Type I – Recognized Subsequent Events:

There were no Type I Subsequent Events for the Company as of December 31, 2023.

Type II – Nonrecognized Subsequent Events:

There were no Type II Subsequent Events for the Company as of December 31, 2023.

NOTE 23 Reinsurance

A. Ceded Reinsurance Report

The Company does not cede any business as of December 31, 2023.

B. Uncollectible Reinsurance

The Company did not write off any uncollectible reinsurance during 2023.

C. Commutation of Reinsurance Reflected in Income and Expenses.

The Company did not commute any ceded reinsurance during 2023.

D. Certified Reinsurer Rating Downgraded or Status Subject to Revocation

The Company did not have any certified reinsurer's rating downgraded or status subject to revocation during 2023

E-F. Effective October 1, 2023, the Company entered into a coinsurance funds withheld treaty with American Equity Life under which the Company is assuming 100% of the risk associated with both an in-force block and a flow block. Flow business will be reinsured through December 31, 2025, subject to a limit. The Company will assume the Lifetime Income Benefit Rider ("LIBR") claim payments greater than the income account value ("IAV") for underlying contracts of certain of its FIA policies. All of the policies subject to the treaty require the policyholder to pay a fee for the option to exercise the LIBR benefit.

The difference between the statutory-basis reserves assumed and the initial Funds Withheld Account ("FWA") will be financed through an excess of loss ("XOL") treaty between the Company and Canada Life Reinsurance ("CLRe") whereby CLRe will pay 100% of LIBR claims after exhaustion of the IAV and the FWA. Effective October 1, 2023, the XOL coverage will be 20th anniversary of the effective date (October 1, 2043) with extension of up to the 25th anniversary of the effective date (October 1, 2048), subject to the XOL limit defined in the treaty. The Company has obtained a permitted practice from the Vermont Department of Financial Regulation to treat the XOL agreement as an admitted asset.

The Company considered the guidance in NAIC Statement of Statutory Accounting Principles 61R, Life and Health Reinsurance ("SSAP 61R"), Appendix A-791 Life and Health Reinsurance Agreements ("Appendix A-791") and Issue Paper 74 in evaluating whether a transfer of risk has occurred with respect to the XOL treaty. The XOL treaty is considered a stop loss or non-proportional reinsurance agreement. SSAP 61R requires the contract terms to be evaluated to assess whether significant risk is transferred to the reinsurer. Based upon the Company's analysis of the contract and expectations of future claim payments, the Company does not expect CLRe to pay claims as a result of the agreement. The nature of this XOL agreement does not meet risk transfer criterion; therefore, the Company will apply deposit

As of October 1, 2023, American Equity Life ceded \$539,600,688 of in-form LIBR reserves. Summary of other key financial impacts below as of the effective date:

Income Statement	October 31, 2023
Annuity	\$ 539,600,688
Commission allowance	\$ 462,833,872
Balance Sheet	
Funds withheld asset	\$ 81,333,901
Excess of loss asset	\$ 458,266,787
Reserves	\$ 539.600.688

G. Ceding Entities That Utilize Captive Reinsurers to Assume Reserves Subject to the XXX/ AXXX Captive Framework

The Company did not have any RBC shortfall for ceded XXXX/AXXX reinsurance with a captive reinsurer subject to the XXXX/AXXX captive framework during 2023.

H. Reinsurance Credit

1.-6. None

NOTE 24 Retrospectively Rated Contracts & Contracts Subject to Redetermination

A. Disclose the method used by the reporting entity to estimate accrued retrospective premium adjustments.

The Company does not have any retrospectively rated contracts or contracts subject to redetermination.

B. Disclose whether accrued retrospective premiums are recorded through written premium or as an adjustment to earned premium.

The Company does not have any retrospectively rated contracts or contracts subject to redetermination.

C. Disclose the amount of net premiums written that are subject to retrospective rating features, as well as the corresponding percentage to total net premiums written.

The Company does not have any retrospectively rated contracts or contracts subject to redetermination.

D. Medical loss ratio rebates required pursuant to the Public Health Service Act.

The Company does not have any medical loss ratio rebates.

E. Risk Sharing Provisions of the Affordable Care Act

The Company is not subject to the risk-sharing provisions of the Affordable Care Act.

NOTE 25 Change in Incurred Losses and Loss Adjustment Expenses

The Company did not have any changes in incurred losses and loss adjustment expense during 2023.

NOTE 26 Intercompany Pooling Arrangements

A.-G. The Company did not participate in any intercompany pooling arrangements during 2023.

NOTE 27 Structured Settlements

A. - B. The Company did not have any structured settlements in 2023.

NOTE 28 Health Care Receivables

A. - B. The Company did not have any health care receivables as of December 31, 2023.

NOTE 29 Participating Policies

The Company did not have any participating policies during 2023.

NOTE 30 Premium Deficiency Reserves

As of December 31, 2023, the Company did not have any contracts that would require premium deficiency reserves.

NOTE 31 Reserves for Life Contracts and Annuity Contracts

- (1) The Company waives deduction of fractional premiums upon the death of the insured and returns any portion of the final premium beyond the date of death. Surrender values are not promised in excess of legally computed reserves.
- (2) As part of the underwriting process, an individual may be determined to be substandard. In such cases, additional premiums are charged depending on such determination.

Unpaid claims include amounts for losses and related adjustment expenses and are determined using individual claim evaluations and statistical analysis. Unpaid claims represent estimates of the ultimate net costs of all losses, reported and unreported, which remain unpaid at the end of the current reporting period. These estimates are necessarily subject to the impact of future changes in claim severity, frequency and other factors. In spite of the variability inherent in such situations, management believes that the unpaid claim amounts are adequate. The estimates are continuously reviewed and as adjustments to these amounts become necessary, such adjustments are reflected in current operations.

- (3) As of December 31, 2023, the Company had no insurance in force for which the gross premiums are less than the net premiums according to the standard valuation set by the State of Vermont.
- (4) The Tabular Interest, Tabular Less Actual Reserves Released and Tabular Cost have been determined by formula as described in the instructions.
- (5) For the determination of Tabular Interest on funds not involving life contingencies for each valuation rate of interest, the tabular interest is calculated as one hundredth of the product of such valuation rate of interest times the mean of the amount of funds subject to such valuation rate of interest held at the beginning and end of the year of valuation.
- (6) The details for other changes:

NOTE 32 Analysis of Annuity Actuarial Reserves and Deposit Type Contract Liabilities by Withdrawal Characteristics

A. INDIVIDUAL ANNUITIES:

		General Account	Acco	oarate unt with antees	Ac	parate count uaranteed		Total	% of Total
(1) Subject to discretionary withdrawal:		_			·				
 a. With market value adjustment b. At book value less current surrender charge of 5% 	\$ 1,1	26,810,247	\$	-	\$	-	\$ 1,1	26,810,247	100.0%
or more	\$	145,725	\$	-	\$	-	\$	145,725	0.0%
c. At fair value	\$	-	\$	-	\$	-	\$	-	
 d. Total with market value adjustment or at fair value (total of a through c) 	\$ 1,1	26,955,972	\$	_	\$	_	\$ 1 ,1	26,955,972	100.0%
 e. At book value without adjustment (minimal or no charge or adjustment) 	\$	246,270	\$	_	\$	_	\$	246,270	0.0%
(2) Not subject to discretionary withdrawal	\$	-	\$	-	\$	-	\$	-	
(3) Total (gross: direct + assumed)	\$ 1,1	27,202,242	\$	-	\$	-	\$ 1,1	27,202,242	100.0%
(4) Reinsurance ceded	\$	-	\$	-	\$	-	\$	-	
(5) Total (net)* (3) - (4)	\$ 1,1	27,202,242	\$	-	\$	-	\$ 1,1	27,202,242	
(6) Amount included in A(1)b above that will move to A(1)e for the first time within the year after the statement date: * Reconciliation of total annuity actuarial reserves and depose	\$ sit fund	- liabilities.	\$	-	\$	-	\$	-	

B. GROUP ANNUITIES:

The Company did not have any group annuities as of December 31, 2023.

C. DEPOSIT-TYPE CONTRACTS (no life contingencies):

The Company did not have any deposit-type contracts as of December 31, 2023.

D.	Life & Accident & Health Annual Statement:	Α	mount
	(1) Exhibit 5, Annuities Section, Total (net)	\$ 1,12	7,202,242
	(2) Exhibit 5, Supplementary Contracts with Life Contingencies Section, Total (net)		
	(3) Exhibit 7, Deposit-Type Contracts, Line 14, Column 1		
	(4) Subtotal (1+2+3)	\$ 1,12	7,202,242
	Separate Accounts Annual Statement:		
	(5) Exhibit 3, Line 0299999, Column 2	\$	-
	(6) Exhibit 3, Line 0399999, Column 2	\$	-
	(7) Policyholder dividend and coupon accumulations	\$	-
	(8) Policyholder premiums	\$	-
	(9) Guaranteed interest contracts	\$	-
	(10) Other contract deposit funds	\$	-
	(11) Subtotal (5+6+7+8+9+10)	\$	-
	(12) Combined Total (4+11)	\$ 1,12	7,202,242

NOTE 33 Analysis of Life Actuarial Reserves by Withdrawal Characteristics

The Company does not have any life reserves as of December 31, 2023.

NOTE 34 Premium & Annuity Considerations Deferred and Uncollected

The Company does not have any deferred or uncollection premium or annuity considerations as of December 31, 2023.

NOTE 35 Separate Accounts

The Company did not have any Separate Accounts as of December 31, 2023.

NOTE 36 Loss/Claim Adjustment Expenses

The Company did not have loss/claim adjustment expense during 2023.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES GENERAL

1.1	Is the reporting entity a member of an Insurance Holding Company System consisting of two or more aff is an insurer?		Yes []	X] No []
	If yes, complete Schedule Y, Parts 1, 1A, 2 and 3.				
1.2	If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Directo such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a providing disclosure substantially similar to the standards adopted by the National Association of Insurar its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, subject to standards and disclosure requirements substantially similar to those required by such Act and	registration statement ice Commissioners (NAIC) in or is the reporting entity	X] No[] N/A [[]
1.3	State Regulating?		Verm	nont	
1.4	Is the reporting entity publicly traded or a member of a publicly traded group?		Yes []	X] No []
1.5	If the response to 1.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/g	roup	00010	39828	
2.1	Has any change been made during the year of this statement in the charter, by-laws, articles of incorporare reporting entity?		Yes []	X] No []
2.2	If yes, date of change:		10/01	/2023	
3.1	State as of what date the latest financial examination of the reporting entity was made or is being made.				
3.2	State the as of date that the latest financial examination report became available from either the state of entity. This date should be the date of the examined balance sheet and not the date the report was comp				
3.3	State as of what date the latest financial examination report became available to other states or the publ domicile or the reporting entity. This is the release date or completion date of the examination report and examination (balance sheet date).	not the date of the			
3.4	By what department or departments?				
3.5	Have all financial statement adjustments within the latest financial examination report been accounted for statement filed with Departments?	r in a subsequent financial] No [] N/A [[X]
3.6	Have all of the recommendations within the latest financial examination report been complied with?	Yes [] No [] N/A [[X]
4.1	During the period covered by this statement, did any agent, broker, sales representative, non-affiliated scombination thereof under common control (other than salaried employees of the reporting entity), receive a substantial part (more than 20 percent of any major line of business measured on direct premiums) of: 4.11 sales of new business?	re credit or commissions for or control] No [X	
4.2	receive credit or commissions for or control a substantial part (more than 20 percent of any major line of	by the reporting entity or an affiliate,	Yes [] No [X	.]
	premiums) of: 4.21 sales of new business? 4.22 renewals?] No [X] No [X	
5.1	Has the reporting entity been a party to a merger or consolidation during the period covered by this state If yes, complete and file the merger history data file with the NAIC.	ment?	Yes [] No [X	[]
5.2	If yes, provide the name of the entity, NAIC Company Code, and state of domicile (use two letter state at ceased to exist as a result of the merger or consolidation.	obreviation) for any entity that has			
	1 2 Name of Entity NAIC Company C				
6.1	Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate re revoked by any governmental entity during the reporting period?	gistration, if applicable) suspended or	Yes [] No [X	(]
6.2	If yes, give full information:				
7.1	Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the rep		Yes [] No [X	(]
7.2	If yes, 7.21 State the percentage of foreign control;	he nationality of its manager or			%
	1	2			
	Nationality	of Entity			

8.1 8.2	Is the company a subsidiary of a depository institution holding compan If the response to 8.1 is yes, please identify the name of the DIHC.					Yes []	No [X]
8.3 8.4	Is the company affiliated with one or more banks, thrifts or securities fill response to 8.3 is yes, please provide below the names and location regulatory services agency [i.e. the Federal Reserve Board (FRB), the Insurance Corporation (FDIC) and the Securities Exchange Commissi	n (city and state of the main office) of any affiliates in Office of the Comptroller of the Currency (OCC), t	egulated	by a fe	deral	Yes []	No [[X]
	1 Affiliate Name	2 Location (City, State)	3 FRB	4 OCC	5 FDIC	6 SEC			
8.5	Is the reporting entity a depository institution holding company with sig					v .			
8.6	Federal Reserve System or a subsidiary of the depository institution he If response to 8.5 is no, is the reporting entity a company or subsidiary Federal Reserve Board's capital rule?	of a company that has otherwise been made subjection	ect to the	•		Yes []	_	[X] A [X]
9.	What is the name and address of the independent certified public according to the independent certified to the independent certifi				165 [] NO [1	IN/ F	1 [A]
٥.	· · · · · · · · · · · · · · · · · · ·	Des Moines, IA 50309							
10.1	Has the insurer been granted any exemptions to the prohibited non-au requirements as allowed in Section 7H of the Annual Financial Report law or regulation?	udit services provided by the certified independent pating Model Regulation (Model Audit Rule), or substa	oublic ac antially si	countan	t ate	Yes []	No [[X]
10.2	, , , , , , , , , , , , , , , , , , , ,	ption:							
10.3 10.4	Has the insurer been granted any exemptions related to the other requallowed for in Section 18A of the Model Regulation, or substantially sir If the response to 10.3 is yes, provide information related to this exemption	uirements of the Annual Financial Reporting Model milar state law or regulation?ption:	Regulati	on as		Yes []	No [[X]
10.5	Has the reporting entity established an Audit Committee in compliance					1 No [1	M/i	Δ Г 1
10.6	If the response to 10.5 is no or n/a, please explain.	with the definement state incuration takes			162 [V] NO [,	IN/ F	١ ١
11.	What is the name, address and affiliation (officer/employee of the reportirm) of the individual providing the statement of actuarial opinion/certif Danny D. Purcell, Sr Managing Actuary AEL Des Moines, IA 50266	orting entity or actuary/consultant associated with a fication? L Re Vermont II 6000 Westown Parl	n actuari kway	al consu We	ılting st				
12.1	Does the reporting entity own any securities of a real estate holding co					Yes [1	No [X 1
		estate holding company				.00 [,	[~ 1
	12.12 Number of par	rcels involved							
	12.13 Total book/ad	justed carrying value				§			
12.2	If yes, provide explanation								
13.	FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITI								
13.1	What changes have been made during the year in the United States m	•							
13.2	Does this statement contain all business transacted for the reporting e					Yes [1	No [1
13.3	Have there been any changes made to any of the trust indentures duri	ing the year?				Yes [j	No [i
13.4	If answer to (13.3) is yes, has the domiciliary or entry state approved the	he changes?			Yes [] No []	N/A	A []
14.1	Are the senior officers (principal executive officer, principal financial of similar functions) of the reporting entity subject to a code of ethics, whi a. Honest and ethical conduct, including the ethical handling of actual relationships; b. Full, fair, accurate, timely and understandable disclosure in the period	ich includes the following standards?or apparent conflicts of interest between personal	and profe			Yes [X	(]	No []]
	 c. Compliance with applicable governmental laws, rules and regulatior d. The prompt internal reporting of violations to an appropriate person e. Accountability for adherence to the code. 	ns;	uty,						
14.11	If the response to 14.1 is No, please explain:								
14.2 14.21	· · · · · · · · · · · · · · · · · · ·	ent(s).				Yes []	No [[X]
	Have any provisions of the code of ethics been waived for any of the s If the response to 14.3 is yes, provide the nature of any waiver(s).	specified officers?				Yes []	No [X]

	o 15.1 is yes, indicate the American Bankers Association (r of Credit and describe the circumstances in which the Le				
1 American Bankers Association (ABA) Routing	2		3	4	
Number	Issuing or Confirming Bank Name		That Can Trigger the Letter of Credit	Amo	
			<u></u>		
	BOARD	OF DIRECTOR	S		
thereof?	or sale of all investments of the reporting entity passed upo			Yes [X]] No
thereof?	ng entity keep a complete permanent record of the procee			Yes [X]] No
part of any of its	g entity an established procedure for disclosure to its board officers, directors, trustees or responsible employees that	is in conflict or is likely	to conflict with the official duties of such	Yes [X]] No
	F	INANCIAL			
Has this stateme Accounting Princ	nt been prepared using a basis of accounting other than Siples)?	Statutory Accounting Pri	inciples (e.g., Generally Accepted	Yes [] No
	ned during the year (inclusive of Separate Accounts, excl		20.11 To directors or other officers	.\$	
			20.12 To stockholders not officers 20.13 Trustees, supreme or grand	•	
			(Fraternal Only)	. \$	
Total amount of I policy loans):	oans outstanding at the end of year (inclusive of Separate	Accounts, exclusive of	f 20.21 To directors or other officers	¢	
policy loans).			20.22 To stockholders not officers		
			20.23 Trustees, supreme or grand (Fraternal Only)	•	
Were any assets obligation being r	reported in this statement subject to a contractual obligat reported in the statement?	ion to transfer to anothe	er party without the liability for such		
	mount thereof at December 31 of the current year:		21.21 Rented from others	.\$	
			21.22 Borrowed from others		
			21.23 Leased from others		
			21.24 Other	.\$	
Does this statem	ent include payments for assessments as described in the tion assessments?	e Annual Statement Ins	tructions other than guaranty fund or	Yes [1 No
If answer is yes:			2.21 Amount paid as losses or risk adjustment		
,			2.22 Amount paid as expenses		
			2.23 Other amounts paid		
Does the reporting	ng entity report any amounts due from parent, subsidiaries	or affiliates on Page 2	of this statement?	Yes [] No
If yes, indicate ar	ny amounts receivable from parent included in the Page 2	amount:		. \$	
90 days?	utilize third parties to pay agent commissions in which the			Yes [] No
ıı ıne response to	24.1 is yes, identify the third-party that pays the agents a	ina whether they are a r	еіаіей рапу.		
		Is the Third-Party Age	ent		
		a Related Part			
	Name of Third-Party	(Yes/No)			
		······ [······			

