





TO CHIEF FINANCIAL OFFICER AND ALL MEMBER INSURERS:

On behalf of the Association's Board of Directors, we are pleased to furnish you with information regarding the 2024 operations and finances of the Florida Life & Health Insurance Guaranty Association (FLAHIGA). First, this report provides information on activities in 2024 regarding each impaired or insolvent company, followed by information about funding sources and the 2024 Assessment. Next, you will find the Audited Financial Statement of the Association for the years ended December 31, 2024, and December 31, 2023, as prepared by Carr, Riggs & Ingram, LLC, Certified Public Accountants, Tallahassee, Florida. Finally, the members of the Board are identified, along with their terms and committee assignments.

Florida Statutes, Chapter 631, Part III, outlines the Association's laws. You can access the statutes through this link: Florida Life and Health Insurance Guaranty Association Act.

Sincerely yours,

Ted Kennedy FLAHIGA Chair

American General Life Insurance Company



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FLAHIGA: THE ROLE OF A GUARANTY ASSOCIATION

FLAHIGA AND THE ROLE OF A GUARANTY ASSOCIATION

State life and health insurance guaranty associations are state entities (in all 50 states as well as Puerto Rico and the District of Columbia) created to protect policyholders of an insolvent insurance company. All insurance companies (with limited exceptions) licensed to sell life or health insurance in a state must be members of that state's guaranty association.

FLAHIGA, the Florida Life & Health Insurance Guaranty Association, is a statutory entity created in 1979 when the Florida legislature enacted the Florida Life and Health Insurance Guaranty Association Act (the FLAHIGA Act). FLAHIGA is composed of all insurers licensed to sell direct life insurance, accident and health insurance, and certain annuities in Florida. Suppose a member insurer is found insolvent and is ordered to be liquidated by a court. In that case, the FLAHIGA Act enables FLAHIGA to provide protection (up to the limits spelled out in the FLAHIGA Act) to Florida residents who are holders of life and health insurance policies and certain annuities with the insolvent insurer. Additional information about FLAHIGA can be found at www.flahiga.org.

FLAHIGA is governed by Part III of Chapter 631, Florida Statutes, and a Plan of Operation established by its Board of Directors. The Board of Directors comprises at least nine but no more than eleven members who are elected by the member insurers or other persons who have experience in life, annuity, or health insurance, including one designee of the Florida Health Maintenance Organization Consumer Assistance Plan (HMOCAP). Board members are approved by the Chief Financial Officer, who evaluates whether all areas of insurance are fairly represented and that the individuals have the requisite qualifications for service.

Laws governing maximum limits and types of policies covered vary from state to state. As of January 1, 2020, Florida's coverage limits are shown below. These coverage limits assume the policy or contract is covered.

- ♦ Life Insurance Death Benefit: \$300,000 per insured life
- ♦ Life Insurance Cash Surrender: \$100,000 per insured life
- ♦ Health Insurance Claims: \$500,000 per insured life
- ♦ Long Term Care Claims: \$300,000 per insured life
- ♦ Deferred Annuity Cash Surrender: \$250,000 per contract owner
- ♦ Annuity in Benefit: \$300,000 per contract owner

THE PROCESS

When a member insurer is found to be insolvent and is ordered liquidated, a Receiver takes over the insurer under court supervision and processes the assets and liabilities through liquidation. Upon liquidation, FLAHIGA automatically becomes liable for the policy obligations the liquidated insurer owed to its Florida policyholders. FLAHIGA's rights under the policies are those that applied to the insurer before liquidation.

Where possible, FLAHIGA collects the company's records and files and pays claims as soon as they can be validated. FLAHIGA also collects premiums and administers the policies, including providing payments if a policyholder surrenders a policy. FLAHIGA may select servicing agents to help with these functions. Efforts are made to find another sound, state-approved insurance company to take over the policies; when this happens, FLAHIGA also transfers enough money to the new company to keep the policies on a firm footing. Sometimes, if the insolvent insurer had the power to cancel policies, FLAHIGA may also do that, provided that all valid claims are paid first. Whatever happens, it is with complete notice to policyholders, and they are given a reasonable time to seek insurance elsewhere if desired.

