

18961	19100	26093	42587	64017	27855
<b>ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2025</b> of the Crestbrook Insurance Company In the state of OH Total Assets 198593990 Total Liabilities 113990661 Aggregate write-ins for special surplus funds 0 Common Capital Stock 4500000 Preferred Capital Stock 26022533 Aggregate Write-ins for Other Than 0 Special Surplus Funds Surplus Notes 0 Gross Paid in and Contributed Surplus 54080796 Unassigned funds (surplus) 29622036 Total Capital and Surplus 84603529 Total Liabilities, Capital And Surplus 198593990	<b>ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2025</b> of the AMCO Insurance Company In the state of IA Total Assets 465498361 Total Liabilities 255339651 Aggregate write-ins for special surplus funds 0 Common Capital Stock 3000000 Preferred Capital Stock 0 Aggregate Write-ins for Other Than 0 Special Surplus Funds Surplus Notes 0 Gross Paid in and Contributed Surplus 177486674 Unassigned funds (surplus) 29622036 Total Capital and Surplus 210158710 Total Liabilities, Capital And Surplus 465498361	<b>ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2025</b> of the Nationwide Affinity Insurance Company of America In the state of OH Total Assets 86479097 Total Liabilities 75990776 Aggregate write-ins for special surplus funds 0 Common Capital Stock 5000000 Preferred Capital Stock 0 Aggregate Write-ins for Other Than 0 Special Surplus Funds Surplus Notes 0 Gross Paid in and Contributed Surplus 6372729 Unassigned funds (surplus) 884408 Total Capital and Surplus 14848321 Total Liabilities, Capital And Surplus 86479097	<b>ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2025</b> of the Depositors Insurance Company In the state of IA Total Assets 94056570 Total Liabilities 49549304 Aggregate write-ins for special surplus funds 0 Common Capital Stock 3000000 Preferred Capital Stock 0 Aggregate Write-ins for Other Than 0 Special Surplus Funds Surplus Notes 0 Gross Paid in and Contributed Surplus 19345600 Unassigned funds (surplus) 22161666 Total Capital and Surplus 44507266 Total Liabilities, Capital And Surplus 94056570	<b>ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2025</b> of the Jefferson National Life Insurance Company In the state of TX Total Assets 14917945103 Total Liabilities 14710859638 Aggregate write-ins for special surplus funds 894383 Common Capital Stock 5009112 Preferred Capital Stock 0 Aggregate Write-ins for Other Than 0 Special Surplus Funds Surplus Notes 0 Gross Paid in and Contributed Surplus 42165143 Unassigned Funds 15901827 Total Capital and Surplus 207085465 Total Liabilities, Capital And Surplus 14917945103	<b>ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2025</b> of the Zurich American Insurance Company of Illinois In the state of Illinois Total Assets 45185648 Total Liabilities 11298471 Aggregate write-ins for special surplus funds 0 Common Capital Stock 5000000 Preferred Capital Stock 0 Aggregate Write-ins for Other Than 0 Special Surplus Funds Surplus Notes 0 Gross Paid in and Contributed Surplus 28295295 Unassigned funds (surplus) 591882 Total Capital and Surplus 33887177 Total Liabilities, Capital And Surplus 45185648
<b>NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2025</b> Total Direct Premiums Earned 5236664 Total Direct Losses Incurred 3209519 Total Accident and Health Direct Premiums 0 Earned Total Accident and Health Direct Losses 0 Incurred	<b>NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2025</b> Total Direct Premiums Earned 40191945 Total Direct Losses Incurred 31200891 Total Accident and Health Direct Premiums 0 Earned Total Accident and Health Direct Losses 0 Incurred	<b>NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2025</b> Total Direct Premiums Earned 1002768 Total Direct Losses Incurred 44828 Total Accident and Health Direct Premiums 0 Earned Total Accident and Health Direct Losses 0 Incurred	<b>NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2025</b> Total Direct Premiums Earned 102203 Total Direct Losses Incurred 88274 Total Accident and Health Direct Premiums 0 Earned Total Accident and Health Direct Losses 0 Incurred	<b>NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2025</b> Total Life and Annuity Premiums Written 4192786 Total Life and Annuity Direct Losses Paid 2046554 Total Accident and Health Direct Premiums 197 Written Total Accident and Health Direct Losses Paid 0 Incurred	<b>NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2025</b> Total Direct Premiums Earned 213133 Total Direct Losses Incurred -2403 Total Accident and Health Direct Premiums 0 Earned Total Accident and Health Direct Losses 0 Incurred
<b>STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE</b> I, Jon Godfread, Commissioner of Insurance of the State of North Dakota, do hereby certify that the foregoing is a true Abstract of Statement, as officially filed by the Company in this office. IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of March, A.D. 2026 (SEAL). <b>JON GODFREAD</b> Commissioner of Insurance	<b>STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE</b> I, Jon Godfread, Commissioner of Insurance of the State of North Dakota, do hereby certify that the foregoing is a true Abstract of Statement, as officially filed by the Company in this office. IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of March, A.D. 2026 (SEAL). <b>JON GODFREAD</b> Commissioner of Insurance	<b>STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE</b> I, Jon Godfread, Commissioner of Insurance of the State of North Dakota, do hereby certify that the foregoing is a true Abstract of Statement, as officially filed by the Company in this office. IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of March, A.D. 2026 (SEAL). <b>JON GODFREAD</b> Commissioner of Insurance	<b>STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE</b> I, Jon Godfread, Commissioner of Insurance of the State of North Dakota, do hereby certify that the foregoing is a true Abstract of Statement, as officially filed by the Company in this office. IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of March, A.D. 2026 (SEAL). <b>JON GODFREAD</b> Commissioner of Insurance	<b>STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE</b> I, Jon Godfread, Commissioner of Insurance of the State of North Dakota, do hereby certify that the foregoing is a true Abstract of Statement, as officially filed by the Company in this office. IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of March, A.D. 2026 (SEAL). <b>JON GODFREAD</b> Commissioner of Insurance	<b>STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE</b> I, Jon Godfread, Commissioner of Insurance of the State of North Dakota, do hereby certify that the foregoing is a true Abstract of Statement, as officially filed by the Company in this office. IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of March, A.D. 2026 (SEAL). <b>JON GODFREAD</b> Commissioner of Insurance

