

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code). ▶ Complete all entries in accordance with the instructions to the Form 5500.	OMB Nos. 1210-0110 1210-0089 2024 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024	
A	This return/report is for: ☐ a multiemployer plan ☐ a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.) ☒ a single-employer plan ☐ a DFE (specify) _____
B	This return/report is: ☐ the first return/report ☐ the final return/report ☐ an amended return/report ☐ a short plan year return/report (less than 12 months)
C	If the plan is a collectively-bargained plan, check here. ▶ ☐
D	Check box if filing under: ☒ Form 5558 ☐ automatic extension ☐ the DFVC program ☐ special extension (enter description)
E	If this is a retroactively adopted plan permitted by SECURE Act section 201, check here. ▶ ☐

Part II	Basic Plan Information—enter all requested information
1a	Name of plan UNUM GROUP PENSION PLAN
1b	Three-digit plan number (PN) ▶ 001
1c	Effective date of plan 12/31/1946
2a	Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) UNUM GROUP 2211 CONGRESS STREET PORTLAND, ME 04122
2b	Employer Identification Number (EIN) 62-1598430
2c	Plan Sponsor's telephone number 207-575-2145
2d	Business code (see instructions) 524140

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE	Filed with authorized/valid electronic signature.	10/09/2025	BEN ROBERGE
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address ☒ Same as Plan Sponsor	3b Administrator's EIN 3c Administrator's telephone number
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name	4b EIN 4d PN
5 Total number of participants at the beginning of the plan year	5 10047
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d). a(1) Total number of active participants at the beginning of the plan year a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. f Total. Add lines 6d and 6e g(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) g(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....	6a(1) 2887 6a(2) 2680 6b 3194 6c 3848 6d 9722 6e 268 6f 9990 6g(1) 6g(2) 6h 0
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:

1A 1C 3H 1I

b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:

9a Plan funding arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) ☒ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor
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10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

a Pension Schedules

- (1) ☒ **R** (Retirement Plan Information)
- (2) ☐ **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary
- (3) ☒ **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary
- (4) ☐ **DCG** (Individual Plan Information) – Number Attached _____
- (5) ☐ **MEP** (Multiple-Employer Retirement Plan Information)

b General Schedules

- (1) ☒ **H** (Financial Information)
- (2) ☐ **I** (Financial Information – Small Plan)
- (3) ☐ **A** (Insurance Information) – Number Attached 0
- (4) ☒ **C** (Service Provider Information)
- (5) ☒ **D** (DFE/Participating Plan Information)
- (6) ☐ **G** (Financial Transaction Schedules)

Part III Form M-1 Compliance Information (to be completed by welfare benefit plans)

11a If the plan provides welfare benefits, was the plan subject to the Form M-1 filing requirements during the plan year? (See instructions and 29 CFR 2520.101-2.) ☐ Yes ☐ No

If "Yes" is checked, complete lines 11b and 11c.

11b Is the plan currently in compliance with the Form M-1 filing requirements? (See instructions and 29 CFR 2520.101-2.) ☐ Yes ☐ No

11c Enter the Receipt Confirmation Code for the 2024 Form M-1 annual report. If the plan was not required to file the 2024 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code _____

SCHEDULE SB (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Single-Employer Defined Benefit Plan Actuarial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500 or 5500-SF.	OMB No. 1210-0110 2024 This Form is Open to Public Inspection
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024	
▶ Round off amounts to nearest dollar.	
▶ Caution: A penalty of \$1,000 will be assessed for late filing of this report unless reasonable cause is established.	
A Name of plan UNUM GROUP PENSION PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF UNUM GROUP	D Employer Identification Number (EIN) 62-1598430
E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B	F Prior year plan size: ☐ 100 or fewer ☐ 101-500 ☒ More than 500

Part I	Basic Information			
1	Enter the valuation date: Month 01 Day 01 Year 2024			
2	Assets:			
a	Market value	2a	1295871291	
b	Actuarial value	2b	1418569313	
3	Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a	For retired participants and beneficiaries receiving payment	3129	776519812	776519812
b	For terminated vested participants	4096	356876382	356876382
c	For active participants	2887	307906245	311838279
d	Total	10112	1441302439	1445234473
4	If the plan is in at-risk status, check the box and complete lines (a) and (b). ☐			
a	Funding target disregarding prescribed at-risk assumptions	4a		
b	Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	4b		
5	Effective interest rate	5	5.16 %	
6	Target normal cost			
a	Present value of current plan year accruals	6a	0	
b	Expected plan-related expenses	6b	9179629	
c	Target normal cost	6c	9179629	

Statement by Enrolled Actuary
To the best of my knowledge, the information supplied in this schedule and accompanying schedules, statements and attachments, if any, is complete and accurate. Each prescribed assumption was applied in accordance with applicable law and regulations. In my opinion, each other assumption is reasonable (taking into account the experience of the plan and reasonable expectations) and such other assumptions, in combination, offer my best estimate of anticipated experience under the plan.

SIGN HERE	Signature of actuary TIMOTHY W. DEVOE Type or print name of actuary WILLIS TOWERS WATSON US LLC Firm name 75 ARLINGTON STREET FLOOR 2 BOSTON, MA 02116 Address of the firm	09/23/2025 Date 23-07222 Most recent enrollment number 617-638-3700 Telephone number (including area code)
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Part II Beginning of Year Carryover and Prefunding Balances

		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	63778483	0
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	22015583	0
9	Amount remaining (line 7 minus line 8)	41762900	0
10	Interest on line 9 using prior year's actual return of <u>11.57</u> %	4831968	0
11	Prior year's excess contributions to be added to prefunding balance:		
a	Present value of excess contributions (line 38a from prior year)		0
b(1)	Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of <u>5.29</u> %		0
b(2)	Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
c	Total available at beginning of current plan year to add to prefunding balance		0
d	Portion of (c) to be added to prefunding balance		0
12	Other reductions in balances due to elections or deemed elections	0	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	46594868	0

Part III Funding Percentages

14	Funding target attainment percentage	14	94.93 %
15	Adjusted funding target attainment percentage	15	95.17 %
16	Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	90.78 %
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and Liquidity Shortfalls**18** Contributions made to the plan for the plan year by employer(s) and employees:

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
Totals ▶			18(b)	0	18(c) 0

19 Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:

a	Contributions allocated toward unpaid minimum required contributions from prior years	19a	0
b	Contributions made to avoid restrictions adjusted to valuation date	19b	0
c	Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	0

20 Quarterly contributions and liquidity shortfalls:

a	Did the plan have a "funding shortfall" for the prior year?	☒ Yes ☐ No	
b	If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner?	☒ Yes ☐ No	
c	If line 20a is "Yes," see instructions and complete the following table as applicable:		
Liquidity shortfall as of end of quarter of this plan year			
(1) 1st	(2) 2nd	(3) 3rd	(4) 4th
0	0	0	0

Part V	Assumptions Used to Determine Funding Target and Target Normal Cost
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21	Discount rate:	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">a Segment rates:</td> <td style="width:33%;">1st segment: 4.75 %</td> <td style="width:33%;">2nd segment: 4.87 %</td> <td style="width:33%;">3rd segment: 5.59 %</td> <td style="width:33%;">☐ N/A, full yield curve used</td> </tr> </table>	a Segment rates:	1st segment: 4.75 %	2nd segment: 4.87 %	3rd segment: 5.59 %	☐ N/A, full yield curve used		
a Segment rates:	1st segment: 4.75 %	2nd segment: 4.87 %	3rd segment: 5.59 %	☐ N/A, full yield curve used					
	b Applicable month (enter code)	21b	4						
22	Weighted average retirement age	22	63						
23	Mortality table(s) (see instructions) ☐ Prescribed - combined ☒ Prescribed - separate ☐ Substitute								

Part VI	Miscellaneous Items
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24	Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment.....	☐ Yes ☒ No
25	Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment.....	☐ Yes ☒ No
26	Demographic and benefit information	
	a Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment.	☒ Yes ☐ No
	b Is the plan required to provide a projection of expected benefit payments? If "Yes," see instructions regarding required attachment ...	☒ Yes ☐ No
27	If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment.....	27

Part VII	Reconciliation of Unpaid Minimum Required Contributions For Prior Years
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28	Unpaid minimum required contributions for all prior years	28	0
29	Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a).....	29	0
30	Remaining amount of unpaid minimum required contributions (line 28 minus line 29).....	30	0

Part VIII	Minimum Required Contribution For Current Year
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31	Target normal cost and excess assets (see instructions):		
	a Target normal cost (line 6c)	31a	9179629
	b Excess assets, if applicable, but not greater than line 31a	31b	0
32	Amortization installments:	Outstanding Balance	Installment
	a Net shortfall amortization installment	73260028	7263348
	b Waiver amortization installment	0	0
33	If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	33	
34	Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33).....	34	16442977
		Carryover balance	Prefunding balance
35	Balances elected for use to offset funding requirement	16442977	0
36	Additional cash requirement (line 34 minus line 35)	36	0
37	Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	37	0
38	Present value of excess contributions for current year (see instructions)		
	a Total (excess, if any, of line 37 over line 36)	38a	0
	b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	38b	0
39	Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	39	0
40	Unpaid minimum required contributions for all years	40	0

Part IX	Pension Funding Relief Under the American Rescue Plan Act of 2021 (See Instructions)
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41	If an election was made to use the extended amortization rule for a plan year beginning on or before December 31, 2021, check the box to indicate the first plan year for which the rule applies. ☐ 2019 ☐ 2020 ☒ 2021
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SCHEDULE C (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110
		2024
		This Form is Open to Public Inspection.