WHO IS COVERED?

Life and health insurance guaranty associations cover individual policyholders and their beneficiaries; typically, persons protected by insurance certificates issued under group life or group health insurance policies are also covered. Annuities that are directly issued to and owned by individuals, or annuities that guarantee benefits to individuals by the insurer, are generally covered. What are known as "unallocated" annuities are not covered. In Florida, limits on benefits and coverage are established by the FLAHIGA Act. Additional information on the policies covered by FLAHIGA can be found on Page 8.

HOW COVERAGE IS FUNDED

When an insurer fails and there is a shortfall of funds needed to meet the obligations to policyholders, state guaranty associations are activated. Guaranty associations have two primary sources of funding when providing coverage to policyholders. First, guaranty associations have subrogation rights to a proportionate share of the assets remaining in the failed insurer. Those assets, which can be substantial, may be used by the guaranty associations to pay covered claims. Second, insurers in that state are assessed a share of the amount required to meet the portion of the guaranty associations' covered claims not otherwise funded with estate assets. The amount insurers are assessed is based on the premiums they collect in that state. Additional information on FLAHIGA's funding sources and the 2024 Assessment can be found on Page 12.

NOLHGA PARTICIPATION

WHAT IS NOLHGA?

NOLHGA, the National Organization of Life and Health Insurance Guaranty Associations, is a voluntary association comprising the life and health insurance guaranty associations of all 50 states and the District of Columbia.

NOLHGA was founded in 1983 when the state guaranty associations determined that a mechanism was needed to help guaranty associations voluntarily work together. Collaboration with other states allows guaranty associations to be more efficient and effective in providing continued protection for policyholders affected by a multi-state insurance insolvency. NOLHGA establishes a task force of representative guaranty associations to work with insurance commissioners to develop a plan to protect policyholders.

WHAT DOES NOLHGA DO?

When an insurer licensed in multiple states is declared insolvent, NOLHGA assembles a task force of guaranty association officials on behalf of affected member state guaranty associations. This task force analyzes the company's commitments to policyholders, ensures that covered claims are paid, and, where appropriate, arranges for covered policies to be transferred to a healthy insurer.

The task force may also support the receiver's efforts to dispose of the company's assets to maximize their value. When estate assets are insufficient to pay the claims of covered policyholders, guaranty associations assess the licensed insurers in their states for a proportional share of the funds needed.



WHAT BENEFITS DOES NOLHGA BRING TO THE GUARANTY SYSTEM?

Through NOLHGA, state guaranty associations decrease costs to the member insurers that fund them. Rather than each state association hiring its legal and financial experts, the NOLHGA task force uses one team of experts, significantly reducing costs to guaranty associations. This coordination of effort also helps reduce the time a receiver may require to develop a rehabilitation plan or resolve a multi-state insolvency.

Since its creation in 1983, NOLHGA has assisted with more than 100 multi-state insolvencies, and through their combined efforts, guaranty associations have:

- ♦ Protected more than 3.08 million policyholders.
- ♦ Guaranteed more than \$27.75 billion in coverage benefits.
- ♦ Contributed approximately \$9.25 billion toward fulfillment of insurer promises.

HOW FLAHIGA WORKS WITH NOLHGA

FLAHIGA is authorized to work with NOLHGA to benefit of policyholders and the licensed insurers who fund FLAHIGA. FLAHIGA's involvement must comply with 631.721, Florida Statutes.

The NOLHGA website, <u>www.nolhga.com</u>, provides information about the individual state guaranty associations. This site includes links to state liquidation statutes, a composite picture of current assessment actions, statistics on insolvency activity, and educational and training materials.