93521	16535	21326	25054	26247	64394
<b>ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2025</b> of the Granular Insurance Company In the state of South Carolina Total Assets 685,026,789 Total Liabilities 462,306,135 Aggregate write-ins for special surplus funds 0 Common Capital Stock 10 Preferred Capital Stock 0 Aggregate Write-ins for Other Than Special Surplus 0 Funds Surplus Notes 0 Gross Paid in and Contributed Surplus 292,246,052 Unassigned funds (surplus) 163,430,038.90 Total Capital and Surplus 222,720,654 Total Liabilities, Capital And Surplus 685,026,789	<b>ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2025</b> of the Zurich American Insurance Company In the state of New York Total Assets 3029795359.41 Total Liabilities 24261482043.78 Aggregate write-ins for special surplus funds 0 Common Capital Stock 5000000.00 Preferred Capital Stock 0 Aggregate Write-ins for Other Than 0 Special Surplus Funds Surplus Notes 0 Gross Paid in and Contributed Surplus 4393616488.72 Unassigned funds (surplus) 163430038.90 Total Capital and Surplus 6036313315.62 Total Liabilities, Capital And Surplus 3029795359.40	<b>ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2025</b> of the Empire Fire & Marine Insurance Company In the state of Illinois Total Assets 63649012 Total Liabilities 25008488 Aggregate write-ins for special surplus funds 0 Common Capital Stock 4000000 Preferred Capital Stock 0 Aggregate Write-ins for Other Than 0 Special Surplus Funds Surplus Notes 0 Gross Paid in and Contributed Surplus 33713721 Unassigned funds (surplus) 926802 Total Capital and Surplus 38640523 Total Liabilities, Capital And Surplus 63649012	<b>ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2025</b> of the Hudson Insurance Company In the state of Delaware Total Assets 2,999,021,629.00 Total Liabilities 2,171,086,423.00 Aggregate write-ins for special surplus funds 0.00 Common Capital Stock 7,500,000.00 Preferred Capital Stock 238.00 Aggregate Write-ins for Other Than 0.00 Special Surplus Funds Surplus Notes 0.00 Gross Paid in and Contributed Surplus 293,480,097.00 Unassigned funds (surplus) 526,954,871.00 Total Capital and Surplus 827,935,206.00 Total Liabilities, Capital And Surplus 2,999,021,629.00	<b>ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2025</b> of the American Guarantee & Liability Insurance Company In the state of North Dakota Total Assets 287387964 Total Liabilities 106272995 Aggregate write-ins for special surplus funds 0 Common Capital Stock 5000027 Preferred Capital Stock 0 Aggregate Write-ins for Other Than 0 Special Surplus Funds Surplus Notes 0 Gross Paid in and Contributed Surplus 172270401 Unassigned funds (surplus) 3844541 Total Capital and Surplus 181114969 Total Liabilities, Capital And Surplus 287387964	<b>ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2025</b> of the Heritage Life Insurance Company In the state of Arizona Total Assets 14,720,264,210 Total Liabilities 13,033,359,437 Aggregate write-ins for special surplus funds 0 Common Capital Stock 2,500,000 Preferred Capital Stock 0 Aggregate Write-ins for Other Than 127,756,702 Special Surplus Funds Surplus Notes 0 Gross Paid in and Contributed Surplus 2,099,724,231 Unassigned funds (surplus) 543,076,160 Total Capital and Surplus 1,686,904,773 Total Liabilities, Capital And Surplus 14,720,264,210