25.02	12 If no, give full and complete information, relating thereto						
25.03	For securities lending programs, provide a description of the program including value for collateral and an whether collateral is carried on or off-balance sheet. (an alternative is to reference Note 17 where this info	ormation is also provided)					
25.04	For the reporting entity's securities lending program, report amount of collateral for conforming programs a Instructions.						
25.05	For the reporting entity's securities lending program, report amount of collateral for other programs		\$				
25.06	Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) froutset of the contract?	rom the counterparty at the Yes [] N	lo []	N/A	[X]
25.07	Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%?	' Yes [] N	o []	N/A	[X]
25.08	Does the reporting entity or the reporting entity's securities lending agent utilize the Master Securities lending conduct securities lending?] N	lo []	N/A	[X]
25.09	9 For the reporting entity's securities lending program state the amount of the following as of December 31	of the current year:					
	 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 a Total book/adjusted carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 a Total payable for securities lending reported on the liability page. 	hedule DL, Parts 1 and 2	.\$				
26.1	1 Were any of the stocks, bonds or other assets of the reporting entity owned at December 31 of the curren control of the reporting entity or has the reporting entity sold or transferred any assets subject to a put opt force? (Exclude securities subject to Interrogatory 21.1 and 25.03).	otion contract that is currently in	Yes]]	No [Х]
26.2	26.22 Subject to review 26.23 Subject to doll 26.24 Subject to doll 26.24 Subject to review 26.25 Placed under 26.26 Letter stock or excluding FHL 26.27 FHLB Capital 26.28 On deposit wit 26.29 On deposit wit 26.30 Pledged as con an FHLB	ourchase agreements	\$.				
	20.02 04101		ψ				
26.3	3 For category (26.26) provide the following:		v				
26.3	For category (26.26) provide the following: 1 Nature of Restriction Description	2 scription		Amo	3 ount		
	For category (26.26) provide the following: 1 Nature of Restriction Description	2 scription		Amo	3 ount		_
26.3 27.1 27.2	For category (26.26) provide the following: Nature of Restriction Description	2 scription	Yes	Amo	3 ount	No [Х]
27.1 27.2	For category (26.26) provide the following: 1	2 scription	Yes	Amo	3 ount	No [Х]
27.1 27.2	3 For category (26.26) provide the following: 1 Nature of Restriction Description Does the reporting entity have any hedging transactions reported on Schedule DB?	2 scription state? Yes [Yes] N	Amo	3 pount]	No [X]
27.1 27.2 INES 2	For category (26.26) provide the following: Nature of Restriction Description	2 scription tate? Yes [s a result of interest rate sensitivity?	Yes] N Yes Yes	Amo]]	No [N/A	X]
27.1 27.2 INES 2 27.3	For category (26.26) provide the following: 1	2 scription	Yes J N Yes Yes Yes Yes	[[[[[[]]	NO [N/A NO [NO [NO [NO [X]
27.1 27.2 INES 2 27.3 27.4	3 For category (26.26) provide the following: 1 Nature of Restriction Description 1 Does the reporting entity have any hedging transactions reported on Schedule DB? 2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary st If no, attach a description with this statement. 3 27.3 through 27.5: FOR LIFE/FRATERNAL REPORTING ENTITIES ONLY: 3 Does the reporting entity utilize derivatives to hedge variable annuity guarantees subject to fluctuations as If the response to 27.3 is YES, does the reporting entity utilize: 27.41 Special accounting provision of SSAP 27.42 Permitted accounting practice 27.43 Other accounting guidance 27.43 Other accounting guidance 17.43 Other accounting guidance 18.44 Hedging strategy subject to the special accounting provisions of SSAP No. 108, the refollowing: • The reporting entity has obtained explicit approval from the domiciliary state. • Hedging strategy subject to the special accounting provisions is consistent with the requirements 18.4 Actuarial certification has been obtained which indicates that the hedging strategy is incorporated reserves and provides the impact of the hedging strategy within the Actuarial Guideline Condition 19.4 Financial Officer Certification has been obtained which indicates that the hedging strategy meets 19.5 Hedging Strategy within VM-21 and that the Clearly Defined Hedging Strategy is the hedging strategy is	2 scription	Yes] N Yes Yes Yes Yes Yes	Amo]]]]	NO [N/A NO [NO [NO [NO [X]
27.1 27.2 INES 2 27.3 27.4	Nature of Restriction Description	2 scription state? Yes [s a result of interest rate sensitivity? P No. 108 eporting entity attests to the s of VM-21. d within the establishment of VM-21 nal Tail Expectation Amount. s the definition of a Clearly Defined ategy being used by the company in le into equity, or, at the option of the	Yes J N Yes Yes Yes Yes	Amo]	No [N/A No [No [No [No [No [No [X] [X]
27.1 27.2 INES 2 27.3 27.4 27.5	Nature of Restriction Description with the reporting entity have any hedging transactions reported on Schedule DB? If yes, has a comprehensive description of the hedging program been made available to the domiciliary st If no, attach a description with this statement. Separate of the reporting entity utilize derivatives to hedge variable annuity guarantees subject to fluctuations as If the response to 27.3 is YES, does the reporting entity utilize: 27.41 Special accounting provision of SSAP 27.42 Permitted accounting provision of SSAP 27.42 Permitted accounting guidance 27.43 Other accounting guidance 27.43 Other accounting guidance 47.43 Other accounting provisions of SSAP No. 108, the refollowing: The reporting entity has obtained explicit approval from the domiciliary state. Hedging strategy subject to the special accounting provisions is consistent with the requirements Actuarial certification has been obtained which indicates that the hedging strategy is incorporated reserves and provides the impact of the hedging strategy within the Actuarial Guideline Condition Financial Officer Certification has been obtained which indicates that the hedging strategy meets Hedging Strategy within VM-21 and that the Clearly Defined Hedging Strategy is the hedging strategy is the hedging strategy is more officer. Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible issuer, convertible into equity?	2 scription state? Yes [s a result of interest rate sensitivity? No. 108	Yes Yes Yes Yes Yes Yes Yes Yes	[[[[[]]]]]]]]]]]]]]]]]]]	No [N/A No [No [No [No [No [No [X] [X]]]
27.1 27.2 INES 2 27.3 27.4 27.5	1 Does the reporting entity have any hedging transactions reported on Schedule DB?	2 scription State? Yes [s a result of interest rate sensitivity? P No. 108 eporting entity attests to the s of VM-21. d within the establishment of VM-21 nal Tail Expectation Amount. s the definition of a Clearly Defined ategy being used by the company in le into equity, or, at the option of the meld physically in the reporting entity's current year held pursuant to a camination Considerations, F. Examiners Handbook?	Yes Yes Yes Yes Yes Yes Yes Yes	[[[[[]]]]]]]]]]]]]]]]]]]	No [N/A No [No [No [No [No [X]
27.1 27.2 INES 2 27.3 27.4 27.5	1 Does the reporting entity have any hedging transactions reported on Schedule DB?	state? Yes [s a result of interest rate sensitivity? P No. 108	Yes J N Yes Yes Yes Yes Yes	[[[[]]]]]	No [N/A No [No [No [No [No [No [No [No [X]

GENERAL INTERROGATORIES

9.02	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:

Name(s)	Location(s)		Complete Explanation(s)				
Have there been any changes, including name changes, in the custodian(s) identified in 29.01 during the current year?							
1 Old Custodian	2 New Custodian	3 Date of Change	4 Reason				

29.05 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. For assets that are managed internally by employees of the reporting entity, note as such. ["...that have access to the investment accounts"; "...handle securities"]

	_
Name of Firm or Individual	Affiliation
AMERICAN EQUITY INVESTMENT LIFE HOLDING COMPANY	A

29.0597 For those firms/individuals listed in the table for Question 29.05, 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 []	No	[X]

29.06 For those firms or individuals listed in the table for 29.05 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table below.

1	2	3	4	5
				Investment
				Management
Central Registration				Agreement
Depository Number	Name of Firm or Individual	Legal Entity Identifier (LEI)	Registered With	(IMA) Filed
	AMERICAN EQUITY INVESTMENT LIFE HOLDING COMPANY	549300RK5RZQ740FPL83	SEC	DS

30.1	Does the reporting entity have any diversified mutual funds reported in Schedule D, Part 2 (diversified according to the Securities and					
	Exchange Commission (SEC) in the Investment Company Act of 1940 [Section 5(b)(1)])?	Yes []	No	o []	Χ]
~~ ~	16 Control of the College Control of the					

30.2 If yes, complete the following schedule:

29.03 29.04

1	2	3
CUSIP#	Name of Mutual Fund	Book/Adjusted Carrying Value
30.2999 - Total	Trains of metadin and	canying value

30.3 For each mutual fund listed in the table above, complete the following schedule:

1	2	3	4
		Amount of Mutual	
		Fund's Book/Adjusted	
		Carrying Value	
	Name of Significant Holding of the	Attributable to the	Date of
Name of Mutual Fund (from above table)	Mutual Fund	Holding	Valuation

GENERAL INTERROGATORIES

31. Provide the following information for all short-term and long-term bonds and all preferred stocks. Do not substitute amortized value or statement value for fair value.

	1	2	3
			Excess of Statement
			over Fair Value (-), or
	Statement (Admitted)		Fair Value over
	Value	Fair Value	Statement (+)
31.1 Bonds	7,449,607	7,449,607	
31.2 Preferred stocks			
31.3 Totals	7,449,607	7,449,607	

31.4	Describe the sources or methods utilized in determining the fair values:					
	Bonds and stock are typically valued based on quoted market prices or estimated from independent pricing services such as Interactive Data Corporation and Reuters. For less liquid securities, quotes are obtained from broker/dealers or through internal pricing by investment advisors based on market inputs.					
32.1	Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D?	Ye	es [Х]	No	[]
32.2	If the answer to 32.1 is yes, does the reporting entity have a copy of the broker's or custodian's pricing policy (hard copy or electronic copy) for all brokers or custodians used as a pricing source?	Ye	es [Х]	No	[]
32.3	If the answer to 32.2 is no, describe the reporting entity's process for determining a reliable pricing source for purposes of disclosure of fair value for Schedule D:					
	Bonds and stock are typically valued based on quoted market prices or estimated from independent pricing services such as Interactive Data Corporation and Reuters. For less liquid securities, quotes are obtained from broker/dealers or through internal pricing by investment advisors based on market inputs.					
33.1 33.2	Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed?	Ye	es [Х]	No	[]
34.	By self-designating 5GI securities, the reporting entity is certifying the following elements of each self-designated 5GI security: a. 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. b. Issuer or obligor is current on all contracted interest and principal payments. c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal.					
	Has the reporting entity self-designated 5GI securities?	Ye	es [1	No	[X]
35.	By self-designating PLGI securities, the reporting entity is certifying the following elements of each self-designated PLGI security: a. The security was purchased prior to January 1, 2018. b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security. c. 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. d. 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?	Ye	es [1	No	[X]
36.	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: a. The shares were purchased prior to January 1, 2019.		,	•		
	 b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security. c. 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. d. The fund only or predominantly holds bonds in its portfolio. 					
	 e. 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. f. 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?	Yo	es [1	Nο	[X]
		.,	JO [,	110	[//]
37.	By rolling/renewing short-term or cash equivalent investments with continued reporting on Schedule DA, Part 1 or Schedule E Part 2 (identified through a code (%) in those investment schedules), the reporting entity is certifying to the following: a. The investment is a liquid asset that can be terminated by the reporting entity on the current maturity date.					
	b. If the investment is with a nonrelated party or nonaffiliate, then it reflects an arms-length transaction with renewal completed at the discretion of all involved parties.					
	 c. If the investment is with a related party or affiliate, then the reporting entity has completed robust re-underwriting of the transaction for which documentation is available for regulator review. 					
	 d. Short-term and cash equivalent investments that have been renewed/rolled from the prior period that do not meet the criteria in 37.a - 37.c are reported as long-term investments. 					
	Has the reporting entity rolled/renewed short-term or cash equivalent investments in accordance with these criteria?]	No [.]	, N/	Ά[Χ

38.1	Does the reporting entity directly hold cryptocurrencies?			. Yes [] No [[X]
38.2	If the response to 38.1 is yes, on what schedule are they reported?					
39.1	Does the reporting entity directly or indirectly accept cryptocurrencies as payments for	or premiums on policies?		. Yes [] No [[X]
39.2	2 If the response to 39.1 is yes, are the cryptocurrencies held directly or are they immediately converted to U.S. dollars? 39.21 Held directly					[X] [X]
39.3	If the response to 38.1 or 39.1 is yes, list all cryptocurrencies accepted for payments	of premiums or that are held direct	ly.			
	1 Name of Cryptocurrency	2 Immediately Converted to USD, Directly Held, or Both	3 Accepted for Payment of Premiums			
	OTHER		•	_		
40.1	Amount of payments to trade associations, service organizations and statistical or rat	ting bureaus, if any?		\$		
40.2	List the name of the organization and the amount paid if any such payment represent service organizations and statistical or rating bureaus during the period covered by the		ents to trade association	ins,		
	1 Name		2 unt Paid			
41.1	Amount of payments for legal expenses, if any?			\$		7,673
41.2	List the name of the firm and the amount paid if any such payment represented 25% during the period covered by this statement.	or more of the total payments for le	egal expenses			
	1 Name		2 unt Paid			
42.1	Amount of payments for expenditures in connection with matters before legislative bo	odies, officers or departments of go	vernment, if any?	\$		
42.2	List the name of the firm and the amount paid if any such payment represented 25% connection with matters before legislative bodies, officers, or departments of governments.					
	1 Name	A	2			
	Name		unt Paid			

GENERAL INTERROGATORIES

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

1.1	Does the reporting entity have any direct Medicare Supplement Insurance in f	force?		Yes [] No [X]
1.2	If yes, indicate premium earned on U.S. business only			\$
1.3	What portion of Item (1.2) is not reported on the Medicare Supplement Insura	inco Evnorioneo Evhibit?		¢
1.5	1.31 Reason for excluding:	ince Expendice Exhibit:		φ
1.4	Indicate amount of earned premium attributable to Canadian and/or Other Alie	en not included in Item (1.2) above		\$
		5c		
1.5	Indicate total incurred claims on all Medicare Supplement insurance			\$
1.6	Individual policies:	Most current th	ree vears:	
	·	1.61 Total pren	nium earned	\$
				\$
		1.63 Number o	f covered lives	
		All years prior t	o most current three years	
		·		\$
				\$
		1.66 Number o	f covered lives	
1.7	Group policies:	Most current th	ree years:	
		1.71 Total pren	nium earned	\$
				\$
		1.73 Number o	covered lives	
		All years prior t	o most current three years	
				\$
				\$
		1.76 Number o	r covered lives	
2.	Health Test:			
		1 Current Year	2 Prior Year	
	2.1 Premium Numerator			
	2.2 Premium Denominator			
	2.3 Premium Ratio (2.1/2.2)			
	2.5 Reserve Denominator			
	2.6 Reserve Ratio (2.4/2.5)			
2.4	Does this reporting entity have Separate Accounts?			V [] N- [V]
3.1	Does this reporting entity have Separate Accounts?			Yes [] No [X]
3.2	If yes, has a Separate Accounts Statement been filed with this Department?		Yes [] No [X] N/A [
3.3	What portion of capital and surplus funds of the reporting entity covered by as distributable from the Separate Accounts to the general account for use by the			\$
3.4	State the authority under which Separate Accounts are maintained:			
3.5	Was any of the reporting entity's Separate Accounts business reinsured as of	December 31?		Yes [] No [X]
2.6	Lies the reporting entity assumed by reinsurance any Congrete Associate bysis	inces as of December 212		V [] N- [V]
3.6	Has the reporting entity assumed by reinsurance any Separate Accounts busi	iness as of December 31?		. Yes [] NO [X]
3.7	If the reporting entity has assumed Separate Accounts business, how much, i Accounts reserve expense allowances is included as a negative amount in the (net)"?	e liability for "Transfers to Separate A	ccounts due or accrued	
4.	For reporting entities having sold annuities to another insurer where the insure claimant (payee) as the result of the purchase of an annuity from the reporting	g entity only:	·	
4.1 4.2	Amount of loss reserves established by these annuities during the current year List the name and location of the insurance company purchasing the annuities			
		·		
	1		2 Statement V	/alue
			on Purchase of Annuiti	
	P&C Insurance Company And Loc	cation	(i.e., Present	

GENERAL INTERROGATORIES

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

	·							
5.1	Do you act as a custodian for health sa	avings accounts?					Yes []	No [X]
5.2	If yes, please provide the amount of cu	stodial funds held as of the re	eporting date				\$	
5.3	Do you act as an administrator for heal	Ith savings accounts?					Yes []	No [X]
5.4	If yes, please provide the balance of fu	nds administered as of the re	porting date				\$	
6.1 6.2	Are any of the captive affiliates reporter If the answer to 6.1 is yes, please provided to the captive affiliates reported to the captive affiliates are captive affiliates.		orized reinsurers?			Yes [] No [] N/A [X]
	1	2	3	4	Assets	s Supporting Reserv	e Credit	
	Company Name	NAIC Company Code	Domiciliary Jurisdiction	Reserve Credit	5 Letters of Credit	6 Trust Agreements	7 Other	
7.	Provide the following for individual ordi ceded):	nary life insurance* policies (\ 7.1 Direct Pre 7.2 Total Incu	emium Written Irred Claims		ar (prior to reinsur		.\$	
		7.3 Number o	of Covered Lives					
	Whole L Variable Universa	*Ordin whether full underwriting, limited. Life (whether full underwriting, b Life (with or without second al Life (with or without second b Universal Life (with or withou	limited underwriting ry gurarantee) ary gurarantee)	ssue,"short form ap g,jet issue,"short fo				
8.	Is the reporting entity licensed or charte	ered, registered, qualified, eliç	gible or writing busi	ness in at least two	o states?		Yes []	No [X]
8.1	If no, does the reporting entity assume the reporting entity?						Yes [X]	No []
ife. Ac	cident and Health Companies Only:							
9.1	Are personnel or facilities of this report by this reporting entity (except for activ studies)?	ities such as administration of	f jointly underwritte	n group contracts	and joint mortality	or morbidity		No []
9.2	Net reimbursement of such expenses b	between reporting entities:						
10.1	Does the reporting entity write any gua	ranteed interest contracts?					Yes []	No [X]
10.2	If yes, what amount pertaining to these	lines is included in:		40.04	5 011 1		•	
11.	For stock reporting entities only:							
11.1	Total amount paid in by stockholders a	s surplus funds since organiz	ation of the reporti	ng entity:			\$	19,995,000
12.	Total dividends paid stockholders since	e organization of the reporting	entity:				•	
13.1	Does the reporting entity reinsure any Neinsurance (including retrocessional benefits of the occupational illness and written as workers' compensation insur	reinsurance) assumed by life I accident exposures, but not	and health insurers	fined as:s of medical, wage	loss and death			
13.2	If yes, has the reporting entity complete	ed the Workers' Compensatio	n Carve-Out Supp	lement to the Annu	ual Statement?		Yes []	No []
13.3	If 13.1 is yes, the amounts of earned pr	remiums and claims incurred		re:	2	2		
			1 Reinsurar Assume		2 nsurance Seded	3 Net Retained		
	13.31 Earned premium							
	13.32 Paid claims							
	13.33 Claim liability and reserve (beging13.34 Claim liability and reserve (end of	• , ,						
	13.35 Incurred claims							

GENERAL INTERROGATORIES

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

13.4	If reinsurance assumed included amounts with attachment points below \$1,000,000, the distribution of the amounts reported in Lines 13.31 and 13.34 for Column (1) are:					
	Attachment Earned Claim Liability					
	Point Premium and Reserve					
	13.41 <\$25,000					
	13.42 \$25,000 - 99,999					
	13.44 \$250,000 - 999,999					
	13.45 \$1,000,000 or more					
13.5	What portion of earned premium reported in 13.31, Column 1 was assumed from pools?	\$				
raterna	al Benefit Societies Only:					
14. 15.	Is the reporting entity organized and conducted on the lodge system, with ritualistic form of work and representative form of government? How often are meetings of the subordinate branches required to be held?	Yes []	No []	
16.	How are the subordinate branches represented in the supreme or governing body?					
17.	What is the basis of representation in the governing body?					
18.1	How often are regular meetings of the governing body held?					
18.2	When was the last regular meeting of the governing body held?					
18.3	When and where will the next regular or special meeting of the governing body be held?					
18.4	How many members of the governing body attended the last regular meeting?					
18.5	How many of the same were delegates of the subordinate branches?	····				
19.	How are the expenses of the governing body defrayed?					
20.	When and by whom are the officers and directors elected?					
21.	What are the qualifications for membership?					
22.	What are the limiting ages for admission?					
23.	What is the minimum and maximum insurance that may be issued on any one life?					
24.	Is a medical examination required before issuing fit of ification applications and incompanies of the incomp	 Yes [1	No [1	
25.	Are applicants admitted to membership without file and applicants admitted to membership without file and applicants admitted to membership without file and applicants admitted to membership without file and applicants admitted to membership without file and applicants admitted to membership without file and applicants admitted to membership without file and applicants admitted to membership without file and applicants admitted to membership without file and applicants admitted to membership without file and applicants admitted to membership without file and applicants admitted to membership without file and applicants are applicants.	Yes [-			
26.1	Are notices of the payments required sent to the lember leading to the lember leading to the lember leading to the lember leading to the lember leading to the leading to the lember leading to the lember leading to the lember leading to the leadin] No []	N/	Α []
26.2	If yes, do the notices state the purpose for which money to be because to be because the purpose for which money to be because the purpose for which money to be because the purpose for which money to be because the purpose for which money to be because the purpose for which money to be because the purpose for which money to be because the purpose for which money to be because the purpose for which money to be because the purpose for which money to be because the purpose for which money to be because the purpose for which money to be because the purpose for which money to be because the purpose for which money to be because the purpose for which money to be because the purpose for which money t	Yes []	No []	
27.	What proportion of first and subsequent year's payments may be used for management expenses? 27.11 First Year					0/_
	27.12 Subsequent Years					- %
28.1 28.2	Is any part of the mortuary, disability, emergency or reserve fund, or the accretions from or payments for the same, used for expenses?	Yes [-	-]	_ ``
29.1	Does the reporting entity pay an old age disability benefit?	-]	No []	
29.2	If yes, at what age does the benefit commence?	Yes [_	No I	1	
30.1 30.2	If yes, when?	169 [1	INO [1	
•						
31.	Have you filed with this Department all forms of benefit certificates issued, a copy of the constitution and all of the laws, rules and regulations in force at the present time?	Yes []	No []	
32.1	State whether all or a portion of the regular insurance contributions were waived during the current year under premium-paying certificates on	Yes [1	No I	1	
32.2	account of meeting attained age or membership requirements?	l No [•		ر] A	1
32.3	If yes, explain		,	117	Λ L	,
33.1	Has the reporting entity reinsured, amalgamated with, or absorbed any company, order, society, or association during the year?		1	No ſ	1	
33.2		•		-	-	
	director, trustee, or any other person, or firm, corporation, society or association, received or is to receive any fee, commission, emolument, or compensation of any nature whatsoever in connection with, on an account of such reinsurance, amalgamation,					
	absorption, or transfer of membership or funds?] No []	N/	Α []
34.	Has any present or former officer, director, trustee, incorporator, or any other persons, or any firm, corporation, society or association, any	ا مولا	1	No r	1	
35.1	claims of any nature whatsoever against this reporting entity, which is not included in the liabilities on Page 3 of this statement? Does the reporting entity have outstanding assessments in the form of Jiens against policy benefits that have increased surplus?	Yes [Yes [-	_	_	
35.2	If yes, what is the date of the original lien and the coutst ding to the course the main course. Out anding Liet mount	100 [,	110 [,	