For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024		
A Name of plan UNUM GROUP PENSION PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 UNUM GROUP	D Employer Identification Number (EIN) 62-1598430	

Part I	Service Provider Information (see instructions)
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You must complete this Part, in accordance with the instructions, to report the information required for **each person** who received, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of monetary value) in connection with services rendered to the plan or the person's position with the plan during the plan year. If a person received **only** eligible indirect compensation for which the plan received the required disclosures, you are required to answer line 1 but are not required to include that person when completing the remainder of this Part.

1 Information on Persons Receiving Only Eligible Indirect Compensation

- a Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions)..... ☒ Yes ☐ No
- b If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
ARTISAN PARTNERS LIMITED
30-0551775

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
PINEBRIDGE INVESTMENTS LLC
65 EAST 55TH STREET 7TH FLOOR NEW YORK, NY 10022

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
PORTFOLIO ADVISORS, LLC
06-1487853

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
SEI TRUST COMPANY
06-1271230

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

TRIGUARD MANAGEMENT, LLC

26-1968878

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

WARBURG PINCUS LLC

13-3536050

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

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(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)

WILLIS TOWERS WATSON US LLC

53-0181291

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
11 15 27 50 51 65	NONE	1072490	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

(a) Enter name and EIN or address (see instructions)

STATE STREET GLOBAL ADVISORS

04-1867445

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
18 19 51 52 99	NONE	707808	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☒ No ☐

(a) Enter name and EIN or address (see instructions)

SUSTAINABLE GROWTH ADVISERS

05-0571266

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	NONE	569091	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☒

2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)

BANK OF NEW YORK MELLON

13-5160382

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
21 50 52 55 62 99	NONE	186745	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☒

(a) Enter name and EIN or address (see instructions)

NISA INVESTMENT ADVISORS

48-1140940

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	NONE	145756	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

(a) Enter name and EIN or address (see instructions)

UNUMPROVIDENT CORP II

62-1598430

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
29 50	NONE	77832	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)

JP MORGAN CHASE BANK

13-4994650

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
24 27 28 50 51	NONE	73042	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

(a) Enter name and EIN or address (see instructions)

WELLINGTON TRUST

04-2755549

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	NONE	23103	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☒

(a) Enter name and EIN or address (see instructions)

VERRILL & DANA LLP

01-0176171

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
29 50	NONE	5582	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

Part I Service Provider Information (continued)

3. If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received \$1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

Part II Service Providers Who Fail or Refuse to Provide Information

4 Provide, to the extent possible, the following information for each service provider who failed or refused to provide the information necessary to complete this Schedule.

(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide

Part III Termination Information on Accountants and Enrolled Actuaries (see instructions)
(complete as many entries as needed)

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

SCHEDULE D (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration	DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2024 This Form is Open to Public Inspection.
For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024		
A Name of plan UNUM GROUP PENSION PLAN		B Three-digit plan number (PN) ▶ 001
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 UNUM GROUP		D Employer Identification Number (EIN) 62-1598430
Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)	
a Name of MTIA, CCT, PSA, or 103-12 IE: COLLECTIVE US GVT STIF 15 BPS		
b Name of sponsor of entity listed in (a): BANK OF NEW YORK MELLON		
c EIN-PN 13-6154008-012	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 9980100
a Name of MTIA, CCT, PSA, or 103-12 IE: MSCI CAD INDX SL CTF		
b Name of sponsor of entity listed in (a): STATE STREET GLOBAL ADVISORS		
c EIN-PN 43-6887641-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 6378600
a Name of MTIA, CCT, PSA, or 103-12 IE: MSCI UNITED STATES INDEX SL CTF		
b Name of sponsor of entity listed in (a): STATE STREET GLOBAL ADVISORS		
c EIN-PN 26-0127386-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 157189001
a Name of MTIA, CCT, PSA, or 103-12 IE: MSCI EAFE INDEX SL CTF		
b Name of sponsor of entity listed in (a): STATE STREET GLOBAL ADVISORS		
c EIN-PN 04-6826003-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 49052693
a Name of MTIA, CCT, PSA, or 103-12 IE: IR+M LONG CORP COLL FUND CLASS C		
b Name of sponsor of entity listed in (a): GLOBAL TRUST COMPANY		
c EIN-PN 37-6567224-005	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 124076522
a Name of MTIA, CCT, PSA, or 103-12 IE: WTW GROUPS TRUST REAL ASSETS FUND		
b Name of sponsor of entity listed in (a): TOWERS WATSON INVESTMENT SERVICES, INC.		
c EIN-PN 82-6695738-005	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 166080699
a Name of MTIA, CCT, PSA, or 103-12 IE: JPMCB EMERGING MARKETS AGGREGATE		
b Name of sponsor of entity listed in (a): JPMORGAN CHASE BANK, N.A.		
c EIN-PN 82-3282328-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 32397442
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Schedule D (Form 5500) 2024 v. 240311		

a Name of MTIA, CCT, PSA, or 103-12 IE: ARTISAN MULTIPLE INVESTMENT TRUST

b Name of sponsor of entity listed in (a): SEI TRUST COMPANY

c EIN-PN 26-3653822-021	d Entity code E	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 53378120
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a Name of MTIA, CCT, PSA, or 103-12 IE: WTC-CIF II SECURITIZED OPPS

b Name of sponsor of entity listed in (a): WELLINGTON TRUST COMPANY, NA

c EIN-PN 04-6913417-160	d Entity code E	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 46554499
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a Name of MTIA, CCT, PSA, or 103-12 IE: PINEBRIDGE GLB OPP CRE

b Name of sponsor of entity listed in (a): PINEBRIDGE INVESTMENTS LLC

c EIN-PN 47-5317063-001	d Entity code E	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 93042785
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a Name of MTIA, CCT, PSA, or 103-12 IE: SANDS CAPITAL COLL INVESTMENT TRUST

b Name of sponsor of entity listed in (a): SEI TRUST COMPANY

c EIN-PN 85-0894185-143	d Entity code E	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 52965208
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a Name of MTIA, CCT, PSA, or 103-12 IE: METROPOLIS COLL INVESTMENT TRUST

b Name of sponsor of entity listed in (a): SEI TRUST COMPANY

c EIN-PN 92-0271646-166	d Entity code E	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 53330465
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
-----------------	----------------------	---

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
-----------------	----------------------	---

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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Part II Information on Participating Plans (to be completed by DFEs, other than DCGs)

(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)

a Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN

SCHEDULE H (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110
		2024
		This Form is Open to Public Inspection

For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

A Name of plan UNUM GROUP PENSION PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 UNUM GROUP	D Employer Identification Number (EIN) 62-1598430

Part I	Asset and Liability Statement		
1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.			
Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	4418673	1366310
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions.....	1b(2)		
(3) Other	1b(3)	1334916	20124908
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities	1c(2)	238296769	364657709
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)	54973272	52530075
(5) Partnership/joint venture interests	1c(5)	109199243	98358819
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)	596895486	545155057
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)	316853028	299271077
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)		
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other.....	1c(15)	-22197221	-16145415