2024 FLAHIGA ACTIVITES

THE FLAHIGA SAFETY NET

COVERAGE RESULTS - MULTISTATE INSOLVENCIES

1991 - 2024

Florida Policies, Covered Liabilities, and Net Costs Life, Annuity, and Accident & Health (including LTC)

Florida Results	Policies	Covered Liabilities	Net Costs	Net Costs / Covered Liabilities
Life	97,315	\$651,107,667	\$128,709,498	19.8%
Annuity	43,257	984,866,847	316,794,489	32.2%
A&H (incl LTC)	21,919	506,975,214	459,014,597	90.5%
TOTALS	162,491	\$2,142,949,729	\$904,518,584	42.2%

- Since 1991, FLAHIGA has provided safety net coverage to 162,491 Floridians impacted by 103 multi-state Life, Annuity, Accident & Health, and Long Term Care (LTC) insurer insolvencies.
- For these insolvencies, FLAHIGA's Covered Liability obligations were over \$ 2.1B. However, in concert with other state guaranty associations through the National Organization of Life and Health Guaranty Associations (NOLHGA), the FLAHIGA Board and staff reduced Net Costs to over \$904M, or 42% of Covered Liabilities.
- ♦ Lower Net Costs resulted from transferring policies and risk to solvent insurers (where possible), ongoing premium collections, ensuring access to insolvent insurers' assets, and estate and litigation recoveries. This reduced the assessment burden on Florida's solvent insurers and the indirect costs to Florida policyholders.

COMPANIES IN REHABILITATION OR LIQUIDATION

AMERICAN FINANCIAL LIFE INSURANCE COMPANY

Florida domicile writing credit life, credit accident and health, whole life, and major medical coverage; liquidated 10/3/1991. FLAHIGA paid \$550 in general expenses, \$515 in claims, and premium collections totaled \$1,127.

AMERICAN INDEPENDENCE LIFE INSURANCE COMPANY

Multi-state Missouri domicile writing life and annuity coverage; liquidated 4/20/1990. FLAHIGA paid \$5,229 in claims; general expenses were \$11,054; investment income was \$25,199.

AMERICAN SUN LIFE INSURANCE COMPANY

Multi-state Florida domicile primarily writing long-term nursing care and individual medical policies; liquidated 10/18/1989. FLAHIGA paid \$25,069 in claims; premium collections totaled \$139; investment income totaled \$27,271; and general expenses were \$3,799.

ASSOCIATED LIFE/UNITED FIRE INSURANCE COMPANY

Multi-state Illinois domicile writing ordinary group life insurance and individual and group accident and health insurance policies; liquidated 3/3/1989. FLAHIGA paid \$809 in general expenses; investment income was \$6,176.

BANKERS LIFE INSURANCE COMPANY

A North Carolina-domiciled company primarily wrote annuity coverage and was placed into rehabilitation on 6/27/2019. The company was liquidated on 11/30/2024. FLAHIGA paid \$213,270 in general expenses and \$20,100,100 in claims and assessed \$70,047,056.

CENTRAL LIFE INSURANCE COMPANY OF FLORIDA

Florida domicile primarily writing industrial life insurance; liquidated on 8/27/1991. FLAHIGA's general expenses were \$3,109 and investment income was \$70,046.

COLORADO BANKERS LIFE INSURANCE COMPANY

A North Carolina-domiciled company primarily wrote annuity coverage with some life and health insurance and was placed into rehabilitation on 6/27/2019. The company was liquidated on 11/30/2024. FLAHIGA paid general expenses of \$71,461, claims of \$17,800,100, and received assessments of \$63,296,725.

COLUMBIAN LIFE INSURANCE COMPANY

An Illinois-domiciled insurer wrote life, health, and annuity coverage and was placed into rehabilitation on 7/29/2024. FLAHIGA paid \$159 in general expenses.

COLUMBIAN MUTUAL LIFE INSURANCE COMPANY

This company, domiciled in New York, was placed in rehabilitation on 8/13/2024. FLAHIGA has paid \$159 in general expenses. The company writes a mixture of life, health, and annuity business.