FIVE-YEAR HISTORICAL DATA

Show amounts in whole dollars only, no cents; show percentages to one decimal place, i.e. 17.6.
\$000 omitted for amounts of life insurance

	T	\$000 omitted for a	mounts of life insu		1	1 -
		1 2023	2 2022	3 2021	4 2020	5 2019
	Life Insurance in Force	2023	2022	2021	2020	2019
	(Exhibit of Life Insurance)					
1.	Ordinary - whole life and endowment (Line 34, Col.					
	4)					
2.	Ordinary - term (Line 21, Col. 4, less Line 34, Col.					
	4)					
3.						
4.	Group, excluding FEGLI/SGLI (Line 21, Col. 9 less Lines 43 & 44, Col. 4)					
5.	Industrial (Line 21, Col. 2)					
6.	FEGLI/SGLI (Lines 43 & 44, Col. 4)					
	Total (Line 21, Col. 10)					
	Total in force for which VM-20					
7.1	deterministic/stochastic reserves are calculated					
	New Business Issued					
	(Exhibit of Life Insurance)					
8.	Ordinary - whole life and endowment (Line 34, Col.					
	2)					
9.	Ordinary - term (Line 2, Col. 4, less Line 34, Col. 2)					
10.	Credit life (Line 2, Col. 6)					
11.	Group (Line 2, Col. 9)					
12.	Industrial (Line 2, Col. 2)					
13.	Total (Line 2, Col. 10)					
	Premium Income - Lines of Business					
	(Exhibit 1 - Part 1)					
	Individual life (Line 20.4, Col. 2)					
15.	Group life (Line 20.4, Col. 3)	050 400 445				ļ
16.	Individual annuities (Line 20.4, Col. 4)	650,469,148				
	Group annuities (Line 20.4, Col. 5)					
18.	Accident & Health (Line 20.4, Col. 6)					
19.	Other lines of business (Line 20.4, Col. 8)	050 400 440				
20.	Total	650,469,148				
0.4	Balance Sheet (Pages 2 & 3)					
21.	Total admitted assets excluding Separate Accounts business (Page 2, Line 26, Col. 3)	1 147 229 050				
22	Total liabilities excluding Separate Accounts	1, 147,230,030				
22.	business (Page 3, Line 26)	1 128 443 188				
23.	Aggregate life reserves (Page 3, Line 1)	1 127 202 242				
	Excess VM-20 deterministic/stochastic reserve over					
_0	NPR related to Line 7.1					
24.	Aggregate A & H reserves (Page 3, Line 2)					
25.	Deposit-type contract funds (Page 3, Line 3)					
26.	Asset valuation reserve (Page 3, Line 24.01)					
27.	Capital (Page 3, Lines 29 and 30)	5,000				
28.	Surplus (Page 3, Line 37)	18,789,862				
	Cash Flow (Page 5)					
29.	Net Cash from Operations (Line 11)	(1,205,139)				
	Risk-Based Capital Analysis					
30.	Total adjusted capital					
31.	· ·	3,641,818				
	Percentage Distribution of Cash, Cash					
	Equivalents and Invested Assets					
	(Page 2, Col. 3) (Line No. /Page 2, Line 12, Col. 3)					
22	x 100.0 Bonds (Line 1)					
32.	Stocks (Lines 2.1 and 2.2)					
33. 34.	Mortgage loans on real estate(Lines 3.1 and 3.2)					
35.	Real estate (Lines 4.1, 4.2 and 4.3)					
36.	Cash, cash equivalents and short-term investments					
50.	(Line 5)	100.0				<u> </u>
37.	Contract loans (Line 6)					
38.	Derivatives (Page 2, Line 7)					
39.	Other invested assets (Line 8)					
40.	Receivables for securities (Line 9)					
41.	Securities lending reinvested collateral assets (Line					
	10)					
42.	Aggregate write-ins for invested assets (Line 11)			<u> </u>	1	
43.	Cash, cash equivalents and invested assets	100.0	400.0	400.0	400.0	400.0
	(Line 12)	100.0	100.0	100.0	100.0	100.0
	Investments in Parent, Subsidiaries and					
11	Affiliates Affiliated bonds (Schedule D Summary, Line 12,					
44.	Col. 1) Summary, Line 12,		L		<u></u>	
45.	*					
15.	Line 18, Col. 1)					
46.	Affiliated common stocks (Schedule D Summary					
	Line 24, Col. 1),					
47.	Affiliated short-term investments (subtotal included					
	in Schedule DA Verification, Col. 5, Line 10)					ļ
						ļ
48.	3.3.					
48. 49.	All other affiliated					
	All other affiliated Total of above Lines 44 to 49					
49.	All other affiliated					

FIVE-YEAR HISTORICAL DATA

(Continued)

		•	onunueu)	_		_
		1	2	3	4	5
		2023	2022	2021	2020	2019
	Total Nonadmitted and Admitted Assets					
52.	Total nonadmitted assets (Page 2, Line 28, Col. 2)					
53.	Total admitted assets (Page 2, Line 28, Col. 3)	1, 147, 238, 050				
	Investment Data					
54.	Net investment income (Exhibit of Net Investment					
	Income)	36, 174				
55.	Realized capital gains (losses) (Page 4. Line 34					
	Column 1)					
56.	Unrealized capital gains (losses) (Page 4, Line 38,					
	Column 1)					
57.	Total of above Lines 54, 55 and 56	36, 174				
	Benefits and Reserve Increases (Page 6)	•				
58.	Total contract/certificate benefits - life (Lines 10, 11, 12,					
00.	13, 14 and 15, Col. 1 minus Lines 10, 11,12, 13, 14					
	and 15, Cols. 6, 7 and 8)					
59.	Total contract/certificate benefits - A & H (Lines 13 &					
00.	14, Col. 6)					
60.	Increase in life reserves - other than group and					
00.	annuities (Line 19, Col. 2)					
61.						
62.	Dividends to policyholders and refunds to members					
02.	(Line 30, Col. 1)					
	Operating Percentages					
63.	Insurance expense percent (Page 6, Col. 1, Lines 21,					
03.	22 & 23. less Line 6)/(Page 6. Col. 1. Line 1 plus					
	Exhibit 7, Col. 2, Line 2) x 100.0	71.2				
64	Lance percent (ordinary only) [(Exhibit of Life	11.2				
64.	Lapse percent (ordinary only) [(Exhibit of Life Insurance, Col. 4, Lines 14 & 15) / 1/2 (Exhibit of Life					
1	Insurance, Col. 4, Lines 14 & 15) / 1/2 (Exhibit of Life Insurance, Col. 4, Lines 1 & 21)] x 100.0					
65.	A & H loss percent (Schedule H, Part 1, Lines 5 and 6,			l		
05.	Col. 2)					
66.	A & H cost containment percent (Schedule H, Pt. 1,			[
00.	Line 4, Col. 2)					
67.				l		
07.	expenses (Schedule H, Pt. 1, Line 10, Col. 2)					
1	A & H Claim Reserve Adequacy			l		
60						
68.	Incurred losses on prior years' claims - comprehensive			xxx		vvv
00	group health (Sch. H, Part 3, Line 3.1 Col. 3) Prior years' claim liability and reserve - comprehensive					
69.				XXX	VVV	
70.	group health (Sch. H, Part 3, Line 3.2 Col. 3)					
70.	Incurred losses on prior years' claims-health other than					
	comprehensive group health (Sch. H, Part 3, Line 3.1			xxx	2007	2004
	Col. 1 less Col. 3)			XXX	XXX	XXX
71.						
	comprehensive group health (Sch. H, Part 3, Line 3.2			XXX	2004	2004
	Col. 1 less Col. 3)			XXX	XXX	XXX
	Net Gains From Operations After Dividends to					
	Policyholders, Refunds to Members, Federal					
	Income Taxes and Before Realized Capital Gains					
	or (Losses) by Lines of Business (Page 6.x, Line					
	33)					
72.	Individual industrial life (Page 6.1, Col. 2)					
73.	Individual whole life (Page 6.1, Col. 3)					
74.	Individual term life (Page 6.1, Col. 4)					
75.	Individual indexed life (Page 6.1, Col. 5)					
76.	Individual universal life (Page 6.1, Col. 6)					
77.	Individual universal life with secondary guarantees					
'''	(Page 6.1, Col. 7)					
78.	Individual variable life (Page 6.1, Col. 8)					
79.	Individual variable universal life (Page 6.1, Col. 9)					
80.	Individual credit life (Page 6.1, Col. 10)					
81.	Individual other life (Page 6.1, Col. 11)					
82.						
83.	Group whole life (Page 6.2, Col. 2)					
84.	Group term life (Page 6.2, Col. 3)					
85.	Group universal life (Page 6.2, Col. 4)					
86.	Group variable life (Page 6.2, Col. 5)					
87.	Group variable universal life (Page 6.2, Col. 6)			ļ		
88.	Group credit life (Page 6.2, Col. 7)					
89.	Group other life (Page 6.2, Col. 8)					
90.	Group YRT mortality risk only (Page 6.2, Col. 9)					
91.	Individual deferred fixed annuities (Page 6.3, Col. 2)					
92.	Individual deferred indexed annuities (Page 6.3, Col. 3)	(935,390,267)		 		
93.	Individual deferred variable annuities with guarantees					
1	(Page 6.3, Col. 4)					
94.	Individual deferred variable annuities without					
1	guarantees (Page 6.3, Col. 5)			ļ		
95.	Individual life contingent payout (immediate and					
1	3 , (- 3 , ,					
96.	Individual other annuities (Page 6.3, Col. 7)			ļ		
97.	Group deferred fixed annuities (Page 6.4, Col. 2)					
98.	Group deferred indexed annuities (Page 6.4, Col. 3)			 		
99.	Group deferred variable annuities with guarantees		1	1	1]
1	(Page 6.4, Col. 4)			 		
100.	Group deferred variable annuities without guarantees					
1	(Page 6.4, Col. 5)					
101.	Group life contingent payout (immediate and					
1	annuitization) (Page 6.4, Col. 6)					
102.	Group other annuities (Page 6.4, Col. 7)			 		
103.	A & H-comprehensive individual (Page 6.5, Col. 2)					
104.						
105.	A & H-Medicare supplement (Page 6.5, Col. 4)					
106.	A & H-vision only (Page 6.5, Col. 5)					
100.	A & H-dental only (Page 6.5, Col. 6)					
	A & H-Federal employees health benefits plan (Page					
108.						
100	6.5, Col. 7)					
109.						
110.	A & H-Title XIX Medicaid (Page 6.5, Col. 9)					
111.	A & H-credit (Page 6.5, Col. 10)					
112.	A & H-disability income (Page 6.5, Col. 11)					
113.	A & H-long-term care (Page 6.5, Col. 12)					
114.	A & H-other (Page 6.5, Col. 13)			 		
115.	Aggregate of all other lines of business (Page 6, Col. 8)					
116.	Fraternal (Page 6, Col. 7)					
117.	Total (Page 6, Col. 1)	(935, 390, 267)				
	If a party to a merger, have the two most recent years			L compliante college de la marche de la marc	l	İ
	in a party to a mercer mave the two most recent years	or this exhibit been res	ıaıeu uue ıo a merger ir	i compliance with the di	SCHOSULE	



LIFE INSURANCE (STATE PAGE)(b)

Amulation Amul		NAIC Group Code 2658 BUSINESS I	N THE STATE C	F Grand Tota			- (STATE FA	•	DUI	RING THE YEAR			pany Code 17	7553
Personant and Personant an			1	2		Dividends to	Policyholders/Refunds	to Members			C	Claims and Benefits Pa	id	
Individual Use		Line of Rusiness	Annuities		Paid in Cash or	Applied to Pay Renewal	Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying	·		Death and	Matured	Surrender Values and Withdrawals	All Other	Total (Sum Columns 8 through 11)
1. Nousifie	Indivi		Contractations	Contractations	Lost on Deposit	1 Territario	1 chod	Other	(001.0141010)	7 till dity Delicito	Lindowillonto	TOT ETIC COTTE GOLD	Denento	unough 11)
Vinite			.]	l					.1		L			
Tem	2.													
Dimension Dime			1											
Solid Information Soli														
10]											
7. Variable inviersal														
B	7.													
9 Credit		Variable universal												
10														
Croup Is	10.								.					
Croup Is			1						1					
12 Wrote	Groun													
13 Term														
1														
15 Variable universal	14.	Universal												
16 Variable universal														
17. Credit														
18. Total Group Life														
Total Group Life														
Individual Annuties														
20 Fixed	Indivi							<u> </u>						
21 Indexed														
22 Variable with guarantees														
23														
24 Life contingent payout														
25. Other														
26														
Group Annuities														
27 Fixed														
28		Fixed												
29. Variable with quarantees									. [
30			1											
31. Life contingent payout			1						. [
32 Other (f) (g) (a) (d) (d) (d) (d) (d) (d) (d) (d) (d) (e) (e) (d) (d) (d) (e) (d) (d) (d) (e) (d) (d) (d) (e) (d) (d) (d) (e) (d) (e) (d) (e) (e) (e) (e) (e) (e) (e) (e) (e) (e			1											
33. Total Group Annuities			1											
Accident and Health 34 Comprehensive individual (d)														
34. Comprehensive individual (d)			1						1					
35 Comprehensive group (d) (e) (d) (e) (d) (e) (d) (e) (d) (e) (d) (e) (d) (e) (d) (e) (d) (e) (d) (e) (d) (e) (d) (e) (d) (e) (d) (e) (d) (e) (34	Comprehensive individual(d)								XXX	XXX	XXX		
36. Medicare Supplement (d) (e) (d) (e) (d) (e) (d) (e) (d) (e) (d) (e) (e) (d) (e)														
37. Vision only (d) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d) (e) (d) (e) (d) (e) (d) (e) (d) (e) (d) (e) (d) (e) (d) (e) (d) (e) (d) (e) (d) (e) (d) (e) (d) (e) (d) (e) (e) (d) (e)														
38. Dental only (d) (d) (d) (d) (d) (d) (d) (d) (e) (d) (e) (d) (e) (d) (e) (d) (e) (d) (e) (d) (e														
39. Federal Émployees Health Benefits Plan (d) (d) (e) (e) (d) (f) (f) (f) (d) (e) (f) (f) (f) (f) (f) (f) (f) (f) (f) (f														
40. Title XVIII Medicare (d) (e) (e) (f) (f) (f) (g) (g) (g) (g) (g) (g) (g) (g) (g) (g														
41. Title XIX Medicaid (d) XXX X														
42. Credit A&H XXX		Title XIX Medicaid(d)												
43. Disability income (d) 44. Long-term care (d) 45. Other health (d) 46. Total Accident and Health XXX XXX XXX XXX XXX XXX XXX														
44. Long-term care (d) XXX. XXX. XXX. 45. Other health (d) XXX. XXX. XXX. XXX. 46. Total Accident and Health XXX. XXX. XXX. XXX. XXX.														
45. Other health														
46. Total Accident and Health XXX XXX XXX														
			(c)				+		+	7///	7///	70//		

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

NAIC Gro	up Code 2658 Bl	JSINESS IN THE S	STATE OF	Grand Tota Direc		ts, Matured Endo	wments Incur	red and Annuity B	enefits		DURING T	HE YEAR	2023		IC Company Cod	e 17	7553
		13				Claims Settled D	urina Current	Year			22	Issue	d During Year	Other Chan	ges to In Force (Ne		ce December
			То	tals Paid		by Compromise		ount Rejected		Settled During urrent Year		23	24	25	26	27	28
			14 Number	15	16 Number	17	18 Number	19	20 Number	21	Unpaid	Number		Number		Number	
	Line of Business	Incurred During Current Year	of Pols/ Certs	Amount	of Pols/ Certs	Amount	of Pols/ Certs	Amount	of Pols/ Certs	Amount	December 31, Current Year	of Pols/ Certs	Amount	of Pols/ Certs	Amount	of Pols/ Certs	Amou
idual Life	Ellic of Business	Ourient real	OCITS	Amount	OCITS	Amount	OCITS	Amount	OCITS	Amount	Ourient real	OCITO	7 tillount	CCITO	7 anount	00110	741104
Industrial																	
Whole																	
	h secondary guarantees																
	ersal																
											· ·····	·					·····
Other Total Individu	(f)				·						· ····	·					
	Idi Liic	 	 		 		+		+		1	+		-		+	
Life									1			1					
Term					ļ						·					-	l
					ļ						·					-	l
	ersal																
	ersar																
	(f)	•															
Total Group I																	
ual Annuities	LIIC																
Fixed																	
	quarantees																
	out guarantees																
	nt payout																
	(f)				\ \ \			\ \ \									
Total Individu	ual Annuities																
Annuities																	
Indexed																	
Variable with	guarantees									<u></u>							
Variable with	out guarantees																
Life continge	nt payout																
	(f)																
Total Group A	Annuities		ļ														
ent and Health			1 1		l				1			1					
	ive individual(d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	· · · · · · · · · · · · · · · · · · · ·	·····				
	ive group(d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	· ······				-	
Medicare Sur	pplement(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	·	·····			-	·····
	(d)		XXX XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	· ······					·····
Dental only .	(d) loyees Health Benefits Plan(d)	XXXXXX	XXX	XXXXXX	XXX	XXX	XXX	XXX	XXX	XXX	XXXXXX	· ·····					
	edicare(d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXXXXX	XXX	1	l				l
	dicaid(d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1					
	dicaid(d)	XXXXXX	xxx	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	l				
	ome(d)		xxx	XXX	XXX	XXX	XXX	XXX	XXX	XXX	xxx	1					
	ire(d)	XXX	xxx	XXX	XXX	XXX		XXX		XXX	XXX						
Other health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
Total Accider		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	[
TOTAL												1					
	lit Life Insurance Loans less than or equal to 60	1								l .	1		1			1	

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

1. Individual Life - Other includes the following amounts related to Separate Account policies:

4. Group Annuities - Other includes the following amounts related to Separate Account policies:

Group Life - Other includes the following amounts related to Separate Account policies:
 Individual Annuities - Other includes the following amounts related to Separate Account policies:

Exhibit of Life Insurance

NONE

Exhibit of Life Insurance - Part 2

NONE

Exhibit of Life Insurance - Part 3

NONE

Exhibit of Life Insurance - Part 4

NONE

Exhibit of Life Insurance - Part 5

NONE

Exhibit of Life Insurance - Part 6

NONE

Exhibit of Life Insurance - Part 7

NONE

Exhibit of Life Insurance - Policies with Disability Provisions

NONE

EXHIBIT OF NUMBER OF POLICIES, CONTRACTS, CERTIFICATES, INCOME PAYABLE AND ACCOUNT VALUES IN FORCE FOR SUPPLEMENTARY CONTRACTS, ANNUITIES, ACCIDENT & HEALTH AND OTHER POLICIES SUPPLEMENTARY CONTRACTS