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities.....	1d(1)		
(2) Employer real property.....	1d(2)		
e Buildings and other property used in plan operation.....	1e		
f Total assets (add all amounts in lines 1a through 1e).....	1f	1299774166	1365318540
Liabilities			
g Benefit claims payable.....	1g	46686	9210
h Operating payables.....	1h	374000	370457
i Acquisition indebtedness.....	1i		
j Other liabilities.....	1j	3902875	123722103
k Total liabilities (add all amounts in lines 1g through 1j).....	1k	4323561	124101770
Net Assets			
l Net assets (subtract line 1k from line 1f).....	1l	1295450605	1241216770

Part II Income and Expense Statement

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

Income		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers.....	2a(1)(A)		
(B) Participants.....	2a(1)(B)		
(C) Others (including rollovers).....	2a(1)(C)		
(2) Noncash contributions.....	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B), (C), and line 2a(2)	2a(3)		
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)	-511681	
(B) U.S. Government securities.....	2b(1)(B)	5449357	
(C) Corporate debt instruments.....	2b(1)(C)		
(D) Loans (other than to participants).....	2b(1)(D)		
(E) Participant loans.....	2b(1)(E)		
(F) Other.....	2b(1)(F)	-1649533	
(G) Total interest. Add lines 2b(1)(A) through (F).....	2b(1)(G)		3288143
(2) Dividends: (A) Preferred stock.....	2b(2)(A)		
(B) Common stock.....	2b(2)(B)	406218	
(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)		
(D) Total dividends. Add lines 2b(2)(A) , (B), and (C).....	2b(2)(D)		406218
(3) Rents.....	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds.....	2b(4)(A)	125036906	
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)	147417483	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result.....	2b(4)(C)		
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate.....	2b(5)(A)		
(B) Other.....	2b(5)(B)	-30890883	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B).....	2b(5)(C)		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		43201912
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		33473263
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		
c Other income	2c		1433131
d Total income. Add all income amounts in column (b) and enter total	2d		28531207

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	72199405	
(2) To insurance carriers for the provision of benefits	2e(2)	-225847	
(3) Other	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		71973558
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees	2i(2)	415792	
(3) Recordkeeping fees	2i(3)		
(4) IQPA audit fees	2i(4)		
(5) Investment advisory and investment management fees	2i(5)	2326186	
(6) Bank or trust company trustee/custodial fees	2i(6)		
(7) Actuarial fees	2i(7)	113890	
(8) Legal fees	2i(8)	5582	
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses	2i(11)	7930034	
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		10791484
j Total expenses. Add all expense amounts in column (b) and enter total	2j		82765042

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		-54233835
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

3 Complete lines 3a through 3c if the opinion of an independent qualified public accountant is attached to this Form 5500. Complete line 3d if an opinion is not attached.

a The attached opinion of an independent qualified public accountant for this plan is (see instructions):

(1) ☒ Unmodified (2) ☐ Qualified (3) ☐ Disclaimer (4) ☐ Adverse

b Check the appropriate box(es) to indicate whether the IQPA performed an ERISA section 103(a)(3)(C) audit. Check both boxes (1) and (2) if the audit was performed pursuant to both 29 CFR 2520.103-8 and 29 CFR 2520.103-12(d). Check box (3) if pursuant to neither.

(1) ☒ DOL Regulation 2520.103-8 (2) ☐ DOL Regulation 2520.103-12(d) (3) ☐ neither DOL Regulation 2520.103-8 nor DOL Regulation 2520.103-12(d).

c Enter the name and EIN of the accountant (or accounting firm) below:

(1) Name: **ERNST & YOUNG LLP**

(2) EIN: **34-6565596**

d The opinion of an independent qualified public accountant is **not attached** as part of Schedule H because:

(1) ☐ This form is filed for a CCT, PSA, DCG or MTIA. (2) ☐ It will be attached to the next Form 5500 pursuant to 29 CFR 2520.104-50.

Part IV Compliance Questions

4 CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete lines 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete lines 4j and 4l. MTIAs also do not complete line 4l. DCGs do not complete lines 4e, 4f, 4k, 4l, and 5, and DCGs generally complete the rest of Part IV collectively for all plans in the DCG, except as otherwise provided (see instructions).

During the plan year:

	Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)		☒	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)		☒	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)		☒	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)		☒	
e Was this plan covered by a fidelity bond?	☒		25000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		☒	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		☒	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		☒	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	☒		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	☒		
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		☒	
l Has the plan failed to provide any benefit when due under the plan?		☒	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)			
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year?..... ☐ Yes ☒ No
If "Yes," enter the amount of any plan assets that reverted to the employer this year _____.

5b If, during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s) to which assets or liabilities were transferred. (See instructions.)

5b(1) Name of plan(s)	5b(2) EIN(s)	5b(3) PN(s)

5c Was the plan a defined benefit plan covered under the PBGC insurance program at any time during this plan year? (See ERISA section 4021 and instructions.) ☒ Yes ☐ No ☐ Not determined

If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year 554436.

SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Retirement Plan Information This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2024 This Form is Open to Public Inspection.
For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024		
A Name of plan UNUM GROUP PENSION PLAN		B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 UNUM GROUP		D Employer Identification Number (EIN) 62-1598430
Part I	Distributions	
All references to distributions relate only to payments of benefits during the plan year.		
1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....		1 0
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): _____		
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.		
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year		3 55
Part II	Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part.)	
4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? ☐ Yes ☒ No ☐ N/A		
If the plan is a defined benefit plan, go to line 8.		
5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month _____ Day _____ Year _____		
If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.		
6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived)		6a
b Enter the amount contributed by the employer to the plan for this plan year		6b
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount).....		6c
If you completed line 6c, skip lines 8 and 9.		
7 Will the minimum funding amount reported on line 6c be met by the funding deadline? ☐ Yes ☐ No ☐ N/A		
8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? ☐ Yes ☐ No ☒ N/A		
Part III	Amendments	
9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box..... ☐ Increase ☐ Decrease ☐ Both ☒ No		
Part IV	ESOPs (see instructions). If this is not a plan described under section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.	
10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan? ☐ Yes ☐ No		
11 a Does the ESOP hold any preferred stock? ☐ Yes ☐ No		
b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.) ☐ Yes ☐ No		
12 Does the ESOP hold any stock that is not readily tradable on an established securities market? ☐ Yes ☐ No		
For Paperwork Reduction Act Notice, see the Instructions for Form 5500.		
Schedule R (Form 5500) 2024 v. 240311		

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that (1) contributed more than 5% of total contributions to the plan during the plan year or (2) was one of the top-ten highest contributors (measured in dollars). See instructions. *Complete as many entries as needed to report all applicable employers.*

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

14 Enter the number of deferred vested and retired participants (inactive participants), as of the beginning of the plan year, whose contributing employer is no longer making contributions to the plan for:

a The current plan year. Check the box to indicate the counting method used to determine the number of inactive participants: ☐ last contributing employer ☐ alternative ☐ reasonable approximation (see instructions for required attachment).....

14a

b The plan year immediately preceding the current plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment).....

14b

c The second preceding plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment).....

14c

15 Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:

a The corresponding number for the plan year immediately preceding the current plan year.....

15a

b The corresponding number for the second preceding plan year.....

15b

16 Information with respect to any employers who withdrew from the plan during the preceding plan year:

a Enter the number of employers who withdrew during the preceding plan year.....

16a

b If line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers.....

16b

17 If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment..... ☐

Part VI Additional Information for Single-Employer and Multiemployer Defined Benefit Pension Plans

18 If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole or in part) of liabilities to such participants and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see instructions regarding supplemental information to be included as an attachment..... ☐

19 If the total number of participants is 1,000 or more, complete lines (a) and (b):

a Enter the percentage of plan assets held as:

Public Equity: 35.0 % Private Equity: 8.0 % Investment-Grade Debt and Interest Rate Hedging Assets: 28.0 %

High-Yield Debt: 14.0 % Real Assets: 13.0 % Cash or Cash Equivalents: 2.0 % Other: 0.0 %

b Provide the average duration of the Investment-Grade Debt and Interest Rate Hedging Assets:

☐ 0-5 years ☐ 5-10 years ☐ 10-15 years ☒ 15 years or more

20 PBGC missed contribution reporting requirements. If this is a multiemployer plan or a single-employer plan that is not covered by PBGC, skip line 20.

a Is the amount of unpaid minimum required contributions for all years from Schedule SB (Form 5500) line 40 greater than zero? ☐ Yes ☒ No

b If line 20a is "Yes," has PBGC been notified as required by ERISA sections 4043(c)(5) and/or 303(k)(4)? Check the applicable box:

☐ Yes.