EXECUTIVE LIFE INSURANCE COMPANY

Multi-state California domicile writing life and annuity coverage; liquidated 12/6/1991 and came under FLAHIGA coverage 60 days later, on 2/6/1992; assumed by Aurora. FLAHIGA paid \$13,781 in claims; general expenses were \$1,649, and investment income was \$23.

FLAHIGA MISCELLANEOUS

We combined several minimal insolvency accounts composed primarily of non-cancelable health and life policies into a single catch-all category, and balances remaining in closed estates are moved to this account by the line of business. As a result, FLAHIGA paid \$215,566 in general expenses, investment income was \$1,190,089, estate distributions were \$12,858, and Assessments were (\$460,125).

LIFE AND HEALTH INSURANCE COMPANY OF AMERICA

A Pennsylvania domicile writing all types of business; liquidated 7/2/2004. FLAHIGA paid (\$3,543) in claims; general expenses were \$39,641; investment income was \$197.

NATIONAL STATES INSURANCE COMPANY

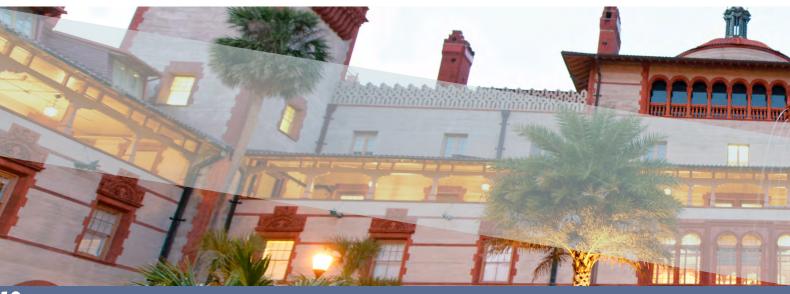
A Missouri domicile writing life, accident and health, long-term care, and Medicare Supplement policies was liquidated on 11/15/2010. FLAHIGA paid \$1,287,815 in claims, \$134,697 in general expenses, \$53,328 in investment income, and \$268,671 in premium collections.

NORTH CAROLINA MUTUAL LIFE INSURANCE COMPANY

A North Carolina-domiciled company writing life, health, and annuity coverage was liquidated on 10/31/22. FLAHIGA paid \$465,986 in claims, \$26,066 in general expenses, and received \$1,163,128 in estate distributions, \$3,888 in investment income, and \$39,906 in premium collections.

NORTHWESTERN NATIONAL INSURANCE COMPANY

A Wisconsin domicile primarily writing comprehensive health coverage. The company was placed into liquidation on 5/2/2019; FLAHIGA paid \$20,290 in claims; general expenses were \$207,845; premium collections were \$6,797; estate distribution was \$47,420; investment income was \$8,759.



PENN TREATY NETWORK AMERICA INSURANCE COMPANY (and its subsidiary AMERICAN NETWORK INSURANCE COMPANY)

Pennsylvania domiciles were placed in rehabilitation on 1/6/2009 and then liquidated on 3/1/2017. The primary product is long-term care policies. FLAHIGA paid \$119,379 in general expenses, received \$549,408 in investment income, and \$2,778,010 in estate distributions.

PHL VARIABLE

Domiciled in Connecticut, writing life and annuity coverage, and placed into rehabilitation on 5/20/2024. FLAHIGA paid \$1,292 in general expenses.

SENIOR AMERICAN INSURANCE COMPANY

A Pennsylvania domicile primarily wrote health coverage and placed it into liquidation on 9/3/2019; FLAHIGA paid \$429,718 in claims; general expenses were \$96,101; premium collections were \$65,357; investment income was \$2,730; and assessments received were \$451,881.

SENIOR HEALTH INSURANCE COMPANY OF PENNSYLVANIA

A Pennsylvania-domiciled company that wrote long-term care coverage and was placed into rehabilitation on 1/29/2020; FLAHIGA paid \$60,067 in general expenses.

SOUTHLAND NATIONAL INSURANCE COMPANY

A North Carolina-domiciled company primarily wrote life coverage and was placed into liquidation on 5/02/2023. FLAHIGA paid \$214,162 in claims and \$51,526 in general expenses; premium collections were \$5,209.