	COI I ELIMEN	ITANT CONTINACT	•		
		Ordi	nary	Gro	oup
		1	2	3	4
		Involving Life	Not Involving Life	Involving Life	Not Involving Life
		Contingencies	Contingencies	Contingencies	Contingencies
1.	In force end of prior year				
2.	Issued during year				
3.	Reinsurance assumed				
4.	Increased during year (net)				
5.	Increased during year (net)				
	Deductions during year:				
6.	Decreased (net)				
7.	Reinsurance ceded				
8.	Totals (Lines 6 and 7)				
9.	In force end of year (line 5 minus line 8)				
10.	Amount on deposit				(a)
11.	Income now payable				
12.	Amount of income payable	(a)	(a)	(a)	(a)

ANNUITIES

	Al	NNULLES			
		Ordi	nary	Gro	oup
		1	2	3	4
		Immediate	Deferred	Contracts	Certificates
1.	In force end of prior year				
2.	Issued during year				
3.	Reinsurance assumed				
4.	Increased during year (net)				
5.	Totals (Lines 1 to 4)				
	Deductions during year:				
6.	Decreased (net)				
7.	Reinsurance ceded				
8.	Totals (Lines 6 and 7)				
9.	In force end of year (line 5 minus line 8)				
	Income now payable:				
10.	Amount of income payable	(a)	XXX	XXX	(a)
	Deferred fully paid:				
11.	Account balance	XXX	(a)	XXX	(a)
	Deferred not fully paid:				
12.	Account balance	XXX	(a)	XXX	(a)

ACCIDENT AND HEALTH INSURANCE

			ACCIDENT AND	HEALTH INSURA	NCE		
		Gro	oup	Cr	edit	Ot	ther
		1	2	3	4	5	6
		Certificates	Premiums in Force	Policies	Premiums in Force	Policies	Premiums in Force
1.	In force end of prior year						
2.	Issued during year						
3.	Reinsurance assumed						
4.	Increased during year (net)		_XXX		YYY		XXX
5.	Totals (Lines 1 to 4)		XXX				XXX
	Deductions during year:						
6.	Conversions		xx	. ×		XXX	XXX
7.	Decreased (net)				XXX		XXX
8.	Reinsurance ceded		XXX				XXX
9.	Totals (Lines 6 to 8)		XXX		XXX		XXX
10.	In force end of year (line 5						
	minus line 9)		(a)		(a)		(a)

DEPOSIT FUNDS AND DIVIDEND ACCUMULATIONS

		1	2
			Dividend
		Deposit Funds	Accumulations
		Contracts	Contracts
1.	In force end of prior year		
2.	legued during year		
3.	Reinsurance assumed		
4.	Increased during year (net)		
5.	Totals (Lines 1 to 4)		
	Deductions During Year:		
6.	Decreased (net)		
7.	Reinsurance ceded		
8.	Totals (Lines 6 and 7)		
9.	In force end of year (line 5 minus line 8)		
10.	Amount of account balance	(a)	(a)

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

Interest Maintenance Reserve

NONE

Interest Maintenance Reserve - Amortization

NONE

Asset Valuation Reserve

NONE

Asset Valuation Reserve - Default Component

NONE

Asset Valuation Reserve - Equity Component

NONE

Asset Valuation Reserve - Replications (Synthetic) Assets

NONE

Schedule F - Claims

NONE

Schedule H - Part 1 - Analysis of Underwriting Operations

NONE

Schedule H - Part 2 - Reserves and Liabilities

NONE

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

NONE

Schedule H - Part 4 - Reinsurance

NONE

Schedule H - Part 5 - Health Claims

NONE

SCHEDULE S - PART 1 - SECTION 1

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

		rtonioaranio	7 recarried Elie integrance, 7 amande, Depocie i dide and Other i	Liabilitioo vi	teriode Elio or E	sidubility doi	tangonoloo, ana rtola	toa Bononto Liotoa b	y rtomourou compe	any ao on Boodinbon e	ri, Garront roar	
1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC					Type of	Type of				Reinsurance Payable	Modified	
Company	ID	Effective		Domiciliary	Reinsurance	Business	Amount of In Force at			on Paid and	Coinsurance	Funds Withheld
Code	Number	Date	Name of Reinsured	Jurisdiction	Assumed	Assumed	End of Year	Reserve	Premiums	Unpaid Losses	Reserve	Under Coinsurance
92738	42-1153896	10/01/2023	American Equity Investment Life Insurance Company	IA	COFW/I	IA	650,469,148	1, 127, 202, 242	650, 469, 148			
0299999. G	eneral Accour	nt - U.S. Affilia	tes - Other				650,469,148	1,127,202,242	650,469,148			82,226,452
0399999. To	otal General A	ccount - U.S.	Affiliates				650,469,148	1,127,202,242	650,469,148			82,226,452
0699999. To	otal General A	ccount - Non-	U.S. Affiliates									
0799999. To	otal General A	ccount - Affilia	ates				650,469,148	1,127,202,242	650,469,148			82,226,452
1099999. To	otal General A	ccount - Non-	Affiliates									
1199999. To	otal General A	ccount					650,469,148	1,127,202,242	650, 469, 148			82,226,452
1499999. To	otal Separate	Accounts - U.	S. Affiliates									
1799999. To	otal Separate	Accounts - No	n-U.S. Affiliates									
1899999. To	otal Separate	Accounts - Aff	iliates									
2199999. To	otal Separate	Accounts - No	n-Affiliates									
2299999. To	otal Separate	Accounts										
2399999. To	otal U.S. (Sun	n of 0399999,	0899999, 1499999 and 1999999)				650,469,148	1,127,202,242	650,469,148			82,226,452
2499999. To	otal Non-U.S.	(Sum of 06999	999, 0999999, 1799999 and 2099999)				, i	, ,	, , , , , , , , , , , , , , , , , , ,			, ,
9999999 - T	Totals	•		·	·	•	650,469,148	1,127,202,242	650,469,148			82,226,452

Schedule S - Part 1 - Section 2

NONE

Schedule S - Part 2

NONE

Schedule S - Part 3 - Section 1

NONE

Schedule S - Part 3 - Section 2

NONE

Schedule S - Part 4

NONE

Schedule S - Part 4 - Bank Footnote

NONE

Schedule S - Part 5

NONE

Schedule S - Part 5 - Bank Footnote

NONE

Schedule S - Part 6

NONE

Schedule S - Part 7

NONE

SCHEDULE T - PREMIUMS AND ANNUITY CONSIDERATIONS (b)

Allocated by States and Territories Life Contracts Accident and Health Insurance Premiums Total Active Including Policy, Membership Columns Life Insurance Annuity Other 2 through 5 Deposit-Type Premiums Consideration and Other Fees Considerations (b) Contracts Alabama ΑL Alaska N Arizona ΑZ 4. Arkansas California CA .N. 6. 7. Colorado СО Connecticut СТ N. DE 9. District of Columbia DC 10. FL 11 Georgia GΑ 12. Hawaii ΗΙ 13. Idaho ID 14. Illinois Ш 15. Indiana IN 16. lowa .. IΑ 17. KS 18. Kentucky ΚY 19. Louisiana LA 20. Maine Maryland 21. MD 22. Massachusetts MA 23. Michigan МІ MN 25. Mississippi 26. Missouri . MO 27. Montana МТ 28. Nebraska NF NV 30. New Hampshire NH 31. New Jersey NJ 32 New Mexico 33. New York . NY 34. 35. North Carolina North Dakota ND ОН 37 Oklahoma OK Oregon .. OR 39. Pennsylvania 40. Rhode Island RI 41 South Carolina 42. South Dakota SD 43. ΤN 44. Texas . ТХ 45. UT 46. Vermont Virginia .. VA 48 Washington WA West Virginia 49. WV 50. Wisconsin WI 51. Wyoming WY 52. American Samoa AS 53 Guam . GÜ Puerto Rico . PR 55. U.S. Virgin Islands VI 56. Northern Mariana Islands .. MP N. CAN 58. Aggregate Other Alien .. ОТ XXX 59. XXX 90. Reporting entity contributions for employee benefits Dividends or refunds applied to purchase paid-up additions and annuities..... 91. XXX 92. XXX 93. XXX 94. XXX 95. Totals (Direct Business).. XXX 96. Plus reinsurance assumed. XXX 650 469 148 650 469 148 97 Totals (All Business).. 650,469,148 650,469,148 XXX 98 Less reinsurance ceded. Totals (All Business) less Reinsurance Ceded 650,469,148 99 650,469,148 XXX **DETAILS OF WRITE-INS** 58001 XXX 58002 XXX 58003. XXX Summary of remaining write-ins for Line 58 from XXX 58999. 58998)(Line 58 above) XXX 9401 XXX 9402 XXX 9403. XXX 9498. 9499. 94 above) XXX

(a) Active Status Counts:

1. L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG..

No allocation was used.

^{4.} Q - Qualified - Qualified or accredited reinsurer. 2. R - Registered - Non-domiciled RRGs... 5. N - None of the above - Not allowed to write business in the state.

^{3.} E - Eligible - Reporting entities eligible or approved to write surplus lines in the state....

⁽b) Explanation of basis of allocation by states, etc., of premiums and annuity considerations

⁽c) Column 4 should balance with Exhibit 1, Lines 6.4, 10.4 and 16.4, Col. 6, or with Schedule H, Part 1, Line 1, indicate which: Exhibit 1, Lines 6.4, 10.4, and 16.4, Col. 6....

SCHEDULE T - PART 2

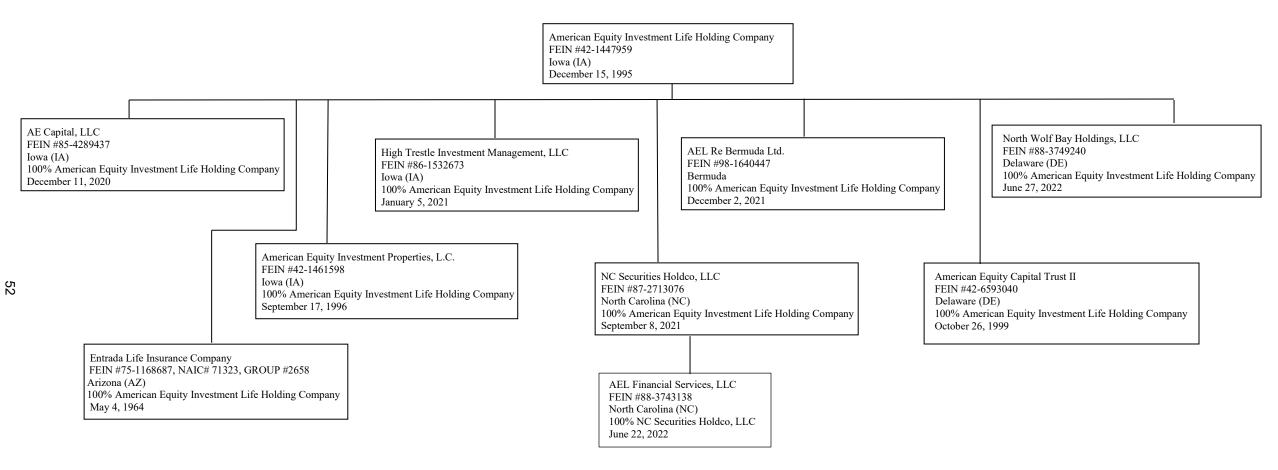
INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