☐ No. Reporting was waived under 29 CFR 4043.25(c)(2) because contributions equal to or exceeding the unpaid minimum required contribution were made by the 30th day after the due date.

☐ No. The 30-day period referenced in 29 CFR 4043.25(c)(2) has not yet ended, and the sponsor intends to make a contribution equal to or exceeding the unpaid minimum required contribution by the 30th day after the due date.

☐ No. Other. Provide explanation.....

Part VII IRS Compliance Questions

21a Does the plan satisfy the coverage and nondiscrimination tests of Code sections 410(b) and 401(a)(4) by combining this plan with any other plans under the permissive aggregation rules? ☐ Yes ☒ No

21b If this is a Code section 401(k) plan, check all boxes that apply to indicate how the plan is intended to satisfy the nondiscrimination requirements for employee deferrals and employer matching contributions (as applicable) under Code sections 401(k)(3) and 401(m)(2).

☐ Design-based safe harbor method

☐ "Prior year" ADP test

☐ "Current year" ADP test

☐ N/A

22 If the plan sponsor is an adopter of a pre-approved plan that received a favorable IRS Opinion Letter, enter the date of the Opinion Letter ___/___/___ (MM/DD/YYYY) and the Opinion Letter serial number_____.

FINANCIAL STATEMENTS AND SUPPLEMENTAL
SCHEDULES

Unum Group Pension Plan
Years Ended December 31, 2024 and 2023
With Report of Independent Auditors

Unum Group Pension Plan

Financial Statements and Supplemental Schedules

Years Ended December 31, 2024 and 2023

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Report of Independent Auditors

The Benefit Finance Committee
Unum Group Pension Plan

Scope and Nature of the ERISA Section 103(a)(3)(C) Audit

We have performed audits of the financial statements of Unum Group Pension Plan (the Plan), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) (ERISA Section 103(a)(3)(C) audit). The financial statements comprise the statements of net assets available for benefits as of December 31, 2024 and 2023, and the related statements of changes in net assets available for benefits for the years then ended, and the related notes (collectively referred to as the “financial statements”).

Management, having determined it is permissible in the circumstances, has elected to have the audits of the financial statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor’s Rules and Regulations for Reporting and Disclosure under ERISA. As permitted by ERISA Section 103(a)(3)(C), our audits need not extend to any statements or information related to assets held for investment of the Plan (investment information) by a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a state or federal agency, provided that the statements or information regarding assets so held are prepared and certified to by the bank or similar institution or insurance carrier in accordance with 29 CFR 2520.103-5 of the Department of Labor’s Rules and Regulations for Reporting and Disclosure under ERISA (qualified institution).

Management has obtained certifications from a qualified institution as of December 31, 2024 and 2023, and for the years then ended, stating that the certified investment information, as described in Note 3 to the financial statements, is complete and accurate.

Opinion

In our opinion, based on our audits and on the procedures performed as described in the Auditor’s Responsibilities for the Audit of the Financial Statements section

- the amounts and disclosures in the accompanying financial statements, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.
- the information in the accompanying financial statements related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America (GAAS). 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 the Plan 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 ERISA Section 103(a)(3)(C) 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 accounting principles generally accepted in the United States of America, and 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. Management's election of the ERISA Section 103(a)(3)(C) audit does not affect management's responsibility for the financial statements.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for one year after the date that the financial statements are available to be issued.

Management is also responsible for maintaining a current plan instrument, including all plan amendments, administering the Plan, and determining that the Plan's transactions that are presented and disclosed in the financial statements are in conformity with the Plan's provisions, including maintaining sufficient records with respect to each of the participants, to determine the benefits due or which may become due to such participants.

Auditor's Responsibilities for the Audit of the Financial Statements

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit section of our report, 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 GAAS 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 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 GAAS, 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 the Plan'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 the Plan's ability to continue as a going concern for a reasonable period of time.

Our audits did not extend to the certified investment information, except for obtaining and reading the certification, comparing the certified investment information with the related information presented and disclosed in the financial statements, and reading the disclosures relating to the certified investment information to assess whether they are in accordance with the presentation and disclosure requirements of accounting principles generally accepted in the United States of America.

Accordingly, the objective of an ERISA Section 103(a)(3)(C) audit is not to express an opinion about whether the financial statements as a whole are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.

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.

Other Matter

Supplemental Schedules Required by ERISA

The supplemental schedules of assets (held at end of year) as of December 31, 2024, schedule of assets acquired and disposed of within year and reportable transactions for the year then ended, are presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. 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 included in the supplemental schedules, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audits 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 GAAS. For information included in the supplemental schedules that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

In forming our opinion on the supplemental schedules, we evaluated whether the supplemental schedules, other than the information agreed to or derived from the certified investment information, including their form and content, are presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

In our opinion

- the form and content of the supplemental schedules, other than the information in the supplemental schedules that agreed to or is derived from the certified investment information, are presented, in all material respects, in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.
- the information in the supplemental schedules related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

Ernst + Young LLP

September 25, 2025

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS**Unum Group Pension Plan**

	December 31	
	2024	2023
Assets		
Investments	\$ 1,343,827,322	\$ 1,321,306,077
Non-Interest Bearing Cash	1,366,310	4,418,673
Securities and Other Receivable	18,837,607	246,051
Interest and Dividends Receivable	1,287,301	1,088,865
Total Assets	1,365,318,540	1,327,059,666
Liabilities		
Securities and Other Accounts Payable	765,228	3,902,875
Administrative Expenses Payable	370,457	374,000
Repurchase Agreements	122,956,875	27,285,500
Total Liabilities	124,092,560	31,562,375
Net Assets Available for Benefits	\$ 1,241,225,980	\$ 1,295,497,291

See notes to financial statements. Certain prior year amounts above were reclassified to conform to current year presentation.

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

Unum Group Pension Plan

	Year Ended December 31	
	2024	2023
Additions		
Investment Income:		
Interest	\$ 4,199,477	\$ 6,061,050
Dividends	11,190,990	11,158,070
Other Income	1,433,131	304,543
Total Additions	16,823,598	17,523,663
Deductions		
Benefit Payments to Participants	72,236,881	75,557,865
Annuity Contract Purchase (Refund) - Note 1	(225,846)	72,091,014
Administrative Expenses	10,791,484	11,587,418
Total Deductions	82,802,519	159,236,297
Net Appreciation in Fair Value of Investments	11,707,610	129,334,102
Net Decrease	(54,271,311)	(12,378,532)
Net Assets Available for Benefits		
Beginning of Year	1,295,497,291	1,307,875,823
End of Year	<u>\$ 1,241,225,980</u>	<u>\$ 1,295,497,291</u>

See notes to financial statements.

NOTES TO FINANCIAL STATEMENTS

Unum Group Pension Plan

December 31, 2024

Note 1 - Description of the Plan

The following description of the Unum Group Pension Plan (the Plan) provides only general information about the Plan's provisions. Participants should refer to the Plan Document and Summary Plan Description for a more complete description of the Plan's provisions, copies of which may be obtained from the Plan sponsor.

General

Unum Group (the Company) is the Plan sponsor. The Bank of New York Mellon/BNY Mellon, N.A is the directed custodial trustee of the Plan (BNY Mellon or the Trustee).

The Plan is a noncontributory defined benefit plan and covers domestic employees of the Company who were eligible to participate prior to freezing the Plan effective December 31, 2013 (the Freeze Date). The purpose of the Plan is to provide covered employees a qualified plan under section 401(a) of the Internal Revenue Code of 1986 (the Code). The Plan is administered by the Company. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA), as amended.

The Pension Benefits Finance Committee (the Committee) serves as a fiduciary of the Plan and is responsible for reviewing the Plan's financial, investment, and asset custody policies, as well as overseeing the Plan's service matters. The Committee's members are appointed by and report to the Human Capital Committee of the Company's Board of Directors.

Pension Plan Annuity Purchase

In November 2023, the Company purchased a group annuity contract which transferred a portion of the Plan's benefit obligation to a third party. Under the transaction, which was funded with plan assets, the responsibility for pension benefits and annuity administration for approximately 1,275 retirees or their beneficiaries receiving less than \$700 in monthly benefit payments was transferred from the Plan, resulting in a reduction in the Plan's accumulated plan benefits of \$72,091,014 for the year ended December 31, 2023. A refund of \$225,846 was received during 2024 in connection with the 2023 pension plan annuity purchase resulting from updated participant data.