TIME INSURANCE COMPANY

A Wisconsin domicile wrote life, annuity, health, and long-term care coverage and was placed into liquidation on 9/1/2022; FLAHIGA paid \$63,198 in general expenses, \$10,000 in claims, and \$223,529 in estate distributions.



FLAHIGA FUNDING SOURCES

FUNDING, BY TYPE

FLAHIGA FUNDING SOURCES, BY TYPE

2020 - 2024

Life, Annuity and Accident & Health (including LTC)

Funding Type	2020			2023	2024		5-yr %
Assessments	\$7,453,271	\$8,401,113	\$792,049	\$990,636	\$133,625,037	\$151,262,106	80%
Estate Distributions	116,513	1,566,091	749,700	23,166,365	4,224,945	29,823,614	16%
Premiums	1,042,346	716,657	513,989	698,527	387,206	3,358,725	2%
Investment Income	112,765	316,153	387,304	1,048,317	1,937,114	3,801,653	2%
TOTALS:	\$8,724,895	\$11,000,014	\$2,443,042	\$25,903,845	\$140,174,302	\$188,246,098	100%

The amount of funding required annually to protect Floridians impacted by Life and Health insurer insolvencies varies by the number of insolvencies and the size and type of the insolvent blocks administered. Sources of funding, per Sections 631.717, 631.718, and 631.728, Florida Statutes, include the collection of premiums, subrogation against insolvent estates, and assessment of member insurers. For the four years from 2020 through 2024, FLAHIGA funding totaled approximately \$188.2M. Member insurer assessments of \$151.3M (80%) and Estate Distributions of \$29.8M (16%) were the most significant funding sources. Investment income contributed \$3.8M (2%), followed by premiums of \$3.4M (2%).

2024 FLAHIGA ASSESSMENTS

Class "A" Assessment (per member)

Under Section 631.718, Florida Statutes, the Board of Directors of the Florida Life and Health Insurance Guaranty Association on October 23, 2024, voted a Class "A" assessment to meet administrative costs and other general expenses and a Class "B" assessment to fulfill the Association's responsibilities as outlined in Section 631.717, Florida Statutes.

4500			
Life	Annuity	Health	Long Term Care
\$0	\$71,600,000	\$0	\$0
0	64,700,000	0	0
\$0	\$136,300,000	\$0	\$0
	\$0 0	\$0 \$71,600,000 0 64,700,000	\$0 \$71,600,000 \$0 0 64,700,000 0

\$500

FLAHIGA Statutes ♦ 631, Part III Life and Health Insurance Guaranty of Payments ♦ 631.711 Florida Life and Health Insurance Guaranty Act ♦ 631.712 Purpose ♦ 631.713 Application (Lines of Business and Persons Covered) ♦ 631.716 Board of Directors 631.717(12) Coverage Limits 631.718 Assessments **Important Links** www.flahiga.org www.flahiga.org/FAQ www.myfloridacfo.com/division/receiver www.nolhga.com

AUDITED FINANCIALS



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INDEPENDENT AUDITOR'S REPORT

Board of Directors Florida Life and Health Insurance Guaranty Association Jacksonville, Florida

Opinion

We have audited the accompanying financial statements of Florida Life and Health Insurance Guaranty Association, which comprise the statements of assets and net assets-modified cash basis as of December 31, 2024 and 2023, and the related statements of revenues, expenses, and other changes in net assets-modified cash basis and functional expenses-modified cash basis for the years then ended, and notes to the financial statements.

In our opinion, the financial statements referred to above present fairly, in all material respects, the assets and net assets of Florida Life and Health Insurance Guaranty Association as of December 31, 2024 and 2023, and its revenues and expenses for the years then ended in accordance with the modified cash basis of accounting described in Note 1.