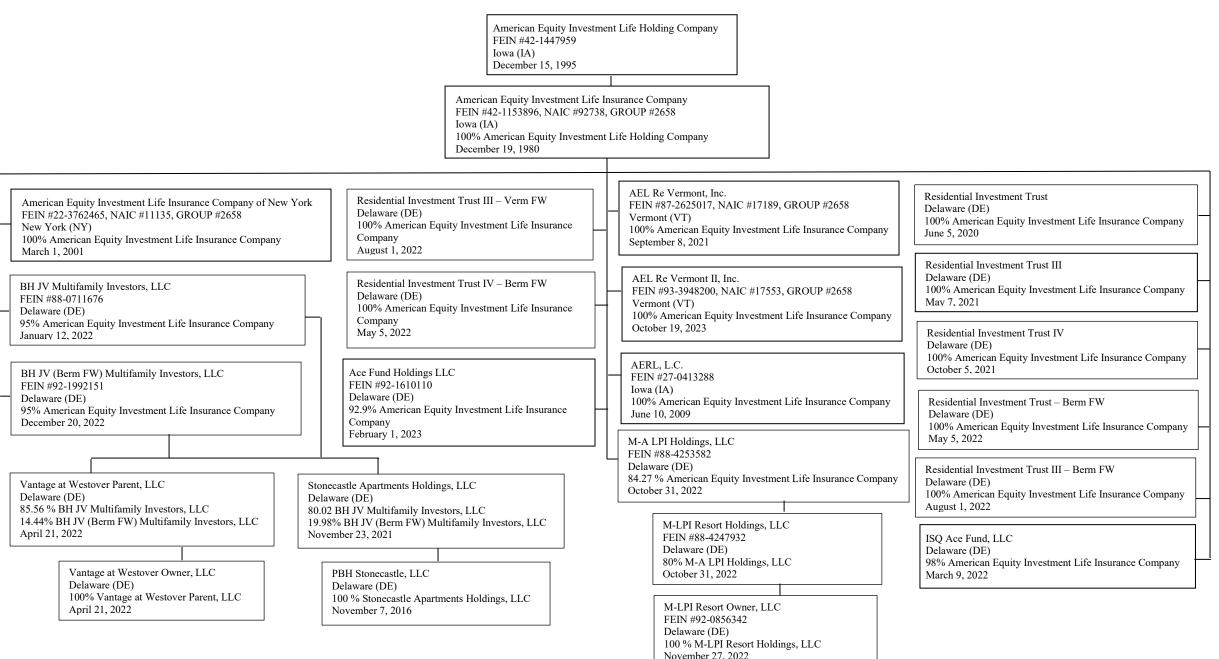
Direct Business Only

Materials States Electric Client Clien							iness Only		
Sales Sin				1	2	3 Disability	4 Long-Term	5	6
Salare, Dec. Nebrolagi N				Life	Annuities				
Alberton								Deposit-Type	-
A Marianes		States, Etc.		Individual)	Individual)	Individual)	Individual)	Contracts	l otals
A AFCROME	1.	Alabama	AL						
A Principation	2.	Alaska	AK						
6. Colorada CO 6. Colorada CO 7. Coverentad CO 8. Deberare DE 9. Diatrict of Columbia DG 10. Totala FL 11. Georgia GA 12. Harria HI 13. Sabra HI 14. Bilona II. 15. Indiana IN 16. Sona IA 17. Kanas KS 18. Kerucky KY 19. Louwana LA 10. Louwana LA 20. Malina ME 21. Majard MD 22. Masacusets MA 23. Malacusets MA 24. Minestral MN 25. Moliplan MI 26. Moscopp MS 27. Molifiella MT 28. Moscopp MS 39. Moscopp MS 30. Moscopp MS 30. Moscopp MS 30. Moscopp MS 30. Moscopp MS	3.	Arizona	ΑZ						
6. Colorada CO 6. Colorada CO 7. Coverentad CO 8. Deberare DE 9. Diatrict of Columbia DG 10. Totala FL 11. Georgia GA 12. Harria HI 13. Sabra HI 14. Bilona II. 15. Indiana IN 16. Sona IA 17. Kanas KS 18. Kerucky KY 19. Louwana LA 10. Louwana LA 20. Malina ME 21. Majard MD 22. Masacusets MA 23. Malacusets MA 24. Minestral MN 25. Moliplan MI 26. Moscopp MS 27. Molifiella MT 28. Moscopp MS 39. Moscopp MS 30. Moscopp MS 30. Moscopp MS 30. Moscopp MS 30. Moscopp MS	1	Arkaneae	ΔĐ						
Contraction									
7. Correlated CT 9. Dieteria Columbia 9. Dieteria C									
B. District of Coumbia DC	6.	Colorado	СО						
B. District of Columbia DC	7.	Connecticut	CT						
10	8.	Delaware	DE						
10	9.	District of Columbia	DC						
11 Gosrgia GA									
12 Hawaii									
13. Islando	11.	Georgia	GA						
14	12.	Hawaii	HI						
15 Indian	13.	ldaho	ID						
10	14.	Illinois	IL						
10	15	Indiana	IN						
17. Kansas KS									
18. Kertucky KY <td< th=""><th></th><th></th><th></th><th>•••••</th><th></th><th></th><th></th><th></th><th></th></td<>				•••••					
19. Louisiana LA 20. Maine ME 21. Maryland MD 22. Massachusetts MA 23. Michigan MI 24. Minnesota MN 25. Mississippi MS 26. Missouri MO 27. Mortana MT 28. Notraska NE 29. Nevada NV 30. New Hampshire NH 31. New Seriesy NJ 32. New Modo NM 33. New York NY 34. North Carolina NG 35. North Carolina NG 36. Orlo OH 37. Oklahoma OK 38. Oregon OR 39. Oregon OR 40. Rhode Island RI 41. South Dakota SD 43.									
20. Maine	18.	Kentucky	KY						
21. Maryland MD	19.	Louisiana	LA						
22 Massachusetts	20.	Maine	ME						
22 Massachusetts	21.	Maryland	MD						
23. Michigan		•							
24. Minnesota MN 25. Mississipj MS 26. Missour MO 27. Mortonara MT 28. Notraska NE 29. Nevada NV 30. New Hampshire NH 31. New Jersey NJ 32. New Mesido NM 33. New York NY 34. North Carolina NC 35. North Dakota ND 36. Ohio OH 37. Oklahome OK 38. Orgon OR 39. Pennsylvania PA 40. Rhode Island RI 41. South Carolina SC 42. South Dakota SD 43. Tennessee TN 44. Texas TX 45. Ush Ush 48. Washington WA 49. <									
25. Mississippi MS 26. Missour MO 27. Montana MT 28. Nebroaksa NE 29. Nevada NV 30. New Hampshire NH 31. New Jersey NJ 32. New Moxico NM 33. New York NY 4. North Carolina NC 35. North Dakota ND 36. Olici OH 37. Oklahoma OK 38. Oregon OR 39. Pennsylvaria PA 41. South Carolina SC 42. South Dakota SD 43. Tennessee TN 44. Texas TX 45. Utah UT 46. Vermont VT 47. Viginia VA 48. Washington WA 49. Wes	23.								
26. Missour MO 27. Montana MT 28. Nebraska NE 29. Nevada NV 30. New Hampshire NH 31. New Jersey NJ 32. New Moxico NM 33. New York NY 34. Noth Carolina NC 35. North Dakota ND 36. Ohio OH 37. Oklahoma OK 38. Orepon OR 39. Pennsylvania PA 40. Rhode Island RI 41. South Carolina SC 42. South Dakota SD 33. Tennessee TN 44. Texas TX 45. Usin UT 46. Vermont VT 47. Virginia VA 48. Washington WA 49. Wes	24.	Minnesota	MN						
27. Mortana MT 28. Nebraska NE 29. Nevada NV 30. New Hampshire NH 31. New Jersey NJ 32. New Moxico NM 33. New York NY 34. North Carolina NC 35. North Dakota ND 36. Ohio OH 37. Oklaboma OK 38. Orepon OR 39. Pennsylvania PA 40. Rhode Island RI 41. South Carolina SC 42. South Dakota SD 33. Tennessee TN 44. Texas TX 45. Utah UT 46. Vermont VT 47. Virginia VA 49. Vest Virginia VA 49. Vest Virginia VY 50.	25.	Mississippi	MS						
28 Nevada NV 29 Nevada NV 30 New Hampshire NH 31 New Jersey NJ 32 New Mexico NM 33 New York NY 34 North Carolina NC 35 North Dakota ND 36 Orloi OH 37 Oklahoma OK 38 Oregon OR 39 Pennsylvania PA 40 Rhode Island RI 41 South Carolina SC 42 South Carolina SC 42 South Carolina SC 43 Tennessee TN 44 Texas TX 45 Vernorit VT 47 Viginia VA 48 Washington WA 49 West Viginia WY 50 Wisconsin WI 51 Vuporing	26.	Missouri	МО						
28 Nevada NV 29 Nevada NV 30 New Hampshire NH 31 New Jersey NJ 32 New Mexico NM 33 New York NY 34 North Carolina NC 35 North Dakota ND 36 Orloi OH 37 Oklahoma OK 38 Oregon OR 39 Pennsylvania PA 40 Rhode Island RI 41 South Carolina SC 42 South Carolina SC 42 South Carolina SC 43 Tennessee TN 44 Texas TX 45 Vernorit VT 47 Viginia VA 48 Washington WA 49 West Viginia WY 50 Wisconsin WI 51 Vuporing	27	Montana	МТ						
29 Nevada NV 30 New Hempshire NH 31 New Jersey NJ 31 New Jersey NJ 32 New Mexico NM 33 New York NY 34 North Carolina NC 35 North Dakota ND 36 Ohio OH 37 Oklahoma OK 38 Oregon OR 39 Pennsylvania PA 40 Rhode Island RI 41 South Carolina SC 42 South Dakota SD 43 Tennessee TN 44 Texas TX 45 Utah UT 46 Vermont VT 47 Virginia VA 48 Washington WA 49 West Virginia WY 50 Wisconsin WI 51 Viyoring									
30. New Hampshire									
31. New Jersey NJ 32. New Mexico NM 33. New York NY 34. North Carolina NC 35. North Dakote ND 36. Ohio OH 37. Oklahoma OK 38. Oregon OR 39. Pennsylvania PA 40. Rhode Island RI 41. South Carolina SC 42. South Dakota SD 43. Tennessee TN 44. Texas TX 44. Texas TX 45. Utah UT 46. Vermont VT 47. Virginia VA 48. Washington WA 49. West Virginia WV 50. Wisconsin WI 51. Quam Quam 52. American Samoa AS 53.	29.	Nevada	NV						
32 New Mexico NM	30.	New Hampshire	NH						
33. New York NY 34. North Carolina NC 35. North Dakota ND 36. Ohio OH 37. Oklahoma OK 38. Oregon OR 39. Pennsylvania PA 40. Rhode Island RI 41. South Carolina SC 42. South Dakota SD 43. Tennessee TN 44. Texas TX 45. Utah UT 46. Vermont VT 47. Virginia VA 48. Washington WA 49. West Virginia WV 50. Wisconsin WI 51. Vamerican Samoa AS 53. Guam GU 54. Puerto Rico PR 55. U.S. Virgin Islands MP 57. Canada CAN	31.	New Jersey	NJ						
34. North Carolina NC 35. North Dakota ND 36. Ohio OH 37. Oklahoma OK 38. Oregon OR 39. Pennsylvania PA 40. Rhode Island RI 41. South Carolina SC 42. South Dakota SD 43. Tennessee TN 44. Texas TX 45. Utah UT 46. Vermont VT 47. Virginia VA 48. Washington WA 49. West Virginia WV 50. Wisconsin WI 51. Wyoming WY 52. American Samoa AS 53. Guam GU 54. Puerto Rico PR 55. U.S. Virgin Islands VI 56. Northern Mariana Islands MP 57. Canada CAN 58. Aggregate Other Allien OT	32.	New Mexico	NM						
34. North Carolina NC 35. North Dakota ND 36. Ohio OH 37. Oklahoma OK 38. Oregon OR 39. Pennsylvania PA 40. Rhode Island RI 41. South Carolina SC 42. South Dakota SD 43. Tennessee TN 44. Texas TX 45. Utah UT 46. Vermont VT 47. Virginia VA 48. Washington WA 49. West Virginia WV 50. Wisconsin WI 51. Wyoming WY 52. American Samoa AS 53. Guam GU 54. Puerto Rico PR 55. U.S. Virgin Islands VI 56. Northern Mariana Islands MP 57. Canada CAN 58. Aggregate Other Allien OT	33.		NY						
35. North Dakota ND 36. Ohio OH 37. Oklahoma OK 38. Oregon OR 39. Pennsylvania PA 40. Rhode Island RI 41. South Carolina SC 42. South Dakota SD 43. Tennessee TN 44. Texas TX 45. Utah UT 46. Vermont VT 47. Virginia VA 48. Washington WA 49. West Virginia WV 50. Wisconsin WI 51. Vyyoning WY 52. American Samoa AS 53. Guam GU 54. Puerto Rico PR 55. U.S. Virgin Islands VI 56. Northem Marianal Slands MP 57. Canada CAN 58. Aggregate Other Alien OT									
36. Ohio OH									
37. Oklahoma OK 38. Oregon OR 39. Pennsylvania PA 40. Rhode Island RI 41. South Carolina SC 42. South Dakota SD 43. Tennessee TN 44. Texas TX 45. Utah UT 46. Vermont VT 47. Virginia VA 48. Washington WA 49. West Virginia WV 50. Wisconsin WI 51. Wyoming WY 52. American Samoa AS 53. Guam GU 54. Puerto Rico PR 55. U.S. Virgin Islands VI 56. Northern Mariana Islands MP 57. Canada CAN 58. Aggregate Other Alien OT	35.	North Dakota	ND						
38. Oregon OR 39. Pennsylvania PA 40. Rhode Island RI 41. South Carolina SC 42. South Dakota SD 43. Tennessee TN 44. Texas TX 45. Utah UT 46. Vermont VT 47. Virginia VA 48. Washington WA 49. West Virginia WV 50. Wisconsin WI 51. Wyoming WY 52. American Samoa AS 53. Guam GU 54. Pueto Rico PR 55. U.S. Virgin Islands VI 56. Northern Mariana Islands MP 57. Canada CAN 58. Aggregate Other Alien OT	36.	Ohio	ОН						
39. Pennsylvania PA 40. Rhode Island RI 41. South Carolina SC 42. South Dakota SD 43. Tennessee TN 44. Texas TX 45. Utah UT 46. Vermont VT 47. Virginia VA 48. Washington WA 49. West Virginia WV 50. Wiscosia WI 51. Wyoming WY 52. American Samoa AS 53. Guam GU 54. Puerto Rico PR 55. U.S. Virgin Islands VI 66. Northern Mariana Islands MP 67. Canada CAN 58. Aggregate Other Alien OT	37.	Oklahoma	OK						
40. Rhode Island RI 41. South Carolina SC 42. South Dakota SD 43. Tennessee TN 44. Texas TX 45. Utah UT 46. Vermont VT 47. Virginia VA 48. Washington WA 49. West Virginia WV 50. Wisconsin WI 51. Wyoming WY 52. American Samoa AS 53. Guam GU 54. Puerto Rico PR 55. U.S. Virgin Islands VI 56. Northern Mariana Islands MP 57. Canada CAN 58. Aggregate Other Alien OT	38.	Oregon	OR						
40. Rhode Island RI 41. South Carolina SC 42. South Dakota SD 43. Tennessee TN 44. Texas TX 45. Utah UT 46. Vermont VT 47. Virginia VA 48. Washington WA 49. West Virginia WV 50. Wisconsin WI 51. Wyoming WY 52. American Samoa AS 53. Guam GU 54. Puerto Rico PR 55. U.S. Virgin Islands VI 56. Northern Mariana Islands MP 57. Canada CAN 58. Aggregate Other Alien OT	39.	Pennsylvania	PA						
41. South Carolina SC 42. South Dakota SD 43. Tennessee TN 44. Texas TX 45. Utah UT 46. Vermont VT 47. Virginia VA 48. Washington WA 49. West Virginia WV 50. Wisconsin WI 51. Wyoming WY 52. American Samoa AS 53. Guam GU 54. Puerto Rico PR 55. U.S. Virgin Islands VI 56. Northern Mariana Islands MP 57. Canada CAN 58. Aggregate Other Alien OT		•							
42. South Dakota SD 43. Tennessee TN 44. Texas TX 45. Utah UT 46. Vermont VT 47. Virginia VA 48. Washington WA 49. West Virginia WV 50. Wisconsin WI 51. Wyoming WY 52. American Samoa AS 53. Guam GU 54. Puerto Rico PR 55. U.S. Virgin Islands VI 56. Northern Mariana Islands MP 57. Canada CAN 58. Aggregate Other Alien OT									
43. Tennessee TN 44. Texas TX 45. Utah UT 46. Vermont VT 47. Virginia VA 48. Washington WA 49. West Virginia WV 50. Wisconsin WI 51. Wyoming WY 52. American Samoa AS 53. Guam GU 54. Puerto Rico PR 55. U.S. Virgin Islands VI 56. Northern Mariana Islands MP 57. Canada CAN 58. Aggregate Other Alien OT									
44. Texas TX 45. Utah UT 46. Vermont VT 47. Virginia VA 48. Washington WA 49. West Virginia WV 50. Wisconsin WI 51. Wyoming WY 52. American Samoa AS 53. Guam GU 54. Puerto Rico PR 55. U.S. Virgin Islands VI 56. Northern Mariana Islands MP 57. Canada CAN 58. Aggregate Other Alien OT									
45. Utah UT	43.	Tennessee	TN						
46. Vermont VT 47. Virginia VA 48. Washington WA 49. West Virginia WV 50. Wisconsin WI 51. Wyoming WY 52. American Samoa AS 53. Guam GU 54. Puerto Rico PR 55. U.S. Virgin Islands VI 56. Northern Mariana Islands MP 57. Canada CAN 58. Aggregate Other Alien OT	44.	Texas	TX						
47. Virginia VA 48. Washington WA 49. West Virginia WV 50. Wisconsin WI 51. Wyoming WY 52. American Samoa AS 53. Guam GU 54. Puerto Rico PR 55. U.S. Virgin Islands VI 56. Northern Mariana Islands MP 57. Canada CAN 58. Aggregate Other Alien OT	45.	Utah	UT						
47. Virginia VA 48. Washington WA 49. West Virginia WV 50. Wisconsin WI 51. Wyoming WY 52. American Samoa AS 53. Guam GU 54. Puerto Rico PR 55. U.S. Virgin Islands VI 56. Northern Mariana Islands MP 57. Canada CAN 58. Aggregate Other Alien OT	46.	Vermont	VT						
48. Washington WA 49. West Virginia WV 50. Wisconsin WI 51. Wyoming WY 52. American Samoa AS 53. Guam GU 54. Puerto Rico PR 55. U.S. Virgin Islands VI 56. Northern Mariana Islands MP 57. Canada CAN 58. Aggregate Other Alien OT									
49. West Virginia WV 50. Wisconsin WI 51. Wyoming WY 52. American Samoa AS 53. Guam GU 54. Puerto Rico PR 55. U.S. Virgin Islands VI 56. Northern Mariana Islands MP 57. Canada CAN 58. Aggregate Other Alien OT		· ·							
50. Wisconsin WI 51. Wyoming WY 52. American Samoa AS 53. Guam GU 54. Puerto Rico PR 55. U.S. Virgin Islands VI 56. Northern Mariana Islands MP 57. Canada CAN 58. Aggregate Other Alien OT		_							
51. Wyoming WY 52. American Samoa AS 53. Guam GU 54. Puerto Rico PR 55. U.S. Virgin Islands VI 56. Northern Mariana Islands MP 57. Canada CAN 58. Aggregate Other Alien OT		· ·							
52. American Samoa AS 53. Guam GU 54. Puerto Rico PR 55. U.S. Virgin Islands VI 56. Northern Mariana Islands MP 57. Canada CAN 58. Aggregate Other Alien OT	50.								
53. Guam GU	51.	Wyoming	WY						
53. Guam GU 54. Puerto Rico PR 55. U.S. Virgin Islands VI 56. Northern Mariana Islands MP 57. Canada CAN 58. Aggregate Other Alien OT	52.	American Samoa	AS						
54. Puerto Rico PR 55. U.S. Virgin Islands VI 56. Northern Mariana Islands MP 57. Canada CAN 58. Aggregate Other Alien OT	53.	Guam	GU						
55. U.S. Virgin Islands VI 56. Northern Mariana Islands MP 57. Canada CAN 58. Aggregate Other Alien OT									
56. Northern Mariana Islands MP				•••••					
57. Canada		-							
58. Aggregate Other Alien	56.	Northern Mariana Islands	MP						
	57.	Canada	CAN						
	58.	Aggregate Other Alien	ОТ						
	59.	Total							

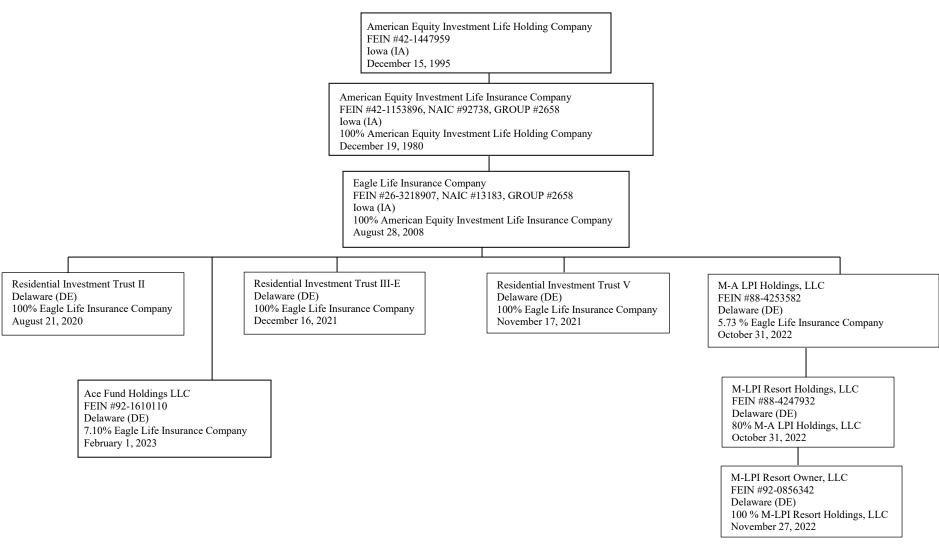
SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP PART 1 - ORGANIZATIONAL CHART



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



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



SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

PART TA - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM															
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
											Type	If			
											of Control	Control			
											(Ownership,	is		Is an	
						Name of Securities			Relation-		Board.	Owner-		SCA	
						Exchange		Domi-	ship		Management,	ship		Filing	
		NAIC				if Publicly Traded	Names of	ciliary	to		Attorney-in-Fact,	Provide		Re-	
Group		Company	ID	Federal		(U.S. or	Parent. Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence,	Percen-	Ultimate Controlling	auired?	
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Yes/No)	*
Code	Gloup Name	Code	Nullibel	NOOD	CIN	international)	AMERICAN EQUITY INVESTMENT LIFE HOLDING	tion	Littly	(Name of Entity/Ferson)	Other)	lage	Littity(les)/Ferson(s)	(163/110)	
			42-1447959	3981379	0001039828	NEW YORK STOCK EXCHANGE .	COMPANY	IA	UIP	SHAREHOLDERS	Ownership		SHAREHOLDERS	NO	
			42-144/333	0301073	0001033020	INCH TOTAL STOCK EXCENNEL.	AMERICAN EQUITY INVESTMENT LIFE INSURANCE	1/1	011	AMERICAN EQUITY INVESTMENT LIFE HOLDING	Owner Strip		AMERICAN EQUITY INVESTMENT LIFE HOLDING	١٧٠	
. 2658	AMERICAN EQUITY INVESTMENT GROUP	92738	42-1153896				COMPANY	IA	UDP	COMPANY	Ownership		COMPANY	NO	
. 2000	THE TOTAL EQUITY THE CONTENT OF THE	02.00					AMERICAN EQUITY INVESTMENT LIFE INSURANCE		05	AMERICAN EQUITY INVESTMENT LIFE INSURANCE			AMERICAN EQUITY INVESTMENT LIFE HOLDING		
. 2658	AMERICAN EQUITY INVESTMENT GROUP	11135	22-3762465				COMPANY OF NEW YORK	NY	I A	COMPANY	Ownership		COMPANY	NO	
										AMERICAN EQUITY INVESTMENT LIFE INSURANCE			AMERICAN EQUITY INVESTMENT LIFE HOLDING		
. 2658	AMERICAN EQUITY INVESTMENT GROUP	13183	26-3218907				EAGLE LIFE INSURANCE COMPANY	IA	IA	COMPANY	Ownership	100.000	COMPANY	NO	
										AMERICAN EQUITY INVESTMENT LIFE INSURANCE			AMERICAN EQUITY INVESTMENT LIFE HOLDING	i	
. 2658	AMERICAN EQUITY INVESTMENT GROUP	17189	87-2625017				AEL RE VERMONT INC	VT	IA	COMPANY	Ownership	100.000	COMPANY	NO	
										AMERICAN EQUITY INVESTMENT LIFE INSURANCE	L		AMERICAN EQUITY INVESTMENT LIFE HOLDING		
. 2658	AMERICAN EQUITY INVESTMENT GROUP	17553	93-3948200				AEL RE VERMONT II INC	VT	RE	COMPANY	Ownership		COMPANY	NO	
2050	WEDLOW FOURTY WESTERN ADOLD	7,000	75 4400007				ENERGIA LIFE HIGHBANGE COMBANY			AMERICAN EQUITY INVESTMENT LIFE HOLDING		400 000	AMERICAN EQUITY INVESTMENT LIFE HOLDING		
. 2658	AMERICAN EQUITY INVESTMENT GROUP	71323	75–1168687				ENTRADA LIFE INSURANCE COMPANY	AZ	I A	COMPANY	Ownership	100.000	COMPANY	N0	
			27-0413288				AERL. LC	IA	IA	COMPANY	Ownership		COMPANY	NO	
			21-0413200				ACNL, LU	IA	۱۸	AMERICAN EQUITY INVESTMENT LIFE INSURANCE	owner snrp	100.000	AMERICAN EQUITY INVESTMENT LIFE HOLDING		
			88-0711676				BH JV MULTIFAMILY INVESTORS. LLC	DE	NIA	COMPANY	Ownership	95.000	COMPANY	NO	
			00-0711070				DIT 3V WOLTH AWILL INVESTORS, LEC	DL		COWII AIVI	Owner Strip		AMERICAN EQUITY INVESTMENT LIFE HOLDING	١٧٠٠	
							VANTAGE AT WESTOVER PARENT, LLC	DE	NIA	BH JV MULTIFAMILY INVESTORS. LLC	Ownership	85.560	COMPANY	NO	
							William William Franchis			Bit of moeth functions, eec	omici dirip		AMERICAN EQUITY INVESTMENT LIFE HOLDING		
		l					STONECASTLE APARTMENTS HOLDINGS. LLC	DE	NI A	BH JV MULTIFAMILY INVESTORS. LLC	Ownership	80.020	COMPANY	NO	
										AMERICAN EQUITY INVESTMENT LIFE INSURANCE			AMERICAN EQUITY INVESTMENT LIFE HOLDING	1	
							RESIDENTIAL INVESTMENT TRUST	DE	NI A	COMPANY	Ownership	100.000	COMPANY	NO	
										AMERICAN EQUITY INVESTMENT LIFE INSURANCE			AMERICAN EQUITY INVESTMENT LIFE HOLDING	i	
							RESIDENTIAL INVESTMENT TRUST III	DE	NI A	COMPANY	Ownership		COMPANY	NO	
							DECIDENTIAL INVESTMENT TOUGH IV	DE		AMERICAN EQUITY INVESTMENT LIFE INSURANCE		400 000	AMERICAN EQUITY INVESTMENT LIFE HOLDING		
							RESIDENTIAL INVESTMENT TRUST IV	DE	NIA	COMPANY	Ownership	100.000	COMPANY	N0	
							RESIDENTIAL INVESTMENT TRUST - BERM FW	DE	NIA	COMPANY	Ownership		COMPANY	NO	
							THEODERTIAL INVESTMENT THOOT BETWEEN THE	DL		AMERICAN EQUITY INVESTMENT LIFE INSURANCE	owner strip		AMERICAN EQUITY INVESTMENT LIFE HOLDING	١٩٥	
							RESIDENTIAL INVESTMENT TRUST III - BERM FW .	DE	NI A	COMPANY	Ownership		COMPANY	NO	
										AMERICAN EQUITY INVESTMENT LIFE INSURANCE			AMERICAN EQUITY INVESTMENT LIFE HOLDING		
							RESIDENTIAL INVESTMENT TRUST IV - BERM FW .	DE	NI A	COMPANY	Ownership		COMPANY	NO	
			1							AMERICAN EQUITY INVESTMENT LIFE INSURANCE			AMERICAN EQUITY INVESTMENT LIFE HOLDING		
							RESIDENTIAL INVESTMENT TRUST III - VERM FW .	DE	NI A	COMPANY	Ownership		COMPANY	NO	
							100 105 500 110			AMERICAN EQUITY INVESTMENT LIFE INSURANCE	l	00.005	AMERICAN EQUITY INVESTMENT LIFE HOLDING		
							ISQ ACE FUND, LLC	DE	NIA	COMPANY	Ownership	98.000	COMPANY	N0	
			92-1992151				BH JV (BERM FW) MULTIFAMILY INVESTORS, LLC .	DE	NIA	COMPANY	Ownership	95.000	AMERICAN EQUITY INVESTMENT LIFE HOLDING	NO	
			32-1332 IJ				DITOV (DEIM FW) MOLITFAMILI HAVESTORS, LLC .	UE	NIA	AMERICAN EQUITY INVESTMENT LIFE INSURANCE	Owner SITIP		AMERICAN EQUITY INVESTMENT LIFE HOLDING		
			92-1610110				ACE FUND HOLDINGS LLC	DE	NIA	COMPANY	Ownership	92.900	COMPANY	NO	
										BH JV (BERM FW) MULTIFAMILY INVESTORS, LLC			AMERICAN EQUITY INVESTMENT LIFE HOLDING		
l							VANTAGE AT WESTOVER PARENT, LLC	DE	NI A		Ownership	14.440	COMPANY	NO	
							,						AMERICAN EQUITY INVESTMENT LIFE HOLDING		
							VANTAGE AT WESTOVER OWNER, LLC	DE	NIA	VANTAGE AT WESTOVER PARENT, LLC	Ownership		COMPANY	NO	
			1							BH JV (BERM FW) MULTIFAMILY INVESTORS, LLC			AMERICAN EQUITY INVESTMENT LIFE HOLDING		
							STONECASTLE APARTMENTS HOLDINGS, LLC	DE	NIA		Ownership	19.980	COMPANY	NO	
											L		AMERICAN EQUITY INVESTMENT LIFE HOLDING		
							PBH STONECASTLE, LLC	DE	NI A	STONECASTLE APARTMENTS HOLDINGS, LLC AMERICAN EQUITY INVESTMENT LIFE INSURANCE	Ownership	100.000	COMPANY	NO	
			00 4050500				MALDI HOLDINOS ILIO	סר	NI A		0	04 070	AMERICAN EQUITY INVESTMENT LIFE HOLDING	NC.	
			88-4253582				M-A LPI HOLDINGS, LLC	DE	NI A	COMPANY	Ownership	84.270	COMPANY	NU	