Eligibility

Prior to the Freeze Date, employees were eligible to participate in the Plan on the first day of the month after completing one year (12 consecutive months) of service and 1,000 hours. Certain categories of employees were not eligible for the Plan as defined in the Summary Plan Description.

Funding

The Company's funding practice is to make contributions to the Plan in amounts to provide assets sufficient to meet the benefits to be paid to Plan participants. The Plan has met the ERISA minimum funding requirements.

Vesting

All participants who terminated employment prior to the Freeze Date but completed three or more years of vesting service prior to termination are fully vested in the Plan with respect to their frozen accrued benefits. Participants who were actively employed on the Freeze Date and had completed one or more years of vesting service are fully vested in the Plan with respect to their frozen accrued benefits.

Unum Group Pension Plan

December 31, 2024

Note 1 - Description of Plan - Continued

Payment of Benefits

Benefits are paid by the Plan from Plan assets held by the Trustee. Amounts of \$1,000 or less are automatically paid in the form of a lump sum. If the value of a participant or beneficiary's benefit is between \$1,000 and \$5,000, the participant may elect a lump sum or a rollover to an eligible account. If the value of a participant's or beneficiary's benefit is between \$5,000 and \$100,000, the participant may elect a lump sum, a rollover to an eligible account, or receive an annuity. For amounts over \$100,000, benefits are paid in the form of an annuity.

Expenses

Expenses such as actuarial fees, legal fees, investment management fees, and fees associated with Plan administration are generally paid out of Plan assets. Other expenses, including accounting and auditing fees, are paid by the Company.

Plan Termination

Although it has not expressed an intention to do so, the Company reserves the right under the Plan to terminate the Plan subject to the provisions of ERISA. Should the Plan terminate at some future time, the net assets of the Plan will be allocated for payment to the participants in an order of priority as prescribed by ERISA and its related regulations and the Plan document.

Whether a particular participant's accumulated plan benefits will be paid depends on the sufficiency, at that time, of the Plan's net assets to provide for accumulated plan benefits and may depend on both the priority of those benefits and the level of benefits guaranteed by the Pension Benefit Guaranty Corporation (PBGC). Some benefits might be fully or partially provided for by the then existing assets and the PBGC guarantee, while other benefits might not be provided for at all.

Note 2 - Summary of Significant Accounting Policies

Basis of Presentation

The financial statements of the Plan have been prepared on the accrual basis of accounting in accordance with U.S. generally accepted accounting principles (GAAP). In connection with its preparation of the financial statements, management of the Company evaluated events that occurred subsequent to December 31, 2024, for recognition or disclosure in its financial statements and notes thereto. Management performed its subsequent event review through the time at which the financial statements were available to be issued on September 25, 2025.

Use of Estimates

The preparation of the financial statements in conformity with GAAP requires the Company to make estimates and assumptions that affect the amounts reported in the financial statements, accompanying notes, and supplemental schedules. Certain assumptions pertaining to interest rates, inflation rates, return rates, market volatility, credit risk, and employee demographics, all of which are subject to change, affect amounts reported for Plan contributions, investments, and the actuarial present value of accumulated plan benefits. Due to the level of risk associated with certain investment securities as well as the uncertainties inherent in the estimation and assumption processes for the actuarial present value of accumulated plan benefits, it is at least reasonably possible that changes in the near term related to these risks and assumptions could materially affect the amounts reported and disclosed in the financial statements and accompanying notes.

Unum Group Pension Plan

December 31, 2024

Note 2 - Summary of Significant Accounting Policies - Continued

Investment Valuation and Income Recognition

The Plan's investments are reported at fair value. Fair value is the price that would be received to sell an asset in an orderly transaction between market participants at the measurement date and therefore represents an exit price, not an entry price. The exit price objective applies regardless of the Plan's intent and/or ability to sell the asset at the measurement date. Some of the Plan's investments may engage in repurchase agreement transactions. The Plan exchanges collateral with a market value equal to or in excess of the principal amount loaned under the repurchase agreement. Repurchase agreements are valued based on the value of the underlying securities and expected settlement per the contract terms. All repurchase agreements are accounted for as secured borrowings and they have a right of setoff, whereby the collateral pledged by the Plan would be used to settle the fair value of the repurchase agreement should the Plan be in default. See Note 4.

Derivatives are reported at fair value. Changes in fair value are included as a component of the net appreciation in fair value of investments in the statements of changes in net assets available for benefits. The impact of these derivatives was not material to the financial statements for 2024 or 2023.

Purchases and sales of securities are recorded on a trade date basis. Interest income is recorded as earned. Dividends are recorded on the ex-dividend date. Net appreciation includes the Plan's realized gains and losses on securities sold as well as unrealized gains and losses from changes in the fair value of securities.

Actuarial Present Value of Accumulated Plan Benefits

Accumulated plan benefits represent the actuarial present value of estimated future periodic payments, including lump-sum distributions that are attributable under the Plan's provisions to services rendered by the employees through the Freeze Date. Accumulated plan benefits include benefits expected to be paid to (a) retired or terminated employees or their beneficiaries and (b) eligible present employees or their beneficiaries. Benefits are generally based on an employee's calendar year compensation during the highest five of the last ten years of employment up to the Freeze Date. Benefits payable under all circumstances (retirement, death, disability, and termination of employment) are included to the extent they are deemed attributable to an employee's service rendered to the valuation date. See Note 5.

Payment of Benefits

Benefits are recorded when paid.

Note 3 - Investment Information

All investment information disclosed in the accompanying financial statements and supplemental schedules, including investments held, securities and other receivable, interest and dividends receivable, and securities and other accounts payable at December 31, 2024 and 2023, and the net appreciation in fair value of investments, interest, dividends, and other income for the years then ended, were obtained or derived from information supplied to the Plan administrator and certified as complete and accurate by the Trustee.

Note 4 - Fair Value Measurements

Investment Composition

The objective of the Plan is to maximize long-term return, within acceptable risk levels, in a manner that is consistent with the fiduciary standards of ERISA, while maintaining sufficient liquidity to pay current benefits and expenses.

The Plan assets include a diversified blend of U.S. government securities, corporate common stocks, partnerships and joint ventures, common collective trusts, and 103-12 investment entities. The Company believes the Plan's investment portfolio is well diversified by asset class and sector, with no undue risk concentrations in any one category. Corporate common stocks are comprised of publicly traded equity securities across various sectors. U.S. government securities include treasury bonds, notes,

NOTES TO FINANCIAL STATEMENTS - Continued

Unum Group Pension Plan

December 31, 2024

Note 4 - Fair Value Measurements - Continued

and bills issued and guaranteed by the federal government. Common collective trusts are comprised of funds benchmarking various indices, corporate investment-grade bonds, and funds that hold commercial real estate investments. 103-12 investments are comprised of funds benchmarking various indices and opportunistic credits. Partnerships and joint ventures include private equity direct investments and private equity funds of funds and utilize proprietary strategies that are intended to have a low correlation to the U.S. stock market.

Assets with readily available actively quoted prices or for which fair value can be measured from actively quoted prices in active markets generally have more pricing observability and less judgment utilized in measuring fair value (Level 1). When actively quoted prices are not available, fair values are based on quoted prices in markets that are not active, quoted prices for similar but not identical assets, or other observable inputs (Level 2). If observable inputs are not available, unobservable inputs and/or adjustments to observable inputs requiring management judgment are used to determine fair value (Level 3). The Company categorizes the assets measured at estimated fair value into a three-level hierarchy, based on the significance of the inputs. The fair value hierarchy gives the highest priority to inputs which are unadjusted and represent quoted prices in active markets for identical assets (Level 1) and the lowest priority to unobservable inputs (Level 3).

The categorization of fair value measurements of the Plan's investments, by input level, is shown below. The carrying values of investment-related receivables and payables approximate fair value due to the short-term nature of the securities and are not included in the following chart. Investments valued using net asset value (NAV) as a practical expedient are not required to be categorized by input level, but these investments are included as follows to reconcile to total investments.