Basis for Opinion

We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of Florida Life and Health Insurance Guaranty Association and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with the modified cash basis of accounting described in Note 1; this includes determining that the modified cash basis of accounting is an acceptable basis for the preparation of the financial statements in the circumstances. Management is also responsible for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with generally accepted auditing standards will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements, including omissions, are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with generally accepted auditing standards, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of Florida Life and Health Insurance Guaranty Association's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about Florida Life and Health Insurance Guaranty Association's ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control related matters that we identified during the audit.

Report on Supplementary Information

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The schedules of revenues, expenses, and other changes in net assets by account-modified cash basis on page 12 are presented for purposes of additional analysis and are not a required part of the basic financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the financial statements as a whole.

CARR, RIGGS & INGRAM, L.L.C.

Carr, Riggs & Ungram, L.L.C.

Tallahassee, FL April 21, 2025

Florida Life and Health Insurance Guaranty Association Statements of Assets and Net Assets-Modified Cash Basis

December 31,	2024 2023
Assets	
Cash and cash equivalents Investments, at cost	\$ 133,003,026 \$ 27,707,833 28,836,994 35,696,363
Total assets	\$ 161,840,020 \$ 63,404,196
Net Assets	
Net assets without restrictions	\$ 161,840,020 \$ 63,404,196
Total net assets	\$ 161,840,020 \$ 63,404,196

Florida Life and Health Insurance Guaranty Association Statements of Revenues, Expenses, and Other Changes in Net Assets-Modified Cash Basis

For the years ended December 31,	2024	2023
Revenues:		
Member company assessments	\$ 133,625,037 \$	990,636
Investment income	1,937,114	1,048,317
Estate distributions	4,224,945	23,166,365
Policyholder premium receipts	387,206	698,527
Total revenues	140,174,302	25,903,845
Expenses		
Program	41,690,619	3,832,002
General and administrative	47,859	169,921
Total expenses	41,738,478	4,001,923
Change in net assets	98,435,824	21,901,922
Net assets without restrictions, beginning of the year	63,404,196	41,502,274
Net assets without restrictions, end of the year	\$ 161,840,020 \$	63,404,196

Florida Life and Health Insurance Guaranty Association Statements of Functional Expenses-Modified Cash Basis

For the year ended December 31, 2024		Program Expense	Adn	General and Administrative		Total
Policyholder benefit claims NOLHGA expenses Administration	₩.	\$ 40,369,222 818,033 503,364	\$	- - 47,859	Φ.	\$ 40,369,222 818,033 551,223
Total expenses	∿	\$ 41,690,619	∿	47,859	∿	\$ 41,738,478
For the year ended December 31, 2023		Program Expense	Adr	General and Administrative		Total
Policyholder benefit claims	⋄	2,505,178	Ŷ	ı	φ.	2,505,178
NOLHGA expenses Administration		861,757 465,067		- 169,921		861,757 634,988
Total expenses	❖	3,832,002	⋄	169,921	↔	\$ 4,001,923

NOTE 1: SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Nature of Business

The Florida Life and Health Insurance Guaranty Association (the "Association") is an association of insurers licensed to sell life, annuity, and/or accident and health insurance in the State of Florida. The Association was organized in 1979 under Chapter 631, Part III, Florida Statutes, for protecting the policyholders against the failure of an insurer to perform its contractual obligations. The Association is empowered to assess and collect from its members the funds necessary to carry out its purpose.

Basis of Accounting

The accompanying financial statements have been prepared on the modified cash basis of accounting, which is a comprehensive basis of accounting other than accounting principles generally accepted in the United States of America (GAAP). Under the modified cash basis, certain revenues and the related assets are recognized when received rather than when earned, and certain expenses are recognized when paid rather than when the obligations are incurred. Consequently, the Association has not recognized receivables from members and others, accounts payable to vendors, and their related effects on the change in net assets in the accompanying financial statements. Additionally, the Association carries its investments at cost and has not subsequently adjusted those investments to fair value.