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
											Type	If			
											of Control	Control			
											(Ownership,	is		Is an	
						Name of Securities			Relation-		Board.	Owner-		SCA	
						Exchange		Domi-	ship		Management,	ship		Filing	
		NAIG					N 6	-				- 1			
		NAIC				if Publicly Traded	Names of	ciliary		5: " 6 : " 11	Attorney-in-Fact,	Provide		Re-	
Group		Company	ID	Federal		(U.S. or	Parent, Subsidiaries	Loca-		Directly Controlled by	Influence,	Percen-	Ultimate Controlling	quired?	
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Yes/No)	*
													AMERICAN EQUITY INVESTMENT LIFE HOLDING		
							RESIDENTIAL INVESTMENT TRUST II	DE	NI A	EAGLE LIFE INSURANCE COMPANY	Ownership	100.000	COMPANY	NO	
													AMERICAN EQUITY INVESTMENT LIFE HOLDING	G	
							RESIDENTIAL INVESTMENT TRUST III-E	DE	NI A	EAGLE LIFE INSURANCE COMPANY	Ownership	100.000	COMPANY		
													AMERICAN EQUITY INVESTMENT LIFE HOLDING		
							RESIDENTIAL INVESTMENT TRUST V	DE	NI A	EAGLE LIFE INSURANCE COMPANY	Ownership	100.000	COMPANY	NO	
													AMERICAN EQUITY INVESTMENT LIFE HOLDING		
			88-4253582				M-A LPI HOLDINGS, LLC	DE	NI A	EAGLE LIFE INSURANCE COMPANY	Ownership	5.730	COMPANY	NO	
													AMERICAN EQUITY INVESTMENT LIFE HOLDING		
			92-1610110				ACE FUND HOLDINGS LLC	DE	NI A	EAGLE LIFE INSURANCE COMPANY	Ownership	7.100	COMPANY	NO	
													AMERICAN EQUITY INVESTMENT LIFE HOLDING		
			88-4247932				M-LPI RESORT HOLDINGS, LLC	DE	NI A	M-A LPI HOLDINGS, LLC	Ownership	80.000	. COMPANY		
													AMERICAN EQUITY INVESTMENT LIFE HOLDING	G	
			92-0856342				M-LPI RESORT OWNER, LLC	DE	NI A	M-LPI RESORT HOLDINGS, LLC	Ownership	100.000	COMPANY	NO	
			05 4000407				15 01B1711 11 0		NΙΔ	AMERICAN EQUITY INVESTMENT LIFE HOLDING		400.000	AMERICAN EQUITY INVESTMENT LIFE HOLDING		
			85-4289437				AE CAPITAL, LLC	IA	NIA	COMPANY	Ownership	100.000	COMPANY	NO	
							AFI DE DEDINOL LED	D		AMERICAN EQUITY INVESTMENT LIFE HOLDING		400.000	AMERICAN EQUITY INVESTMENT LIFE HOLDING		
			98-1640447				AEL RE BERMUDA LTD	BMU	IA		Ownership	100.000	COMPANY		
			40.0500040				AMERICAN EQUITY CAPITAL TRUST II	DE	NII 4	AMERICAN EQUITY INVESTMENT LIFE HOLDING COMPANY		400.000	AMERICAN EQUITY INVESTMENT LIFE HOLDING		
			42-6593040				AMERICAN EQUITY CAPITAL TRUST IT	DE	NI A	AMERICAN EQUITY INVESTMENT LIFE HOLDING	Ownership	100.000	COMPANY	NO	
			42-1461598				AMERICAN EQUITY INVESTMENT PROPERTIES. L.C.	IA	NI A		0h:	100.000			
			42-1401098				AMERICAN EQUIT INVESTMENT PROPERTIES, L.C.	IA	NI A	COMPANY	Ownership		COMPANY AMERICAN EQUITY INVESTMENT LIFE HOLDING		
			86-1532673				HIGH TRESTLE INVESTMENT MANAGEMENT. LLC	IA	NIA	COMPANY	Ownership	100.000			
			00-1002073				HIGH INESILE HIVESIMENI MANAGEMENI, LLC	IA	NIA	AMERICAN EQUITY INVESTMENT LIFE HOLDING	Owner SITIP		COMPANY		
			88-3749240				NORTH WOLF BAY HOLDINGS. LLC	DE	NIA	COMPANY	Ownership	100.000			
			00-3/49240				INUNIN HULF DAT NULUINGS, LLC	DE	NI A	AMERICAN EQUITY INVESTMENT LIFE HOLDING	Ownership		COMPANY	NU	
			87-2713076				NC SECURITIES HOLDCO. LLC	NC	NIA	COMPANY	Ownership	100.000	COMPANY		
			01-21 130/0				NU SECUNITIES MULDOU, LLC	NO	NI A	CUMPAINT	Owner Strip		AMERICAN EQUITY INVESTMENT LIFE HOLDING		
			88-3743138				AEL FINANCIAL SERVICES, LLC	NC	NIA	NC SECURITIES HOLDCO. LLC	Ownership	100.000		NO	
			00-3/43138				AEL FINANCIAL SERVICES, LLC	NO	NI A	NO SECONTITES MULDOU, LLC	Owner Strip		COMPANY	NU	
					1			1							

Asterisk	Explanation	

SCHEDULE Y

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

1 2 3 4 5 6 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			174141	- OUIVIIVIA			110 1107 10	7110110 11	, ,	<u></u>	.,		
NAIC Company Number Solutions of Insurers and Parent, Shareholder Dividends Contributions Offiner I IFE HIXDING CORPAN ACTION EQUITY INVESTMENT LIFE INSURANCE CORPAN	1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company ID Number Subsidiaries or Affiliates Olividends Contributions Other investment Code Company Agreements and Parent, Subsidiaries or Affiliates Olividends Committees of Margage Loans or Other investment Code Company Agreements and Service Contracts Serv							Income/						
NAIC Company ID Number Subsidiaries or Affiliates Olividends Contributions Other investment Code Company Agreements and Parent, Subsidiaries or Affiliates Olividends Committees of Margage Loans or Other investment Code Company Agreements and Service Contracts Serv							(Disbursements)						
NAIC COMPANY COMPANY COLOR ID Number 1 Shareholder Company Code 1 Number 2 Shareholder Company Code 1 Number 2 Shareholder Company Code 1 Number 2 Shareholder Code 1 Number 2 Shareholder Company Code 1 Number 2 Shareholder Code 1 Number 2 Shareholder Company Code 1 Number 2 Shareholder Code 1 Number 2 Shareho						Purchases, Sales							Reinsurance
NAIC Corporal ID Names of Insurers and Parent, Subsidiaries or Affiliates Code Company Number Code Company Number Subsidiaries or Affiliates Subsidiaries or						or Exchanges of			Income/		Any Other Material		
NAIC Company ID Names of Insurers and Parent, Code Visuable Company Code Visuable Company Code Visuable Company Code Visuable Company Code Visuable Company Code Visuable Company Code Visuable Company Code Visuable Company Code Visuable Company Code Visuable Company Code Visuable Company Code Visuable Company Code Visuable						Loans Securities					Activity Not in the		
Company In Code Number Substitution Shareholder Capital Order	NAIC							Management			Ordinary Course of		
Code Number Subsidiaries or Affiliates Dividends Dividends Contributions Other Investments Affiliates Service Contracts Agreements Subsidiaries or Affiliates Company Comp		ID	Names of Insurers and Parent	Shareholder	Capital		the Reposit of any	Agrooments and			the Insurer's		
42-147899 MERICAN EQUITY INVESTIGNT LIFE HOLDING COMPAY 92738 42-1153896 MERICAN EQUITY INVESTIGNT LIFE INSURANCE (20,000,000) 92738 42-1153896 MERICAN EQUITY INVESTIGNT LIFE INSURANCE (20,000,000) 92738 42-1153896 MERICAN EQUITY INVESTIGNT LIFE INSURANCE (20,000,000) 92738 117553 93-3948200 AEL RE VERIONT II INC 20,000,000 (246,573) 1187,557,478 (207,310,905) (11,127,202,242) 92738 1187,557,478 (246,573) 1187,557,478 (207,310,905) (11,127,202,242)					Capital	Other Investments	Affiliate (a)	Agreements and		*		Totala	
9.92738 42-1153896 ALERICAN EQUITY INVESTMENT LIFE INSURANCE COUPANY (207,310,905) 1,127,202,242 (207,310,905) (1,127,202,242 (207,310,905) (1,127,202,242 (207,310,905) (1,127,202,242 (207,310,905) (1,127,202,242 (207,310,905) (1,127,202,242 (207,310,905) (1,127,202,242 (207,310,905) (1,127,202,242 (207,310,905) (1,127,202,242 (207,310,905) (1,127,202,242 (207,310,905) (1,127,202,242 (207,310,905) (1,127,202,242 (207,310,905) (1,127,202,242 (207,310,905) (1,127,202,242 (207,310,905) (207,310,905) (1,127,202,242 (207,310,905) (20	Code			Dividends	Contributions	Other investments	Allillate(s)	Service Contracts	Agreements		Business	Totals	raken/(Liability)
Martin M		. 42-144/959											
COMPANY C.20.000,000	02738	42-1153896											
93-3948200 AEL RE VERMONT II INC 20,000,000 (246,573) 187,557,478 (226,573) 20,7310,905 (1,127,202,242) 20,000,000 (266,573) 20,000 (266,573) 20,000 (266,573) 20,000 (266,573) 20,000 (266,573) 20,000 (266,573) 20,000 (266,573) 20,000 (266,573) 20,000 (266,573) 20,000 (266,573) 20,000 (266,573) 20,000 (266,573) 20,000 (266,573) 20,000 (266,573) 20,000 (266,573) 20,000 (266,573) 20,000 (266,573) 20,000 (266,573) 20,000 (266,573	02700	. 42 1100000			(20, 000, 000)			246 572	(107 557 470)			(207 210 005)	1 107 202 242
	47550	00.0040000	AEL DE VEDNONT LL INO		(20,000,000)	•••••		240,373	(107,557,470)	• • • • • • • • • • • • • • • • • • • •		(207,310,903)	(1, 107, 202, 242)
999999 Coltrol Totals	1/553	. 93-3948200	AEL RE VERMONT IT INC		20,000,000			(246,5/3)	187,557,478			207,310,905	(1,127,202,242)
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999999 Control Totals													
999999 Control Totals XXX													
	9999999 Co	ontrol Totals								XXX			

SCHEDULE Y

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

	PART 3 - ULTIMATE CONTROL	LING PARTY AND LISTING OF	OTHER U.S. INS	UKANCI	E GROUPS OR ENTITIES UNDER	THAT ULTIMATE CONTROLLING F	ARTY'S CON	IROL
Disclaimer of Control. Affiliation of Column 2 Percentage Column 5 Over Column 6 Over	1	2	3	4	5	6	7	8
Ownership Percentage Column 2 of Control\ Affiliation of Column 2 of Column 2 of Column 1 (Yes/No) AMERICAN EQUITY INVESTMENT LIFE INSURANCE COMPANY ALERICAN EQUITY INVESTMENT LIFE INSURANCE COMPANY AMERICAN EQUITY INVESTMENT LIFE INSURANCE COMPANY OF AMERICAN EQUITY INVESTMENT LIFE INSURANCE CO				Granted				Granted
Affiliation of Column 2 or Column 1 overship Percentage Column 2 or Column 1 overship Number 1 overship Percentage Column 2 or Column 1 overship Percentage Column 2 or Column 1 overship Number 1 overship Percentage Column 1 overship Number 1 overship Percentage Column 2 or Column 1 overship Number 1				Disclaimer				Disclaimer
Ownership Percentage Column 2 of Column 1 (Yes/No) Insurers in Holding Company AMERICAN EQUITY INVESTMENT LIFE INSURANCE COMPANY AEL RE VERMONT INC. AEL RE VERMONT INC. AEL RE VERMONT IN INVESTMENT LIFE INSURANCE COMPANY AERICAN EQUITY INVESTMENT LIFE INSURANCE COMPANY AMERICAN EQUIT				of Control\				of Control\
Insurers in Holding Company AMERICAN EQUITY INVESTMENT LIFE INSURANCE COMPANY ARE RE VERMONT INC. ARE RE VERMONT II INC. AMERICAN EQUITY INVESTMENT LIFE INSURANCE COMPANY AMERICAN EQUITY INVESTMENT LIFE HOLDING COMPANY AMERICAN EQUITY INVESTMENT LIFE INSURANCE COMPANY AMERICAN EQUITY INVESTMENT LIFE HOLDING COMPANY AMERICAN EQUITY INVESTMENT LIFE HOLDING COMPANY AMERICAN EQUITY INVESTMENT LIFE HOLDING COMPANY AMERICAN EQUITY INVESTMENT LIFE HOLDING COMPANY AMERICAN EQUITY INVESTMENT LIFE HOLDING COMPANY AMERICAN EQUITY INVESTMENT LIFE HOLD				Affiliation of				Affiliation of
Insurers in Holding Company AMERICAN EQUITY INVESTMENT LIFE INSURANCE COMPANY ALE RE VERMONT INC. ALE RE VERMONT INVESTMENT LIFE INSURANCE COMPANY ALE RE VERMONT INVESTMENT LIFE INSURANCE COMPANY ALE RE VERMONT INVESTMENT LIFE INSURANCE COMPANY ALE RE VERMONT INVESTMENT LIFE INSURANCE COMPANY ALE RE VERMONT INVESTMENT LIFE INSURANCE COMPANY ALE RE VERMONT INVESTMENT LIFE INSURANCE COMPANY ALE RE VERMONT INVESTMENT LIFE INSURANCE COMPANY ALE RE VERMONT LIFE INSURANCE COMPANY ALE RE VERMONT LIFE INSURANCE COMPANY ALE RE VERMONT LIFE INSURANCE COMPANY ALE RE VERMONT LIFE INSURANCE COMPANY ALE RE VERMONT LIFE INSURANCE COMPANY ALE RE VERMONT LIFE INSURANCE COMPANY ALE RE VERMONT LIFE INSURANCE COMPANY ALE RE VERMONT LIFE INSURANCE COMPANY ALE RE VERMONT LIFE INS			Ownership	Column 2			Ownership	Column 5
Insurers in Holding Company Owners with Greater Than 10% Ownership AMERICAN EQUITY INVESTMENT LIFE INSURANCE COMPANY AMERICAN EQUITY INVESTMENT LIFE INSURAN			Percentage	Over			Percentage	Over
AMERICAN EQUITY INVESTMENT LIFE INSURANCE COMPANY AMERICAN EQUITY INVESTMENT LIFE HOLDING COMPANY AMERICAN EQUITY INVESTMENT LIFE INSURANCE COMPANY AMERICAN EQUITY INVESTMENT LIFE INSURANCE COMPANY AMERICAN EQUITY INVESTMENT LIFE HOLDING COMPANY AMERICAN EQUITY INVESTMENT LIFE INSURANCE COMPANY AMERICAN EQUITY INVESTMENT LIFE HOLDING COMPANY AMERICAN EQUITY INVESTMENT LIFE INSURANCE COMPANY								Column 6
AMERICAN EQUITY INVESTMENT LIFE INSURANCE COMPANY		Owners with Greater Than 10% Ownership		(Yes/No)	Ultimate Controlling Party	by Column 5	Column 6)	(Yes/No)
AMERICAN EQUITY INVESTMENT LIFE INSURANCE COMPANY	AMERICAN EQUITY INVESTMENT LIFE INSURANCE COMPANY	AMERICAN EQUITY INVESTMENT LIFE HOLDING COMPANY .	100.000	NO	AMERICAN EQUITY INVESTMENT LIFE HOLDING COMPANY	AMERICAN EQUITY INVESTMENT LIFE INSURANCE COMPANY	100.000	NO
AMERICAN EQUITY INVESTMENT LIFE INSURANCE COMPANY OF NEW YORK	AEL RE VERMONT INC.	AMERICAN EQUITY INVESTMENT LIFE INSURANCE COMPANY	/	NO	AMERICAN EQUITY INVESTMENT LIFE HOLDING COMPANY	AMERICAN EQUITY INVESTMENT LIFE INSURANCE COMPANY	100.000	NO
AMERICAN EQUITY INVESTMENT LIFE INSURANCE COMPANY OF NEW YORK	AEL RE VERMONT II INC.	AMERICAN EQUITY INVESTMENT LIFE INSURANCE COMPANY	/	NO	AMERICAN EQUITY INVESTMENT LIFE HOLDING COMPANY	AMERICAN EQUITY INVESTMENT LIFE INSURANCE COMPANY	100.000	NO
NEW YORK	AMERICAN FOLITY INVESTMENT LIFE INSURANCE COMPANY OF							1
EAGLE LIFE INSURANCE COMPANY			100 000	NO	AMERICAN FOLLTY INVESTMENT LIFE HOLDING COMPANY	AMERICAN FOLLTY INVESTMENT LIFE INSURANCE COMPANY	100 000	NO
				NO				NO
AND LITE INSTRUCE CONTANT CONT								NO
	ENTRADA LIFE INSURANCE CONFANT	AMERICAN EQUITE INVESTMENT LIFE HOLDING COMPANY.	100.000	INO	AWENTOAN EQUITE HAVESTWENT LIFE HOLDING COWEART	ENTRADA LIFE INSURANCE COMPANT	100.000	INO
								1
								1
								1
								1
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SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