	December 31, 2024				
	Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)	NAV as a Practical Expedient	Total
Invested Assets					
U.S. Government Securities ¹	\$ 364,657,709	\$ (16,145,415)	\$ —	\$ —	\$ 348,512,294
Corporate Stock - Common	52,530,076	—	—	—	52,530,076
Partnerships and Joint Ventures	—	—	—	98,358,819	98,358,819
Common Collective Trusts	9,980,099	—	—	535,174,957	545,155,056
103-12 Investment Entities	—	—	—	299,271,077	299,271,077
Total Investments	\$ 427,167,884	\$ (16,145,415)	\$ —	\$ 932,804,853	\$ 1,343,827,322
Liabilities					
Repurchase Agreements	\$ —	\$ 122,956,875	\$ —	\$ —	\$ 122,956,875

¹Includes derivatives which hedge the risk associated with certain U.S. Government Securities. See Note 2 for additional information.

NOTES TO FINANCIAL STATEMENTS - Continued

Unum Group Pension Plan

December 31, 2024

Note 4 - Fair Value Measurements - Continued

	December 31, 2023				
	Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)	NAV as a Practical Expedient	Total
Invested Assets					
U.S. Government Securities ¹	\$ 202,553,211	\$ 40,831,837	\$ —		\$ 243,385,048
Corporate Stock - Common	54,973,272	—	—	—	54,973,272
Partnerships and Joint Ventures	—	—	—	109,199,243	109,199,243
Common Collective Trusts	51,660,959	—	—	545,234,527	596,895,486
103-12 Investment Entities	—	—	—	316,853,028	316,853,028
Total Investments	\$ 309,187,442	\$ 40,831,837	\$ —	\$ 971,286,798	\$ 1,321,306,077
Liabilities					
Repurchase Agreements	\$ —	\$ 27,285,500	\$ —	\$ —	\$ 27,285,500

¹Includes derivatives which hedge the risk associated with certain U.S. Government Securities. See Note 2 for additional information.

Prior year amounts in the table above were reclassified to conform to current year presentation.

Level 1 investments consist of individual holdings that are valued based on unadjusted quoted prices from active markets for identical securities and investments that are deemed to have a readily determinable fair value. Level 2 investments consist of individual holdings that are valued using either directly or indirectly observable inputs other than quoted prices from active markets.

103-12 investment entities and certain common/collective trusts are valued based on the NAV of the underlying holdings as of the reporting date. Partnerships and joint ventures are valued based on NAV one quarter in arrears. One of the common collective trusts, which has real estate holdings, is valued based on NAV one month in arrears. The Company evaluates the need for adjustments to the NAV based on market conditions and discussions with fund managers in the period subsequent to the valuation date and prior to issuance of the financial statements. There were no adjustments made to the NAV for 2024 or 2023. Distributions of capital from the sale of underlying fund assets of partnerships and joint ventures may occur at any time, but are generally concentrated between five and eight years from the formation of the fund.

NOTES TO FINANCIAL STATEMENTS - Continued

Unum Group Pension Plan

December 31, 2024

Note 4 - Fair Value Measurements - Continued

The unfunded commitments of investments that are valued based on NAV and the redemption characteristics of invested assets are as follows:

	<u>December 31, 2024</u> <u>December 31, 2023</u>			Redemption Notice Period (In Days)
	Unfunded Commitments		Redemption Frequency	
Partnerships and Joint Ventures	15,178,086	17,540,789	N/A	N/A
Common Collective Trusts	—	—	Daily/Quarterly	1-5/15-180
103-12 Investment Entities	—	—	Daily/Monthly	1-3/15-30
Total	<u>\$ 15,178,086</u>	<u>\$ 17,540,789</u>		

Note 5 - Accumulated Plan Benefits

The actuarial present value of accumulated plan benefits is the amount that results from applying actuarial assumptions to adjust the accumulated plan benefits earned by participants to reflect the time value of money (through discounts for interest) and the probability of payment (by means of decrements such as for death, disability, withdrawal, or retirement) between the valuation date and the expected date of payment.

In accordance with GAAP, the Company has elected to present accumulated plan benefits as of the prior Plan year end as follows:

Actuarial present value of accumulated plan benefits:	
Vested accumulated benefits:	
Participants currently receiving payments	\$ 694,944,842
Other participants	559,129,613
	<u>1,254,074,455</u>
Non-vested accumulated benefits	3,965,184
Actuarial present value of accumulated plan benefits as of December 31, 2023	<u>\$ 1,258,039,639</u>

The changes in the accumulated plan benefits for the year ended December 31, 2023 are as follows:

Actuarial present value of accumulated plan benefits as of December 31, 2022	\$ 1,220,622,769
Increase (decrease) due to changes in:	
Actuarial losses	5,604,803
Decrease in the discount period	85,088,323
Actual benefits paid	(147,648,879)
Changes in assumptions	94,372,623
Net increase	<u>37,416,870</u>
Actuarial present value of accumulated plan benefits as of December 31, 2023	<u>\$ 1,258,039,639</u>

Significant assumptions and the method underlying the actuarial computations are as follows:

Actuarial cost method	Traditional Unit Credit Cost Method
Assumed rate of return on investments	6.50 percent at December 31, 2023 and 7.25 percent at December 31, 2022
Assumed mortality	Pri-2012 Private Retirement Plans Mortality Tables with fully generational projection from 2012 using Scale MP-2021 at December 31, 2023 and 2022.
Assumed rate of inflation	3.0 percent at December 31, 2023 and 2022
Assumed retirement age	Varying rates of retirement from 55 to 70+

NOTES TO FINANCIAL STATEMENTS - Continued

Unum Group Pension Plan

December 31, 2024

Note 5 - Accumulated Plan Benefits - Continued

The foregoing actuarial assumptions are based on the presumption that the Plan will continue. Were the Plan to terminate, different actuarial assumptions and other factors might be applicable in determining the actuarial present value of accumulated plan benefits. The actuary estimated the accumulated plan benefits as of January 1, 2024. There were no significant changes to the Plan that would have changed the valuations had they been performed as of December 31, 2023.

Note 6 - Income Tax Status

The Internal Revenue Service (IRS) determined and informed the Company by letter dated September 25, 2020, that the Plan is qualified under Section 401(a) of the Code and therefore, the related trust is exempt from taxation. Subsequent to the issuance of the determination letter, the Plan was amended. Once qualified, the Plan is required to operate in conformity with the Code to maintain its qualification. The Company believes the Plan is being operated in compliance with the applicable requirements of the Code and therefore believes the Plan, as amended, is qualified and the related trust is tax-exempt.

GAAP requires Plan management to evaluate uncertain tax positions taken by the Plan. The financial statement effects of a tax position are recognized when the position is more likely than not, based on the technical merits, to be sustained upon examination by the IRS. The Company has analyzed the tax positions taken by the Plan and have concluded that as of December 31, 2024, there are no uncertain positions taken or expected to be taken. The Plan has recognized no interest or penalties related to uncertain tax positions. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

Note 7 - Reconciliation between Financial Statements and Form 5500

The following is a reconciliation of net assets available for benefits per the financial statements to the Form 5500:

	December 31	
	2024	2023
Net assets available for benefits per the financial statements	\$ 1,241,225,980	\$ 1,295,497,291
Benefits payable	(9,210)	(46,686)
Net assets available for benefits per the Form 5500	<u>\$ 1,241,216,770</u>	<u>\$ 1,295,450,605</u>

The following is a reconciliation of benefits paid to participants per the financial statements to the Form 5500:

	December 31, 2024
Benefits paid to participants per the financial statements	\$ 72,236,881
Add: Benefits payable on Form 5500 at December 31, 2024	9,210
Less: Benefits payable on Form 5500 at December 31, 2023	(46,686)
Benefits paid to participants per the Form 5500	<u>\$ 72,199,405</u>

Benefits payable are recorded on the Form 5500 for benefit claims that have been processed and approved for payment prior to year-end but not yet paid.

Note 8 - Related Party Transactions

Transactions with related parties include contributions to the Plan by the Company, benefit payments to beneficiaries, investments managed by the Trustee, and fees paid for trustee and investment management services.