Use of Estimates

The preparation of financial statements in conformity with the modified cash basis of accounting requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

Cash and Cash Equivalents

All cash is invested in high-quality, short-term, U.S. dollar-denominated money market instruments that consist of U.S. Government obligations and repurchase agreements collateralized by U.S. Government obligations. Cash equivalents include investments with a maturity when acquired of 90 days or less.

Investments

Investments purchased by the Association are recorded at cost. Investment income is recorded when received.

NOTE 1: SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Net Assets

The Association reports information regarding its financial position and activities according to two classes of net assets: net assets without donor restrictions and net assets with donor restrictions.

Net assets without donor restrictions are resources available to support operations and not subject to donor restrictions. The only limits on the use of net assets without donor restrictions are the broad limits resulting from the nature of the Association, the environment in which it operates, the purposes specified in it corporate documents and its application for tax-exempt status, and any limits resulting from contractual agreements with creditors and others that are entered into in the course of its operations.

Net assets with donor restrictions are resources that are subject to donor-imposed restrictions. Some restrictions are temporary in nature, such as those that are restricted by a donor for use for a particular purpose or in a particular future period. Other restrictions may be perpetual in nature; such as those that are restricted by a donor that the resources be maintained in perpetuity.

When a donor's restriction is satisfied, either by using the resources in the manner specified by the donor or by the passage of time, the expiration of the restriction is reported in the financial statements by reclassifying the net assets from net assets with donor restrictions to net assets without donor restrictions.

The Association received no contributions for the years ended December 31, 2024 and 2023 that included donor purpose restrictions or restrictions based on time. All net assets of the Association are considered to be net assets without donor restrictions.

Revenue Recognition

Assessments, contributions, estate distributions, and policyholder premium receipts are recognized when received in accordance with the modified cash basis of accounting. Recognition of these amounts when received is consistent with the nature of these revenues as they are derived from the Association's assignment as the guaranty association for the State of Florida.

Expenses

Expenses are recorded when disbursements are made.

Income Taxes

The Association has been determined to be tax exempt as an instrumentality under Section 115 of the Internal Revenue Code.

NOTE 1: SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Functional Allocation of Expenses

The costs of providing various programs and activities have been summarized on a functional basis in the statements of revenues, expenses, and other changes in net assets-modified cash basis. Accordingly, certain costs have been allocated among the program and supporting services benefited. The majority of the expenses are identifiable to a specific program and charged directly to the respective program. Expenses, primarily administration related, which relate to both program and general operation of the Association, are allocated based on time spent in each capacity. All other expenses are allocated based upon direct or estimated use.

Estate Distributions

The Association receives monies recovered from the liquidation of the insolvent insurer assets as revenue to offset insolvent insurer claim expenditures and future liabilities while under contractual obligation.

Subsequent Events

Management has evaluated subsequent events through the date that the financial statements were available to be issued, April 21, 2025. No subsequent events occurring after this date have been evaluated for inclusion in these financial statements.

NOTE 2: ASSESSMENTS

Class A assessments to cover administrative expenses were \$500 per member company in the years ended December 31, 2024 and 2023. Class B assessments of \$133,339,037 for 2024 and \$675,136 for 2023 were made for the purpose of fulfilling the Association's responsibilities as set forth in Section 631.717, Florida Statutes.

NOTE 3: INVESTMENTS

Investments were composed of the following:

			U	nrealized Gain
December 31, 2024	Fair Value	Cost		(Loss)
U.S. government bonds	\$ 24,184,661	\$ 23,481,622	\$	703,039
Corporate bonds	5,424,024	5,355,372		68,652
Total investments	\$ 29,608,685	\$ 28,836,994	\$	771,691

NOTE 3: INVESTMENTS (Continued)

Investments were composed of the following:

			U	nrealized Gain
December 31, 2023	Fair Value	Cost		(Loss)
				_
U.S. government bonds	\$ 25,416,280	\$ 25,489,308	\$	(73,028)
Corporate bonds	9,808,737	10,207,055		(398,318)
Total investments	\$ 35,225,017	\$ 35,696,363	\$	(471,346)

Investment income consisted of the following:

Years ended December 31	2024	2023
Interest and dividends received	\$ 2,215,426 \$	1,468,464
Net realized gain (loss)	(278,312)	(420,147)
Total investment income received	\$ 1,937,114 \$	1,048,317

NOTE 4: COMMITMENTS AND CONTINGENCIES

The Association assesses potential liabilities in connection with lawsuits and threatened lawsuits. The filing of a suit or a formal assertion of a claim or assessment does not automatically indicate that accrual of a loss is appropriate. The Association is currently a party to arbitrations occurring in the normal course of operations. The Association has determined that it is less than reasonably possible that potential significant liabilities will occur in connection with ongoing cases.

Claims in litigation or threatened litigation that result from the Association's obligation to meet the contractual duties of liquidated insurers are limited by the statutory caps on the Association's liability on a per life per company basis, and liability is also limited by that section of Chapter 631, Part III, exempting the Association from punitive damages and interest. Historically, most litigated claims are settled on a compromise basis and, in any event, no claim pending or threatened is greater than an amount on a per life and per company basis beyond \$100,000, \$250,000, \$300,000, or \$500,000, depending on the applicable statutory cap, as far as can be reasonably anticipated.

The statutory liability limits on claims and the statutory authority to assess its member insurers to cover claims are designed to cover these potential liabilities. No litigation is anticipated from the Association's other major insolvencies as listed in the preceding note.

NOTE 4: COMMITMENTS AND CONTINGENCIES (Continued)

Future Obligations for Known Insolvencies

As part of its obligation under Florida Statutes to protect policyholders, the Association is liable for the contractual obligations of the impaired companies it administers. Under Florida Statutes, the Association is empowered to assess and collect from its members the funds necessary to carry out its purpose. The total estimated insurance contractual liability associated with open insolvencies was \$143,859,449 and \$37,012,180 at December 31, 2024 and 2023, respectively. Disbursements related to this liability totaled \$98,982,139 from December 31, 2024 through the date of this report.

Schedules of Revenues, Expenses, and Other Changes in Net Assets by Account-Modified Cash Basis Florida Life and Health Insurance Guaranty Association Year ended December 31, 2024 with Summarized Totals for 2023

				Long-Term	General and	2024	(Summarized) 2023
	Life	Annuity	А&Н	Care	Administrative	Total	Total
Davonilee							
Mombor common occording att	4.	\$ 100 000 001 \$	\$ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	•	000	380 EOO \$ 133 63E 037	262 000
Welling collibally assessinells	· Դ	¢ 10/'C+C'CCT ¢		<u>ጉ</u>	203,300	/CO'C70'CCT ¢	000'066 ¢
Investment income	228,428	516,526	1,192,160	•	1	1,937,114	1,048,317
Estate distributions	1,254,216	•	2,970,729	•	1	4,224,945	23,166,365
Policyholder premium receipts	45,176	•	276,673	65,357	•	387,206	698,527
Total revenues	1,527,820	133,860,307	4,431,318	65,357	289,500	140,174,302	25,903,845
Expenses:							
Policyholder benefit claims	842,567	38,243,741	1,696,751	(413,837)	•	40,369,222	2,505,178
NOLHGA expense	102,274	320,631	287,230	107,898	1	818,033	861,757
Administration	66,383	61,598	327,049	48,334	47,859	551,223	634,988
Total expenses	1,011,224	38,625,970	2,311,030	(257,605)	47,859	41,738,478	4,001,923
Change in net assets	516,596	95,234,337	2,120,288	322,962	241,641	98,435,824	21,901,922
Net assets without donor restrictions, beginning of the year	7,428,071	16,611,237	39,452,972	27,584	(115,668)	63,404,196	41,502,274
Net assets without donor restrictions, end of the year	\$ 7,944,667	7,944,667 \$ 111,845,574 \$ 41,573,260 \$	41,573,260 \$	350,546 \$	125,973	125,973 \$ 161,840,020 \$ 63,404,196	\$ 63,404,196

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Current term expires 2028

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^{*}Serves on all committees through position of Association Chair

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