REQUIRED FILINGS

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

question	ns.	Responses
1.	MARCH FILING Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	YES
2.	Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?	YES
3.	Will the confidential Risk-based Capital Report be filed with the state of domicile, if required, by March 1?	YES
4.	Will an actuarial opinion be filed by March 1?	YES
5.	APRIL FILING Will Management's Discussion and Analysis be filed by April 1?	YES
6.	Will the Life, Health & Annuity Guaranty Association Assessable Premium Exhibit - Parts 1 and 2 be filed with the state of domicile and the NAIC by April 1? (Not applicable to fraternal benefit societies)	YES
7.	Will the Supplemental Investment Risks Interrogatories be filed by April 1?	YES
8.	JUNE FILING Will an audited financial report be filed by June 1?	YES
0.	This are acceptance in an object see index by carrier in	
9.	Will Accountant's Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	YES
suppler specific	SUPPLEMENTAL FILINGS owing supplemental reports are required to be filed as part of your annual statement filing if your company is engaged in the type of business nent. However, in the event that your company does not transact the type of business for which the special report must be filed, your respo 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 whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions. MARCH FILING	nse of NO to the
10.	Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1? (Not applicable to fraternal benefit societies)	NO
11.	Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	NO
12.	Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?	NO
13.	Will the actuarial opinion on participating and non-participating policies as required in Interrogatories 1 and 2 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1?	NO
14.	Will the actuarial opinion on non-guaranteed elements as required in interrogatory #3 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1?	NO
15.	Will the actuarial opinion on X-Factors be filed with the state of domicile and electronically with the NAIC by March 1?	NO
16.	Will the actuarial opinion on Separate Accounts Funding Guaranteed Minimum Benefit be filed with the state of domicile and electronically with the NAIC by March 1?	NO
17.	Will the actuarial opinion on Synthetic Guaranteed Investment Contracts be filed with the state of domicile and electronically with the NAIC by March 1?	NO
18.	Will the Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1?	NO
19.	Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1?	YES
20.	Will the Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI be filed with the state of domicile and electronically with the NAIC by March 1?	NO
21.	Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Average Market Value) be filed with the state of domicile and electronically with the NAIC by March 1?	NO
22.	Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value) be filed with the state of domicile and electronically with the NAIC by March 1?	NO
23.	Will the C-3 RBC Certifications required under C-3 Phase I be filed with the state of domicile and electronically with the NAIC by March 1?	NO
24.	Will the C-3 RBC Certifications required under C-3 Phase II be filed with the state of domicile and electronically with the NAIC by March 1?	NO
25.	Will the Actuarial Certifications Related to Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities be filed with the state of domicile and electronically with the NAIC by March 1?	NO

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

26.	Will the actuarial opinion required by the Modified Guaranteed Annuity Model Re NAIC by March 1?	
27.	Will the Actuarial Certification regarding the use of 2001 Preferred Class Tables Preferred Mortality Tables for Use in Determining Minimum Reserve Liabilities by March 1?	required by the Model Regulation Permitting the Recognition of e filed with the state of domicile and electronically with the NAIC by
28.	Will the Worker's Compensation Carve-Out Supplement be filed by March 1? (N	
29.	Will Supplemental Schedule O be filed with the state of domicile and the NAIC b	
30.	Will be proposed from the specific partitle date of denicile for relief selected to the	•
31.	Will an approval from the reporting entity's state of domicile for relief related to the electronically with the NAIC by March 1?	
32.	Will an approval from the reporting entity's state of domicile for relief related to the electronically with the NAIC by March 1?	ne one-year cooling off period for independent CPA be filed N0
33.	Will an approval from the reporting entity's state of domicile for relief related to the NAIC by March 1?	ne Requirements for Audit Committees be filed electronically with the
34.	Will the VM-20 Reserves Supplement be filed with the state of domicile and the l	-
35. 36.	Will the Health Supplement be filed with the state of domicile and the NAIC by M Will the Market Conduct Annual Statement (MCAS) Premium Exhibit for Year be	
30.	APRIL FILIF	
37.	Will the confidential Regulatory Asset Adequacy Issues Summary (RAAIS) requi	red by the Valuation Manual be filed with the state of domicile by
38.	Will the Long-Term Care Experience Reporting Forms be filed with the state of d	lomicile and the NAIC by April 1? N0
39.	Will the Credit Insurance Experience Exhibit be filed with the state of domicile an	
40. 41.	Will the Accident and Health Policy Experience Exhibit be filed by April 1?	
4 1. 42.	Will the confidential Actuarial Memorandum required by Actuarial Guideline XXX	
43.	Will the Supplemental Term and Universal Life Insurance Reinsurance Exhibit be	
44.	Will the Variable Annuities Supplement be filed with the state of domicile and the	
45.	Will the confidential Executive Summary of the PBR Actuarial Report be filed with	h the state of domicile by April 1?
46.	Will the confidential Life Summary of the PBR Actuarial Report be filed with the s	
47.	Will the confidential Variable Annuities Summary of the PBR Actuarial Report be	
10	AUGUST FIL	
48.	Will Management's Report of Internal Control Over Financial Reporting be filed v Explanations:	vitil the state of domicile by August 1?
10.	Not required to be filed by Company.	
11. 12.	Not required to be filed by Company. Not required to be filed by Company.	
13.	Not required to be filed by Company.	
14. 15.	Not required to be filed by Company. Not required to be filed by Company.	
16.	Not required to be filed by Company.	
17. 18.	Not required to be filed by Company. Not required to be filed by Company.	
20.	Not required to be filed by Company.	
21. 22.	Not required to be filed by Company. Not required to be filed by Company.	
23.	Not required to be filed by Company.	
24. 25.	Not required to be filed by Company. Not required to be filed by Company.	
26.	Not required to be filed by Company.	
27. 28.	Not required to be filed by Company. Not required to be filed by Company.	
29.	Not required to be filed by Company.	
30. 31.	Not required to be filed by Company. Not required to be filed by Company.	
32.	Not required to be filed by Company.	
33. 34.	Not required to be filed by Company. Not required to be filed by Company.	
35.	Not required to be filed by Company.	
38. 39.	Not required to be filed by Company. Not required to be filed by Company.	
40.	Not required to be filed by Company. Not required to be filed by Company.	
41. 42.	Not required to be filed by Company. Not required to be filed by Company.	
42. 43.	Not required to be filed by Company.	
44. 45.	Not required to be filed by Company. Not required to be filed by Company.	
46.	Not required to be filed by Company.	
47. 48.	Not required to be filed by Company. Not required to be filed by Company.	
чо.	Bar Codes:	
10.	SIS Stockholder Information Supplement [Document Identifier 420]	
11.	Medicare Supplement Insurance Experience Exhibit [Document Identifier 360]	
12.	Trusteed Surplus Statement [Document Identifier 490]	
13.	Participating Opinion for Exhibit 5 [Document Identifier 371]	1
14.	Non-Guaranteed Opinion for Exhibit 5 [Document Identifier 370]	
14.	Non-Guaranteed Opinion for Exhibit 5 [Document Identifier 570]	
15.	Actuarial Opinion on X-Factors [Document Identifier 442]	
16.	Actuarial Opinion on Separate Accounts Funding Guaranteed Minimum Benefit	
	[Document Identifier 443]	
17.	Actuarial Opinion on Synthetic Guaranteed Investment Contracts	
	[Document Identifier 444]	
		1 7 5 5 3 2 0 2 3 4 4 4 0 0 0 0 0

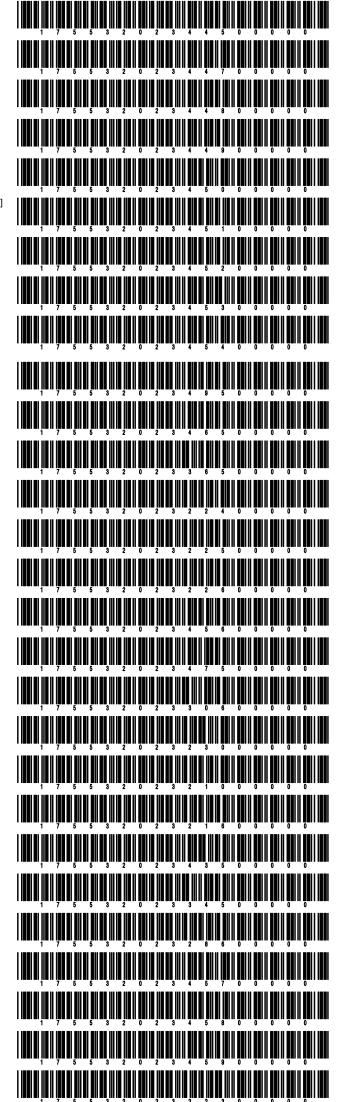


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16.

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

- Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV [Document Identifier 445]
- Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI [Document Identifier 447]
- Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI [Document Identifier 448]
- 22. Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value) [Document Identifier 449]
- 23. C-3 RBC Certifications Required Under C-3 Phase I [Document Identifier 450]
- 24. C-3 RBC Certifications Required Under C-3 Phase II [Document Identifier 451]
- Actuarial Certifications Related to Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities [Document Identifier 452]
- 26. Modified Guaranteed Annuity Model Regulation [Document Identifier 453]
- Actuarial Certification regarding the use of 2001 Preferred Class Tables required by the Model Regulation Permitting the Recognition of Preferred Mortality Tables for Use in Determining Minimum Reserve Liabilities [Document Identifier 454]
- 28. Workers' Compensation Carve-Out Supplement [Document Identifier 495]
- 29. Supplemental Schedule O [Document Identifier 465]
- 30. Medicare Part D Coverage Supplement [Document Identifier 365]
- 31. Relief from the five-year rotation requirement for lead audit partner [Document Identifier 224]
- Relief from the one-year cooling off period for independent CPA [Document Identifier 225]
- 33. Relief from the Requirements for Audit Committees [Document Identifier 226]
- 34. VM-20 Reserves Supplement [Document Identifier 456]
- 35. Health Care Receivables Supplement [Document Identifier 475]
- 38. Long-Term Care Experience Reporting Forms [Document Identifier 306]
- 39. Credit Insurance Experience Exhibit [Document Identifier 230]
- 40. Accident and Health Policy Experience Exhibit [Document Identifier 210]
- 41. Supplemental Health Care Exhibit (Parts 1 and 2) [Document Identifier 216]
- 42. Actuarial Memorandum Required by Actuarial Guideline XXXVIII 8D [Document Identifier 435]
- 43. Supplemental Term and Universal Life Insurance Reinsurance Exhibit [Document Identifier 345]
- 44. Variable Annuities Supplement [Document Identifier 286]
- 45. Executive Summary of the PBR Actuarial Report [Document Identifier 457]
- 46. Life Summary of the PBR Actuarial Report [Document Identifier 458]
- 47. Variable Annuities Summary of the PBR Actuarial Report [Document Identifier 459]
- 48. Management's Report of Internal Control Over Financial Reporting [Document Identifier 223]



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AEL RE VERMONT II, INC **OVERFLOW PAGE FOR WRITE-INS**

NONE

SUMMARY INVESTMENT SCHEDULE

		Gross Investm	ent Holdings		Admitted Asse in the Annua		
		1	2 Percentage of Column 1	3	4 Securities Lending Reinvested Collateral	5 Total (Col. 3 + 4)	6 Percentage of Column 5
	Investment Categories	Amount	Line 13	Amount	Amount	Amount	Line 13
1.	Long-Term Bonds (Schedule D, Part 1):						
	1.01 U.S. governments						
	1.02 All other governments						0.000
	1.03 U.S. states, territories and possessions, etc. guaranteed		0.000				0.000
	1.04 U.S. political subdivisions of states, territories, and possessions, guaranteed		0.000				0.000
	1.05 U.S. special revenue and special assessment obligations, etc. non- guaranteed		0.000				0.000
	1.06 Industrial and miscellaneous						
	1.07 Hybrid securities						
	1.08 Parent, subsidiaries and affiliates						
	1.09 SVO identified funds						
	1.10 Unaffiliated bank loans						0.000
	1.11 Unaffiliated certificates of deposit						
	1.12 Total long-term bonds						0.000
2.	Preferred stocks (Schedule D, Part 2, Section 1):						
۷.	2.01 Industrial and miscellaneous (Unaffiliated)		0 000				0.000
	2.02 Parent, subsidiaries and affiliates						
	2.03 Total preferred stocks						
3.			0.000				
Э.	Common stocks (Schedule D, Part 2, Section 2): 3.01 Industrial and miscellaneous Publicly traded (Unaffiliated)		0 000				0.000
	3.02 Industrial and miscellaneous Publicly traded (Orialillated)						
	3.03 Parent, subsidiaries and affiliates Publicly traded						
	3.04 Parent, subsidiaries and affiliates Other						
	3.05 Mutual funds						
	3.06 Unit investment trusts						
	3.07 Closed-end funds						
	3.08 Exchange traded funds						
	3.09 Total common stocks		0.000				0.000
4.	Mortgage loans (Schedule B):						
	4.01 Farm mortgages						
	4.02 Residential mortgages		0.000				0.000
	4.03 Commercial mortgages						
	4.04 Mezzanine real estate loans						
	4.05 Total valuation allowance						
	4.06 Total mortgage loans		0.000				0.000
5.	Real estate (Schedule A):						
	5.01 Properties occupied by company						
	5.02 Properties held for production of income						0.000
	5.03 Properties held for sale						0.000
	5.04 Total real estate		0.000				0.000
6.	Cash, cash equivalents and short-term investments:						
	6.01 Cash (Schedule E, Part 1)						
	6.02 Cash equivalents (Schedule E, Part 2)			7,449,607		7,449,607	37 . 181
	6.03 Short-term investments (Schedule DA)						0.000
	6.04 Total cash, cash equivalents and short-term investments	20,035,807		20,035,807		20,035,807	100.000
7.	Contract loans		0.000				0.000
8.	Derivatives (Schedule DB)		0.000				0.000
9.	Other invested assets (Schedule BA)		0.000				0.000
10.	Receivables for securities						0.000
11.	Securities Lending (Schedule DL, Part 1)		0.000		XXX	XXX	XXX
12.	Other invested assets (Page 2, Line 11)		0.000				0.000
13.	Total invested assets	20,035,807	100.000	20,035,807		20,035,807	100.000

Schedule A - Verification - Real Estate

NONE

Schedule B - Verification - Mortgage Loans **N O N E**

Schedule BA - Verification - Other Long-Term Invested Assets ${f N}$ ${f O}$ ${f N}$ ${f E}$

Schedule D - Verification - Bonds and Stock

NONE

Schedule D - Summary By Country **N O N E**

SCHEDULE D - PART 1A - SECTION 1

	Quality and	Maturity Distribut	ion of All Bonds C	Wned December 3	1, at Book/Adjus	ted Carrying Value	es by Major Types	of Issues and NA	AIC Designations			
NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 No Maturity Date	7 Total Current Year	8 Col. 7 as a % of Line 12.7	9 Total from Col. 7 Prior Year	10 % From Col. 8 Prior Year	11 Total Publicly Traded	12 Total Privately Placed (a)
1. U.S. Governments			1									
1.1 NAIC 1	7.449.607					xxx	7.449.607	100.0			7.449.607	
1.2 NAIC 2	, , ,					XXX	, , ,				, , ,	
1.3 NAIC 3						XXX						
1.4 NAIC 4						XXX						
1.5 NAIC 5						XXX						
1.6 NAIC 6						XXX						
1.7 Totals	7,449,607					XXX	7,449,607	100.0			7,449,607	
2. All Other Governments												
2.1 NAIC 1						XXX						
2.2 NAIC 2						XXX						
2.3 NAIC 3						XXX						
2.4 NAIC 4						xxx						
2.5 NAIC 5						XXX						
2.6 NAIC 6						XXX						
2.7 Totals						XXX						
U.S. States, Territories and Possessions etc., Guaranteed												
3.1 NAIC 1						XXX						
3.2 NAIC 2						XXX						
3.3 NAIC 3						XXX						
3.4 NAIC 4						XXX						
3.5 NAIC 5						XXX						
3.6 NAIC 6						XXX						
3.7 Totals						XXX						
U.S. Political Subdivisions of States, Territories and Possessions , Guaranteed 4.1 NAIC 1						xxx						
4.2 NAIC 2						XXX						
4.3 NAIC 3						XXX						
4.4 NAIC 4						XXX						
4.5 NAIC 5						XXX						
4.6 NAIC 6						XXX						
4.7 Totals						XXX						
5. U.S. Special Revenue & Special Assessment						^^^						1
Obligations, etc., Non-Guaranteed 5.1 NAIC 1						XXX						
5.1 NAIC 1						XXX						
5.2 NAIC 2						XXX						
5.4 NAIC 4						XXX						
						XXX						
5.5 NAIC 5												
5.6 NAIC 6						XXX						1
5.7 Totals	1	1		1		XXX	1	I		1	1	1

SCHEDULE D - PART 1A - SECTION 1 (Continued)

Quality and Maturity Distribution of All Bonds Owned December 3	1, at Book/Adjusted Carrying Values by	y Major Types of Issues and NAIC Designations
---	--	---

	Quality and	יווימנעוונץ ביוסנווטעני	l on All Bollus C	wned December 3	r, at book/Aujus		to by iviajui i ypes	o or issues and INF		10	11	10
NAIC Designation	1 Year or Less	Over 1 Year Through 5 Years	Over 5 Years	Over 10 Years Through 20 Years	5 Over 20 Years	6 No Maturity Date	Total Current Year	Col. 7 as a % of Line 12.7	Total from Col. 7 Prior Year	10 % From Col. 8 Prior Year	11 Total Publicly Traded	12 Total Privately Placed (a)
6. Industrial & Miscellaneous (Unaffiliated)	I feal of Less	Through 5 Tears	Through to rears	Through 20 fears	Over 20 Tears	Date	Total Culterit Teal	LINE 12.7	FIIOI Teal	FIIOI TEAI	Haueu	Flaceu (a)
						2007						
6.1 NAIC 1						XXX						
6.2 NAIC 2						XXX						
6.3 NAIC 3						XXX						
6.4 NAIC 4						XXX						
6.5 NAIC 5						XXX						
6.6 NAIC 6						XXX						
6.7 Totals						XXX						
7. Hybrid Securities 7.1 NAIC 1						XXX						
_						XXX						
7.2 NAIC 2												
7.3 NAIC 3						XXX						
7.4 NAIC 4						XXX						
7.5 NAIC 5						XXX						
7.6 NAIC 6						XXX						
7.7 Totals						XXX						
8. Parent, Subsidiaries and Affiliates												
8.1 NAIC 1						XXX						
8.2 NAIC 2						XXX						
8.3 NAIC 3						XXX						
8.4 NAIC 4						XXX						
8.5 NAIC 5						XXX						
8.6 NAIC 6						XXX						
8.7 Totals						XXX						
9. SVO Identified Funds						7001						
9.1 NAIC 1	XXX	xxx	xxx	XXX	XXX							
9.2 NAIC 2		XXX	XXX	XXX	XXX							
9.3 NAIC 3		XXX	XXX	XXX	XXX							
9.4 NAIC 4		XXX	XXX	XXX	XXX							
9.5 NAIC 5			XXX	XXX	XXX							
9.6 NAIC 6												
	XXX	XXX	XXX	XXX	XXX							
9.7 Totals	XXX	XXX	XXX	XXX	XXX							
10. Unaffiliated Bank Loans												
10.1 NAIC 1						XXX						
10.2 NAIC 2						XXX						
10.3 NAIC 3						XXX						
10.4 NAIC 4						XXX						
10.5 NAIC 5						XXX						
10.6 NAIC 6						XXX						
10.7 Totals						XXX						
11. Unaffiliated Certificates of Deposit												
11.1 NAIC 1						XXX						
11.2 NAIC 2						XXX						
11.3 NAIC 3						XXX						
11.4 NAIC 4						XXX						
11.5 NAIC 5						XXX						
11.6 NAIC 6						XXX						
11.7 Totals						XXX						
11.1 IU(a)3		1	I	1		· ^^^	1	1	I	I	1	1

SCHEDULE D - PART 1A - SECTION 1 (Continued)

Quality and Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Types of Issues and NAIC Designations.