<b>NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2025</b> Total Direct Premiums Earned 2,102,388 Total Amount Incurred 1,494,770	<b>NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2025</b> Total Direct Premiums Earned 23906595 Total Direct Losses Incurred 8032755 Total Accident and Health Direct Premiums 0 Earned Total Accident and Health Direct Losses 0 Incurred	<b>NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2025</b> Total Direct Premiums Earned 736172 Total Direct Losses Incurred -118200 Total Accident and Health Direct Premiums 0 Earned Total Accident and Health Direct Losses 0 Incurred	<b>NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2025</b> Total Direct Premiums Earned 1,623,223.00 Total Direct Losses Incurred 1,710,493.00 Total Accident and Health Direct Premiums 0.00 Earned Total Accident and Health Direct Losses 0.00 Incurred	<b>NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2025</b> Total Direct Premiums Earned 2967752 Total Direct Losses Incurred 1809134 Total Accident and Health Direct Premiums 0 Earned Total Accident and Health Direct Losses 0 Incurred	<b>NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2025</b> Total Life and Annuity Premiums Written 0 Total Life and Annuity Direct Losses Paid 0 Total Accident and Health Direct Premiums 0 Written Total Accident and Health Direct Losses Paid 0 Incurred
<b>STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE</b> I, Jon Godfread, Commissioner of Insurance of the State of North Dakota, do hereby certify that the foregoing is a true Abstract of Statement, as officially filed by the Company in this office. IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of March, A.D. 2026 (SEAL). <b>JON GODFREAD</b> Commissioner of Insurance	<b>STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE</b> I, Jon Godfread, Commissioner of Insurance of the State of North Dakota, do hereby certify that the foregoing is a true Abstract of Statement, as officially filed by the Company in this office. IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of March, A.D. 2026 (SEAL). <b>JON GODFREAD</b> Commissioner of Insurance	<b>STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE</b> I, Jon Godfread, Commissioner of Insurance of the State of North Dakota, do hereby certify that the foregoing is a true Abstract of Statement, as officially filed by the Company in this office. IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of March, A.D. 2026 (SEAL). <b>JON GODFREAD</b> Commissioner of Insurance	<b>STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE</b> I, Jon Godfread, Commissioner of Insurance of the State of North Dakota, do hereby certify that the foregoing is a true Abstract of Statement, as officially filed by the Company in this office. IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of March, A.D. 2026 (SEAL). <b>JON GODFREAD</b> Commissioner of Insurance	<b>STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE</b> I, Jon Godfread, Commissioner of Insurance of the State of North Dakota, do hereby certify that the foregoing is a true Abstract of Statement, as officially filed by the Company in this office. IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of March, A.D. 2026 (SEAL). <b>JON GODFREAD</b> Commissioner of Insurance	<b>STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE</b> I, Jon Godfread, Commissioner of Insurance of the State of North Dakota, do hereby certify that the foregoing is a true Abstract of Statement, as officially filed by the Company in this office. IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of March, A.D. 2026 (SEAL). <b>JON GODFREAD</b> Commissioner of Insurance