Unum Group Pension Plan

EIN: 62-1598430 Plan Number: 001

**Schedule H, Line 4i - Schedule of Assets
(Held at End of Year)**

December 31, 2024

(a)	(b) Identity of Issue, Borrower, Lessor or Similar Party	(c) Description of Investment	(d) Cost	(e) Current Value
U. S. GOVERNMENT SECURITIES				
	U.S. Treasury	U S TREASURY BILL 0.000% 01/09/2025 DD 07/11/24	\$7,262,488	\$7,262,488
	U.S. Treasury	U S TREASURY BOND 2.875% 05/15/2043 DD 05/15/13	13,193,841	12,140,063
	U.S. Treasury	U S TREASURY BOND 3.000% 11/15/2044 DD 11/15/14	6,672,448	6,101,274
	U.S. Treasury	U S TREASURY BOND 2.500% 02/15/2045 DD 02/15/15	14,169,868	12,944,803
	U.S. Treasury	U S TREASURY BOND 1.375% 11/15/2040 DD 11/15/20	29,500,800	27,811,687
	U.S. Treasury	U S TREASURY BOND 2.000% 08/15/2051 DD 08/15/21	1,861,777	1,623,497
	U.S. Treasury	U S TREASURY BOND 2.000% 11/15/2041 DD 11/15/21	46,518,148	43,055,659
	U.S. Treasury	U S TREASURY BOND 2.250% 02/15/2052 DD 02/15/22	13,769,558	12,001,038
	U.S. Treasury	U S TREASURY BOND 2.875% 05/15/2052 DD 05/15/22	33,426,430	32,435,465
	U.S. Treasury	U S TREASURY BOND 3.000% 08/15/2052 DD 08/15/22	3,715,620	3,600,737
	U.S. Treasury	U S TREASURY NOTE 1.500% 11/30/2028 DD 11/30/21	22,384,766	22,450,250
	U.S. Treasury	U S TREASURY NOTE 2.875% 05/15/2032 DD 05/15/22	28,843,599	28,550,281
	U.S. Treasury	U S TREASURY NOTE 2.750% 05/31/2029 DD 05/31/22	3,922,580	3,879,586
	U.S. Treasury	U S TREASURY NOTE 3.375% 05/15/2033 DD 05/15/23	9,940,592	9,709,869
	U.S. Treasury	U S TREASURY NOTE 3.875% 08/15/2033 DD 08/15/23	5,034,873	4,997,160
	U.S. Treasury	U S TREASURY BD CPN STRIP 0.000% 02/15/2037 DD 02/15/07	24,232,795	23,531,213
	U.S. Treasury	U S TREASURY BD CPN STRIP 0.000% 11/15/2033 DD 08/15/07	14,838,340	14,455,540
	U.S. Treasury	U S TREASURY BD CPN STRIP 0.000% 11/15/2034 DD 08/15/07	14,215,300	13,759,900
	U.S. Treasury	U S TREASURY BD CPN STRIP 0.000% 11/15/2035 DD 08/15/07	4,324,180	4,165,350
	U.S. Treasury	U S TREASURY BD CPN STRIP 0.000% 11/15/2036 DD 08/15/07	19,024,840	18,746,705

U.S. Treasury	U S TREASURY BD CPN STRIP 0.000% 08/15/2038 DD 02/17/09	17,350,048	17,010,769
U.S. Treasury	U S TREASURY BD CPN STRIP 0.000% 11/15/2038 DD 05/15/09	7,387,811	7,242,732
U.S. Treasury	U S TREASURY BD CPN STRIP 0.000% 05/15/2039 DD 05/15/09	17,925,050	17,477,460
U.S. Treasury	U S TREASURY BD CPN STRIP 0.000% 02/15/2042 DD 02/15/12	20,202,342	19,704,183
TOTAL U. S. GOVERNMENT SECURITIES		\$379,718,094	\$364,657,709
CORPORATE STOCK - COMMON			
Alphabet Inc	ALPHABET INC	\$881,799	\$1,191,583
Amazon.Com Inc	AMAZON.COM INC	2,216,350	3,169,747
Apple Inc	APPLE INC	1,035,417	1,323,971
Atlassian Corp	ATLASSIAN CORP	472,783	506,717
Autodesk Inc	AUTODESK INC	873,850	1,060,801
	CANADIAN PACIFIC KANSAS	1,573,131	1,433,577
Canadian Pacific Kansas City L	CITY L		
Danaher Corp	DANAHER CORP	1,628,358	1,587,338
Meta Platforms Inc	META PLATFORMS INC	1,292,181	1,650,553
Hdfc Bank Ltd	HDFC BANK LTD	2,179,458	2,135,159
Infosys Ltd	INFOSYS LTD	888,158	1,059,218
Intuit Inc	INTUIT INC	2,216,266	2,236,832
Msci Inc	MSCI INC	1,254,612	1,330,822
Mercadolibre Inc	MERCADOLIBRE INC	1,132,417	1,214,114
Microsoft Corp	MICROSOFT CORP	2,679,968	2,966,517
Nvidia Corp	NVIDIA CORP	720,066	1,608,928
S&P Global Inc	S&P GLOBAL INC	1,648,426	1,863,628
Salesforce Inc	SALESFORCE INC	831,414	1,080,555
Servicenow Inc	SERVICENOW INC	700,652	1,087,683
Synopsys Inc	SYNOPSYS INC	1,969,865	1,820,100
	TAIWAN SEMICONDUCTOR	1,393,639	1,578,538
Taiwan Semiconductor Manufactu	MANUFACTU		
Unitedhealth Group Inc	UNITEDHEALTH GROUP INC	1,904,727	1,820,590
Visa Inc	VISA INC	1,995,955	2,406,013
Workday Inc	WORKDAY INC	1,673,738	1,633,330
Yum! Brands Inc	YUM! BRANDS INC	1,552,270	1,596,638
	LVMH MOET HENNESSY	1,410,594	1,042,367
Lvmh Moet Hennessy Louis Vuit	LOUIS VUITT		
	UNIVERSAL MUSIC GROUP	1,549,313	1,405,946
Universal Music Group Nv	NV		
Experian Plc	EXPERIAN PLC	642,515	624,224
Cp All Pcl	CP ALL PCL	990,180	985,460
Aia Group Ltd	AIA GROUP LTD	1,257,683	1,088,218
Aon Plc	AON PLC	1,323,850	1,633,819
Icon Plc	ICON PLC	1,776,011	1,336,272
Steris Plc	STERIS PLC	1,631,040	1,515,594
Alcon Ag	ALCON AG	1,706,574	1,774,541
	CANADIAN PACIFIC KANSAS	133,849	122,522
Canadian Pacific Kansas City L	CITY L		

Novo Nordisk A/S	NOVO NORDISK A/S	2,017,933	1,638,161
TOTAL CORPORATE STOCK - COMMON		\$49,155,042	\$52,530,076
PARTNERSHIP and JOINT VENTURE INTEREST			
Portfolio Advisors	PORTFOLIO ADVISORS OFFSHORE PRIVATE EQUITY FD V LP	\$3,074,151	\$2,441,118
Portfolio Advisors	PORTFOLIO ADVISORS PE IX OFFSHORE LP	27,829,519	26,267,142
J. P. Morgan	JP MORGAN EUROPEAN CORP FINANCE INSTITUTIONAL	827,898	640,619
J. P. Morgan	JP MORGAN VENTURE CAPITAL INSTITUTIONAL INVESTORS IV	4,367,367	4,003,233
J. P. Morgan	JP MORGAN US CORPORATE FINANCE INSTITUTIONAL INVESTORS IV	2,588,690	1,888,769
Warburg Pincus	WARBURG PINCUS PE XII LP	13,154,862	12,743,479
Warburg Pincus	WARBURG PINCUS PE XI LP	7,596,863	6,328,132
Warburg Pincus	WARBURG PINCUS GLOBAL GROWTH	26,473,774	29,165,120
Montauk TriGuard	MONTAUK TRIGUARD FD VI LP	4,679,545	4,320,949
Montauk TriGuard	MONTAUK TRIGUARD FUND VII LP	10,826,474	10,560,258
TOTAL PARTNERSHIP and JOINT VENTURE INTEREST		\$101,419,143	\$98,358,819
OTHER INVESTMENTS			
Barclays Bank PLC	TRS EL LUTLTRUU INDEXP FEDL01 2025 JAN 22	\$—	\$(429,302)
Barclays Bank PLC	TRS EL LT03TRUU INDEXP FEDL01 2025 JAN 22	—	(853,197)
Barclays Bank PLC	TRS EL LT02TRUU INDEXP FEDL01 2025 JAN 22	—	(239,676)
Barclays Bank PLC	TRS EL LT09TRUU INDEXP FEDL01 2025 FEB 14	—	(173,406)
J. P. Morgan	TRS EL LT11TRUU INDEXP FEDL01 2025 FEB 24	—	(2,719,461)
J. P. Morgan	TRS EL LT11TRUU INDEXP FEDL01 25 BPS 2025 JAN 23	—	(8,145,054)
Barclays Bank PLC	TRS_FL LUTLTRUU INDEXP FEDL01 2025 JAN 22	—	(112,002)
Barclays Bank PLC	TRS_FL LT03TRUU INDEXP FEDL01 2025 JAN 22	—	(633,782)
Barclays Bank PLC	TRS_FL LT02TRUU INDEXP FEDL01 2025 JAN 22	—	(452,884)
Barclays Bank PLC	TRS_FL LT09TRUU INDEXP FEDL01 2025 FEB 14	—	(410,716)
J. P. Morgan	TRS_FL LT11TRUU INDEXP FEDL01 2025 FEB 24	—	(271,248)
J. P. Morgan	TRS_FL LT11TRUU INDEXP FEDL01 25 BPS 2025 JAN 23	—	(1,704,687)
TOTAL OTHER INVESTMENTS		\$—	\$(16,145,415)