Quality and Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Types of Issues and NAIC Designations												
NAIC Designation	1 1 Year or Less	Over 1 Year Through 5 Years	Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	No Maturity Date	/ Total Current Year	8 Col. 7 as a % of Line 12.7	Total from Col. 7 Prior Year	10 % From Col. 8 Prior Year	11 Total Publicly Traded	12 Total Privately Placed (a)
12. Total Bonds Current Year												, ,
12.1 NAIC 1	(d) 7,449,607						7.449.607	100.0	XXX	XXX	7.449.607	
12.2 NAIC 2	(d)						, -,		XXX	XXX	, , ,	
12.3 NAIC 3	(d)								XXX	XXX		
12.4 NAIC 4									XXX	XXX		
12.5 NAIC 5	(d)						(c)		XXX	XXX		
12.6 NAIC 6	(d)						(c)		XXX	XXX		
12.7 Totals	7.7						(b)7,449,607	100.0		XXX	7.449.607	
12.8 Line 12.7 as a % of Col. 7	100.0						100.0		XXX	XXX	100.0	
13. Total Bonds Prior Year								7000	7001	7001		
13.1 NAIC 1							XXX	XXX				
13.2 NAIC 2							XXX	XXX				
13.3 NAIC 3							XXX	XXX				
13.4 NAIC 4							XXX	XXX				
13.5 NAIC 5							XXX	XXX	(c)			
13.6 NAIC 6							XXX	XXX	(c)			
13.7 Totals							XXX	XXX	(b)			
13.8 Line 13.7 as a % of Col. 9							XXX	XXX	(b)	XXX		
14. Total Publicly Traded Bonds							XXX	/V//		/V/		
14.1 NAIC 1	7,449,607						7.449.607	100.0			7.449.607	xxx
14.1 NAIC 1							, ,443,007	100.0			, ,443,001	XXX
14.3 NAIC 3												XXX
14.4 NAIC 4												XXX
14.5 NAIC 5												XXX
14.6 NAIC 6												XXX
14.7 Totals							7,449,607	100.0			7.449.607	XXX
14.8 Line 14.7 as a % of Col. 7	100.0						100.0		XXX	XXX	100.0	XXX
14.9 Line 14.7 as a % of Line 12.7, Col. 7,							100.0				100.0	
Section 12	100.0						100.0	XXX	XXX	XXX	100.0	xxx
15. Total Privately Placed Bonds												
15.1 NAIC 1											XXX	
15.2 NAIC 2											XXX	
15.3 NAIC 3											XXX	
15.4 NAIC 4											XXX	
15.5 NAIC 5	***										XXX	
15.6 NAIC 6											XXX	
15.7 Totals											XXX	
15.8 Line 15.7 as a % of Col. 7								XXX	XXX	XXX	XXX	
15.9 Line 15.7 as a % of Line 12.7, Col. 7, Section 12	olo undor SEC Bulo 14							XXX	XXX	XXX	XXX	

a) Includes	\$ 	freel	tradable under SEC Rule	144 or	qualified for resal	e under SEC F	Rule 144A.

⁽SVO) in reliance on the insurer's certification that the issuer is current in all principal and interest payments. "6*" means the NAIC designation was assigned by the SVO due to inadequate certification of principal and interest payments.

8.07 Totals

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AEL RE VERMONT II, INC

	SCHEDULE D - PART 1A - SECTION 2 Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Type and Subtype of Issues											
										1 40		
	1	2 Over 1 Year	3	4 Over 10 Years	5	6	7	8	9	10 % From Col. 8	11	12 Total Privatelv
Distribution by Type	1 Year or Less	Through 5 Years	Over 5 Years	Through 20 Years	Over 20 Years	No Maturity Date	Total Current Year	Col. 7 as a % of Line 12.09	Total from Col. 7 Prior Year	% From Col. 8 Prior Year	Total Publicly Traded	Placed
	i feal of Less	Tillough 5 Teals	Through to rears	Tillough 20 Teals	Over 20 rears	Date	Total Current Teal	Lille 12.09	FIIOI Teal	FIIOI Teal	Haueu	riaceu
1. U.S. Governments 1.01 Issuer Obligations	7.449.607					XXX	7.449.607	100.0			7,449,607	
1.02 Residential Mortgage-Backed Securities	7,449,607						7,449,007	100.0			1,449,007	
1.03 Commercial Mortgage-Backed Securities						XXX						••••••
1.03 Commercial Mortgage-Backed Securities						XXX						
	7 440 007					XXX	7 440 007				7 440 007	
1.05 Totals	7,449,607					XXX	7,449,607	100.0			7,449,607	
2. All Other Governments												
2.01 Issuer Obligations						XXX						
2.02 Residential Mortgage-Backed Securities						XXX						
2.03 Commercial Mortgage-Backed Securities						XXX						
2.04 Other Loan-Backed and Structured Securities						XXX						
2.05 Totals						XXX						
3. U.S. States, Territories and Possessions, Guaranteed												
3.01 Issuer Obligations						XXX						
3.02 Residential Mortgage-Backed Securities						XXX						
3.03 Commercial Mortgage-Backed Securities						XXX						•••••••
3.04 Other Loan-Backed and Structured Securities						XXX						••••••
3.05 Totals						XXX						
U.S. Political Subdivisions of States, Territories and						^^^						
Possessions, Guaranteed												
4.01 Issuer Obligations						XXX						
4.02 Residential Mortgage-Backed Securities						XXX						
						XXX						
4.03 Commercial Mortgage-Backed Securities 4.04 Other Loan-Backed and Structured Securities												
4.04 Other Loan-Backed and Structured Securities 4.05 Totals						XXX						
						XXX						
5. U.S. Special Revenue & Special Assessment Obligations												
etc., Non-Guaranteed						1001						
5.01 Issuer Obligations						XXX						•••••
5.02 Residential Mortgage-Backed Securities						XXX						
5.03 Commercial Mortgage-Backed Securities						XXX						
5.04 Other Loan-Backed and Structured Securities						XXX						
5.05 Totals						XXX						
Industrial and Miscellaneous												
6.01 Issuer Obligations						XXX						
6.02 Residential Mortgage-Backed Securities						XXX						
6.03 Commercial Mortgage-Backed Securities						XXX						
6.04 Other Loan-Backed and Structured Securities						XXX						
6.05 Totals						XXX						
7. Hybrid Securities												
7.01 Issuer Obligations						XXX						
7.02 Residential Mortgage-Backed Securities						XXX						•••••
7.02 Residential Mortgage-Backed Securities						XXX						
7.04 Other Loan-Backed and Structured Securities						XXX						
7.04 Other Loan-Backed and Structured Securities 7.05 Totals												
						XXX						
8. Parent, Subsidiaries and Affiliates												
8.01 Issuer Obligations						XXX						
8.02 Residential Mortgage-Backed Securities						XXX						
8.03 Commercial Mortgage-Backed Securities						XXX						
8.04 Other Loan-Backed and Structured Securities						XXX						
8.05 Affiliated Bank Loans - Issued						XXX						
8.06 Affiliated Bank Loans - Acquired						XXX						
8 07 Totals						VVV	1					

Section 12

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AEL RE VERMONT II, INC

	SCHEDULE D - PART 1A - SECTION 2 (Continued) Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Type and Subtype of Issues											
Distribution by Type	1 Year or Less	2 Over 1 Year	3 Over 5 Years Through 10 Years	4 Over 10 Years	5 Over 20 Years	6 No Maturity Date	7 Total Current Year	8 Col. 7 as a % of Line 12.09	9 Total from Col. 7 Prior Year	10 % From Col. 8 Prior Year	11 Total Publicly Traded	12 Total Privately Placed
9. SVO Identified Funds	i feal of Less	Tillough 5 Tears	Thiough to reals	Tillough 20 Teals	Over 20 rears	Date	Total Culterit Teal	Lille 12.09	FIIOI Teal	FIIOI Teal	rraueu	Flaceu
9.01 Exchange Traded Funds Identified by the SVO	XXX	XXX	XXX	XXX	XXX							
10. Unaffiliated Bank Loans												
10.01 Unaffiliated Bank Loans - Issued						XXX						
10.02 Unaffiliated Bank Loans - Acquired						XXX						
10.03 Totals						XXX						
11. Unaffiliated Certificates of Deposit 11.01 Totals						XXX						
12. Total Bonds Current Year												
12.01 Issuer Obligations	7.449.607					XXX	7 . 449 . 607	100.0	XXX	XXX	7.449.607	
12.02 Residential Mortgage-Backed Securities	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					XXX			XXX	XXX	, , , , , , , , , , , , , , , , , , , ,	
12.03 Commercial Mortgage-Backed Securities						XXX			XXX	XXX		
12.04 Other Loan-Backed and Structured Securities .						XXX			XXX	XXX		
12.05 SVO Identified Funds	XXX	XXX	XXX	XXX	XXX				XXX	XXX		
12.06 Affiliated Bank Loans						XXX			XXX	XXX		
12.07 Unaffiliated Bank Loans						XXX			XXX	XXX		
12.08 Unaffiliated Certificates of Deposit						XXX			XXX	XXX		
12.09 Totals	7.449.607						7.449.607	100.0	XXX	XXX	7.449.607	
12.10 Line 12.09 as a % of Col. 7	100.0						100.0	XXX	XXX	XXX	100.0	
13. Total Bonds Prior Year												
13.01 Issuer Obligations						XXX	XXX	XXX				
13.02 Residential Mortgage-Backed Securities						XXX	XXX	XXX				
13.03 Commercial Mortgage-Backed Securities						XXX	XXX	XXX				
13.04 Other Loan-Backed and Structured Securities .						XXX	XXX	XXX				
13.05 SVO Identified Funds	XXX	XXX	XXX	XXX	XXX		XXX	XXX				
13.06 Affiliated Bank Loans						XXX	XXX	XXX				
13.07 Unaffiliated Bank Loans						XXX	XXX	XXX				
13.08 Unaffiliated Certificates of Deposit						XXX	XXX	XXX				
13.09 Totals							XXX	XXX				
13.10 Line 13.09 as a % of Col. 9							XXX	XXX		XXX		
14. Total Publicly Traded Bonds												
14.01 Issuer Obligations	7,449,607					XXX		100.0			7,449,607	XXX
14.02 Residential Mortgage-Backed Securities						XXX						XXX
14.03 Commercial Mortgage-Backed Securities						XXX						XXX
14.04 Other Loan-Backed and Structured Securities .						XXX						XXX
14.05 SVO Identified Funds	XXX	XXX	XXX	XXX	XXX							XXX
14.06 Affiliated Bank Loans						XXXXXX						XXXXXX
14.07 Unamiliated Bank Loans						XXX						XXX
14.09 Totals	7.449.607	-	-			^^^	7.449.607	100 0			7.449.607	XXX
14.10 Line 14.09 as a % of Col. 7	7,449,607							XXX	XXX	XXX	7,449,607	XXX
14.10 Line 14.09 as a % of Col. 7	100.0						100.0	XXX	XXX	XXX	100.0	
Section 12	100.0						100.0	xxx	xxx	XXX	100.0	xxx
15. Total Privately Placed Bonds												
15.01 Issuer Obligations						XXX					XXX	
15.02 Residential Mortgage-Backed Securities						XXX					XXX	
15.03 Commercial Mortgage-Backed Securities						XXX					XXX	
15.04 Other Loan-Backed and Structured Securities .						XXX					XXX	
15.05 SVO Identified Funds	XXX	XXX	XXX	XXX	XXX						XXX	
15.06 Affiliated Bank Loans						XXX					XXX	
15.07 Unaffiliated Bank Loans						XXX					XXX	ļ
15.08 Unaffiliated Certificates of Deposit						XXX					XXX	
15.09 Totals											XXX	
15.10 Line 15.09 as a % of Col. 7								XXX	XXX	XXX	XXX	ļ
15.11 Line 15.09 as a % of Line 12.09, Col. 7,								XXX	XXX	XXX	XXX	

XXX

XXX

XXX

XXX

Schedule DA - Verification - Short-Term Investments

NONE

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

NONE

Schedule DB - Part B - Verification - Futures Contracts

NONE

Schedule DB - Part C - Section 1 - Replication (Synthetic Asset) Transactions (RSATs) Open NONE

Schedule DB-Part C-Section 2-Reconciliation of Replication (Synthetic Asset) Transactions Open **NONE**

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

NONE

SCHEDULE E - PART 2 - VERIFICATION BETWEEN YEARS

(Cash Equivalents) 2 Money Market Total Bonds Other (a) Mutual funds 1. Book/adjusted carrying value, December 31 of prior year7,441,6467.441.646 2. Cost of cash equivalents acquired7,961 3. Accrual of discount Unrealized valuation increase/(decrease) . 5. Total gain (loss) on disposals 6. Deduct consideration received on disposals ... 7. Deduct amortization of premium .. 8. Total foreign exchange change in book/adjusted carrying value 9. Deduct current year's other than temporary impairment recognized . 10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-....7,449,607 ...7,449,607 7+8-9) 11. Deduct total nonadmitted amounts

7,449,607

7,449,607

Statement value at end of current period (Line 10 minus Line 11)

 $[\]hbox{(a) Indicate the category of such investments, for example, joint ventures, transportation equipment:}\\$

Schedule A - Part 1 - Real Estate Owned **NONE**

Schedule A - Part 2 - Real Estate Acquired and Additions Made **NONE**

Schedule A - Part 3 - Real Estate Disposed **NONE**

Schedule B - Part 1 - Mortgage Loans Owned **N O N E**

Schedule B - Part 2 - Mortgage Loans Acquired and Additions Made NONE

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

NONE

Schedule BA - Part 1 - Other Long-Term Invested Assets Owned **NONE**

Schedule BA - Part 2 - Other Long-Term Invested Assets Acquired and Additions Made NONE

Schedule BA - Part 3 - Other Long-Term Invested Assets Disposed, Transferred or Repaid NONE

Schedule D - Part 1 - Long Term Bonds Owned

NONE

Schedule D - Part 2 - Section 1 - Preferred Stocks Owned **NONE**

Schedule D - Part 2 - Section 2 - Common Stocks Owned **NONE**

Schedule D - Part 3 - Long-Term Bonds and Stocks Acquired **NONE**

Schedule D - Part 4 - Long-Term Bonds and Stocks Sold, Redeemed or Otherwise Disposed Of NONE

Schedule D - Part 5 - Long Term Bonds and Stocks Acquired and Fully Disposed Of **NONE**

Schedule D-Part 6-Section 1-Valuation of Shares of Subsidiary, Controlled or Affiliated Companies

NONE

Schedule D - Part 6 - Section 2

NONE

Schedule DA - Part 1 - Short-Term Investments Owned

NONE

Schedule DB - Part A - Section 1 - Options, Caps, Floors, Collars, Swaps and Forwards Open NONE

Schedule DB - Part A - Section 2 - Options, Caps, Floors, Collars, Swaps and Forwards Terminated NONE

Schedule DB - Part B - Section 1 - Futures Contracts Open

NONE

Schedule DB - Part B - Section 1B - Brokers with whom cash deposits have been made **NONE**

Schedule DB - Part B - Section 2 - Futures Contracts Terminated

NONE

Schedule DB - Part D - Section 1 - Counterparty Exposure for Derivative Instruments Open NONE

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

NONE

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged To NONE

Schedule DB - Part E - Derivatives Hedging Variable Annuity Guarantees as of December 31 of Current Year

NONE

Schedule DL - Part 1 - Reinvested Collateral Assets Owned

NONE

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

SCHEDULE E - PART 1 - CASH

1	2	3	4	5	6	7
			Amount of Interest	Amount of Interest		
		Rate of	Received During	Accrued December 31		
Depository	Code	Interest	Year	of Current Year	Balance	*
PNC Bank Pittsburgh, Pennsylvania					(367)	XXX.
State Street Bank Boston, Massachusetts			28,213		12,586,567	XXX.
0199998 Deposits in depositories which do not exceed the						
allowable limit in any one depository (See instructions) - open						
depositories	XXX	XXX				XXX
0199999. Totals - Open Depositories	XXX	XXX	28,213		12,586,200	XXX
0299998 Deposits in depositories which do not exceed the						
allowable limit in any one depository (See instructions) - suspended						
depositories	XXX	XXX				XXX
0299999. Totals - Suspended Depositories	XXX	XXX				XXX
0399999. Total Cash on Deposit	XXX	XXX	28,213		12,586,200	XXX
0499999. Cash in Company's Office	XXX	XXX	XXX	XXX		XXX
0599999 Total - Cash	XXX	XXX	28,213		12,586,200	XXX

TOTALS OF DEPOSITORY BALANCES ON THE LAST DAY OF EACH MONTH DURING THE CURRENT YEAR

1.	January	4	April		7.	July		10.	October		
2.	February	5	May		8.	August		11.	November		
3.	March	6	June		9.	September		12.	December	12,586,200	

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned December 31 of Current Year

1		10 0111	d December 31 of C	Juli Cill Toul				
	2	3	4	5	6	7	8	9
						Book/Adjusted	Amount of Interest	Amount Received
CUSIP	Description	Code	Date Acquired	Rate of Interest	Maturity Date	Carrying Value	Due and Accrued	During Year
	UNITED STATES TREASURY TBILL_CASH		12/22/2023	5.221	02/08/2024	2,486,202		3,606
	UNITED STATES TREASURY TBILL_CASH		12/26/2023	0.000	02/20/2024	4,963,405		4,355
	Subtotal - Bonds - U.S. Governments - Issuer Obligations					7,449,607		7,961
	otal - U.S. Government Bonds					7,449,607		7,961
	otal - All Other Government Bonds							
	otal - U.S. States, Territories and Possessions Bonds							
	otal - U.S. Political Subdivisions Bonds							
	otal - U.S. Special Revenues Bonds							
1109999999. T	otal - Industrial and Miscellaneous (Unaffiliated) Bonds							
1309999999. T	otal - Hybrid Securities							
1509999999. T	otal - Parent, Subsidiaries and Affiliates Bonds							
19099999999. 5	Subtotal - Unaffiliated Bank Loans							
2419999999. T	Total - Issuer Obligations					7,449,607		7,961
2429999999. T	otal - Residential Mortgage-Backed Securities							·
2439999999. T	otal - Commercial Mortgage-Backed Securities							
	otal - Other Loan-Backed and Structured Securities							
	otal - SVO Identified Funds							
	otal - Affiliated Bank Loans							
	otal - Unaffiliated Bank Loans							
2509999999 T						7.449.607		7,961
	Jan 201100					1,110,001		7,001
		l						
		l						
		l						
		l						
		l						
		I						
		1						
	Total Cash Equivalents					7,449,607		7,961

1.							
Line	Book/Adjusted Carrying	Value by NAIC Designat	ion Category Footnote:				
Number							
1A	1A\$7,449,607	1B\$	1C\$	1D\$	1E\$	1F \$	1G\$
1B	2A\$	2B\$	2C\$				
1C	3A\$	3B\$	3C\$				
1D	4A\$	4B\$	4C\$				
1E	5A\$	5B\$	5C\$				
1F	6\$						

SCHEDULE E - PART 3 - SPECIAL DEPOSITS

			2	Deposits	s For the	All Oll O	-1-1 D11-
				Benefit of All 3	4	5	ecial Deposits 6
	States, Etc.	Type of Deposit	Purpose of Deposit	Book/Adjusted Carrying Value	Fair Value	Book/Adjusted Carrying Value	Fair Value
1.	AlabamaAL	Deposit	Fulpose of Deposit	Carrying value	i ali value	Carrying value	i ali value
2.	AlaskaAK						
3.	ArizonaAZ						
4.	Arkansas AR						
5.	CaliforniaCA						
6.	ColoradoCO						
7.	ConnecticutCT						
8.	Delaware DE						
9.	District of ColumbiaDC						
10.	FloridaFL GeorgiaGA						
11. 12.	GeorgiaGA HawaiiHI						
13.	IdahoID			***************************************			
14.	IllinoisL						
15.	IndianaIN						
16.	lowaIA						
17.	KansasKS						
18.	KentuckyKY						
19.	LouisianaLA						
20.	MaineME						
21.	Maryland MD						
22.	Massachusetts MA						
	Michigan MI MinnesotaMN						
24. 25.	MississippiMS						
26.	MissouriMO						
27.	MontanaMT						
28.	Nebraska NE						
29.	NevadaNV						
30.	New HampshireNH						
31.	New JerseyNJ						
32.	New MexicoNM						
33.	New YorkNY						
34.	North CarolinaNC				•		
35. 36.	North DakotaND OhioOH						
37.	OklahomaOK						
38.	Oregon OR						
39.	Pennsylvania PA						
40.	Rhode IslandRI						
41.	South CarolinaSC						
42.	South DakotaSD						
43.	TennesseeTN						
44.	TexasTX						
45.	UtahUT						
46. 47.	VermontVT VirginiaVA						
48.	Washington WA						
49.	West VirginiaWV						
50.	Wisconsin WI						ļ
51.	WyomingWY						
52.	American SamoaAS						
53.	Guam GU						
54.	Puerto RicoPR						
55.	U.S. Virgin IslandsVI						
56.	Northern Mariana IslandsMP CanadaCAN						
57. 58.	Canada CAN Aggregate Alien and Other OT	XXX	XXX				
	Subtotal	XXX	XXX				
- 55.	DETAILS OF WRITE-INS	,,,,,	////				
5801.							
5802.							
	Summary of remaining write-ins for						
	Line 58 from overflow page	XXX	XXX				
5899.	Totals (Lines 5801 thru 5803 plus 5898)(Line 58 above)	XXX	xxx				
	JOSO/(LINE JO ADOVE)	^^^	^^^	<u> </u>	<u> </u>	i	<u> </u>

ALPHABETICAL INDEX

ANNUAL STATEMENT BLANK

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General Interrogatories	
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