39039	39306	40142	40843	41181
<b>ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2025</b> of the Rural Community Insurance Company In the state of Minnesota Total Assets 1006955242 Total Liabilities 834856797 Aggregate write-ins for special surplus funds 0 Common Capital Stock 3000000 Preferred Capital Stock 0 Aggregate Write-ins for Other Than 0 Special Surplus Funds Surplus Notes 0 Gross Paid in and Contributed Surplus 168029758 Unassigned funds (surplus) 1048687 Total Capital and Surplus 172078445 Total Liabilities, Capital And Surplus 1006955242	<b>ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2025</b> of the The Fidelity And Deposit Company of Maryland In the state of Illinois Total Assets 247274117.34 Total Liabilities 60074729.01 Aggregate write-ins for special surplus funds 0 Common Capital Stock 5000000.00 Preferred Capital Stock 0 Aggregate Write-ins for Other Than 0 Special Surplus Funds Surplus Notes 0 Gross Paid in and Contributed Surplus 146842401.52 Unassigned funds (surplus) 25426986.81 Total Capital and Surplus 187269388.33 Total Liabilities, Capital And Surplus 247274117.34	<b>ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2025</b> of the American Zurich Insurance Company In the state of Illinois Total Assets 368807330 Total Liabilities 165436697 Aggregate write-ins for special surplus funds 0 Common Capital Stock 5000000 Preferred Capital Stock 0 Aggregate Write-ins for Other Than 0 Special Surplus Funds Surplus Notes 0 Gross Paid in and Contributed Surplus 192140590 Unassigned funds (surplus) 6230042 Total Capital and Surplus 203370633 Total Liabilities, Capital And Surplus 368807330	<b>ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2025</b> of the Universal Underwriters Of Texas Insurance Company In the state of Illinois Total Assets 11581713 Total Liabilities 35077 Aggregate write-ins for special surplus funds 0 Common Capital Stock 4500000 Preferred Capital Stock 0 Aggregate Write-ins for Other Than 0 Special Surplus Funds Surplus Notes 0 Gross Paid in and Contributed Surplus 3900000 Unassigned funds (surplus) 3146636 Total Capital and Surplus 11546636 Total Liabilities, Capital And Surplus 11581713	<b>ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2025</b> of the Universal Underwriters Insurance Company In the state of Illinois Total Assets 408688119 Total Liabilities 70287177 Aggregate write-ins for special surplus funds 0 Common Capital Stock 14960700 Preferred Capital Stock 0 Aggregate Write-ins for Other Than 0 Special Surplus Funds Surplus Notes 0 Gross Paid in and Contributed Surplus 310872945 Unassigned funds (surplus) 12567297 Total Capital and Surplus 338400942 Total Liabilities, Capital And Surplus 408688119
<b>NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2025</b> Total Direct Premiums Earned 269086950 Total Direct Losses Incurred 12484604 Total Accident and Health Direct Premiums 0 Earned Total Accident and Health Direct Losses 0 Incurred	<b>NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2025</b> Total Direct Premiums Earned 1471571 Total Direct Losses Incurred -7283 Total Accident and Health Direct Premiums 0 Earned Total Accident and Health Direct Losses 0 Incurred	<b>NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2025</b> Total Direct Premiums Earned 1489973 Total Direct Losses Incurred 840675 Total Accident and Health Direct Premiums 0 Earned Total Accident and Health Direct Losses 0 Incurred	<b>NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2025</b> Total Direct Premiums Earned 1 Total Direct Losses Incurred -454 Total Accident and Health Direct Premiums 0 Earned Total Accident and Health Direct Losses 0 Incurred	<b>NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2025</b> Total Direct Premiums Earned 64735 Total Direct Losses Incurred 13348 Total Accident and Health Direct Premiums 0 Earned Total Accident and Health Direct Losses 0 Incurred
<b>STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE</b> I, Jon Godfread, Commissioner of Insurance of the State of North Dakota, do hereby certify that the foregoing is a true Abstract of Statement, as officially filed by the Company in this office. IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of March, A.D. 2026 (SEAL). <b>JON GODFREAD</b> Commissioner of Insurance	<b>STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE</b> I, Jon Godfread, Commissioner of Insurance of the State of North Dakota, do hereby certify that the foregoing is a true Abstract of Statement, as officially filed by the Company in this office. IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of March, A.D. 2026 (SEAL). <b>JON GODFREAD</b> Commissioner of Insurance	<b>STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE</b> I, Jon Godfread, Commissioner of Insurance of the State of North Dakota, do hereby certify that the foregoing is a true Abstract of Statement, as officially filed by the Company in this office. IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of March, A.D. 2026 (SEAL). <b>JON GODFREAD</b> Commissioner of Insurance	<b>STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE</b> I, Jon Godfread, Commissioner of Insurance of the State of North Dakota, do hereby certify that the foregoing is a true Abstract of Statement, as officially filed by the Company in this office. IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of March, A.D. 2026 (SEAL). <b>JON GODFREAD</b> Commissioner of Insurance	<b>STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE</b> I, Jon Godfread, Commissioner of Insurance of the State of North Dakota, do hereby certify that the foregoing is a true Abstract of Statement, as officially filed by the Company in this office. IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of March, A.D. 2026 (SEAL). <b>JON GODFREAD</b> Commissioner of Insurance

## What are all these insurance statements?

During the 69th Legislative Assembly, the North Dakota Legislature enacted House Bill 1398, which modified the publishing requirements for insurance companies doing business in North Dakota, as it relates to publication of the Company Abstract of Statement.

Under N.D.C.C. § 26.1-03-10 as amended by House Bill 1398, an insurance company shall submit an abstract of the annual statement on the form prescribed by the commissioner.

This abstract must be published at least three times in a newspaper of general circulation and evenly distributed for publication across all newspapers operating in each of the state's eight judicial districts. Proof of publication must be filed with the commissioner within four months after the filing of the annual statement.

The modifications made under House Bill 1398 during the 69th Legislative Assembly require all insurance companies to publish their Abstract in all eight judicial districts.

Payment for publication of these notices comes from the insurance company, not state government.