COMMON/COLLECTIVE TRUST

*	State Street	MSCI EAFE INDX SL CTF (ELCTF)	\$38,249,550	\$49,052,692
		MSCI UNITED STATES INDEX SECURITIES LENDING CTF (CM902)	91,695,943	157,189,002
*	State Street	MSCI CANADA INDEX SL CTF (ZVCA2)	4,573,788	6,378,600
*	State Street	IR+M LONG CORPORATE COLLECTIVE FUND CLASS C	139,687,219	124,076,522
	Income Research Management	UUMF WTW REAL ASSETS ACCOUNT	157,000,000	166,080,699
*	Willis Towers Watson	COLLECTIVE US GOV'T STIF 15 BPS	1,347,271	1,347,271
*	BNY Mellon	JPMCB EMERGING MARKETS AGGREGATE BOND FUND	29,998,937	32,397,442
	J. P. Morgan	COLLECTIVE US GOV'T STIF 15 BPS	8,632,828	8,632,828
*	BNY Mellon			
TOTAL COMMON/COLLECTIVE TRUST			\$471,185,536	\$545,155,056

103-12 INVESTMENT ENTITIES

	Artisan Partners	UUMF ARTISAN GLOBAL	\$39,567,611	\$53,378,120
	Wellington Management	UUMF WELLINGTON SECURITIZED OP	43,542,432	46,554,499
	Pinebridge Investments	UUMF PINEBRIDGE GLB OPP CRE	89,334,814	93,042,785
	Sands Capital	UUMF SANDS GLOBAL GROWTH	39,625,426	52,965,208
	Metropolis Capital	UUMF METROPOLIS VALUE	37,351,120	53,330,465
TOTAL 103-12 INVESTMENT ENTITIES			\$249,421,403	\$299,271,077

REPURCHASE AGREEMENTS

	Bank of America	BANK OF AMERICA REPO4.840% 01/16/2025 DD 11/15/24	(109,382,325)	(109,382,325)
	J. P. Morgan	JP MORGAN CP REP REPO4.790% 01/16/2025 DD 11/21/24	(13,574,550)	(13,574,550)
TOTAL REPURCHASE AGREEMENTS			\$(122,956,875)	\$(122,956,875)

GRAND TOTAL

\$1,127,942,343	\$1,220,870,447
------------------------	------------------------

* Indicates party-in-interest

Unum Group Pension Plan

EIN: 62-1598430 Plan Number: 001

**Schedule H, Line 4i - Schedule of Assets
(Acquired and Disposed of Within Year)**

December 31, 2024

See attached for:

Series of securities acquired and disposed of within plan year.



5500 Acquisitions & Dispositions of Assets within Plan Year

Report ID: M2574E

Status:

UNUM COMB. MGR. - UUMG10010000

01/01/2024 - 12/31/2024

UNUM GROUP PENSION PLAN

Security ID	Security Description	Shares	Cost of Acquisitions	Proceeds of Dispositions
99F106F4A	US 10YR ULTRA FUTURE (CBT) EXP JUN 24	731.000	0.00	(846,177.78)
99F106I4A	US 10YR ULTRA FUTURE (CBT) EXP SEP 24	619.000	0.00	2,477,899.86
99F133L4A	US TREAS BD FUTURE (CBT) EXP DEC 24	45.000	0.00	(247,312.53)
99F139I4A	US 10YR NOTE FUTURE (CBT) EXP SEP 24	134.000	0.00	93,618.16
99F183I4A	US 5YR NOTE FUTURE (CBT) EXP SEP 24	20.000	0.00	9,017.94
99F183L4A	US 5YR TREAS NTS FUTURE (CBT) EXP DEC 24	127.000	0.00	146,979.89
99F217F4A	US 2YR NOTE FUTURE (CBT) EXP JUN 24	102.000	0.00	(25,582.63)
99F217I4A	US 2YR NOTE FUTURE (CBT) EXP SEP 24	61.000	0.00	64,649.36
99F700C4A	US ULTRA BOND (CBT) EXP MAR 24	34.000	0.00	(282,688.51)
99F700F4A	US ULTRA BOND (CBT) EXP JUN 24	118.000	0.00	742,262.36
99ZB2KL19	MORGAN STANLEY REPO 5.440% 06/27/2024 DD 04/01/24	14,360,850.000	14,360,850.00	(14,360,850.00)
99ZB35G66	MORGAN STANLEY REPO 5.490% 09/18/2024 DD 06/27/24	3,126,500.000	3,126,500.00	(3,126,500.00)
99ZB35G82	MORGAN STANLEY REPO 5.490% 09/18/2024 DD 06/27/24	11,490,825.000	11,490,825.00	(11,490,825.00)
99ZB57QN2	MORGAN STANLEY REPO 4.950% 11/21/2024 DD 10/16/24	11,622,525.000	11,622,525.00	(11,622,525.00)
99ZB57QP7	MORGAN STANLEY REPO 4.950% 11/21/2024 DD 10/16/24	2,214,000.000	2,214,000.00	(2,214,000.00)
99ZB5QF69	MORGAN STANLEY REPO 5.180% 10/16/2024 DD 09/18/24	12,544,425.000	12,544,425.00	(12,544,425.00)
99ZB5QGM3	MORGAN STANLEY REPO 5.180% 10/16/2024 DD 09/18/24	2,322,000.000	2,322,000.00	(2,322,000.00)

Unum Group Pension Plan

EIN: 62-1598430 Plan Number: 001

Schedule H, Line 4j - Schedule of Reportable Transactions

December 31, 2024

See attached for:

Category (iii) - series of transactions in the same security in excess of five percent of plan assets.

There were no category (i), (ii), or (iv) reportable transactions during 2024.

Note: Columns (e), (f) and (h) are not applicable.



Series of Transactions in Excess of Five Percent of Plan Assets

Report ID: T6500

Status:

UNUM COMB. MGR. - UUMG10010000

01/01/2024 - 12/31/2024

UNUM GROUP PENSION PLAN

Tran Count	Security ID	Security Description	Shares	Cost of Acquisitions	Proceeds of Dispositions	Cost of Assets Disposed	Gain/Loss
5% VALUE :		64,793,564.56					
183	999J00325	COLLECTIVE US GOV'T STIF 15 BPS	322,273,982.660	322,273,982.66	0.00	0.00	0.00
177	999J00325	COLLECTIVE US GOV'T STIF 15 BPS	363,954,843.290	0.00	363,954,843.29	363,954,843.29	0.00
82	99QAAM3X8	SWAP COLLATERAL WITH JP MORGAN	180,405,000.000	180,405,000.00	0.00	0.00	0.00
82	99QAAM3X8	SWAP COLLATERAL WITH JP MORGAN	144,735,000.000	0.00	144,735,000.00	144,735,000.00	0.00
1	99VVCU431	JPMCB EMERGING MARKETS AGGREGATE BOND FUND	156,121.610	0.00	1,900,000.00	1,759,335.80	140,664.20
4	99VVCU431	JPMCB EMERGING MARKETS AGGREGATE BOND FUND	3,051,647.840	35,400,000.00	0.00	0.00	0.00
6	99VVCU431	JPMCB EMERGING MARKETS AGGREGATE BOND FUND	2,701,599.150	0.00	31,400,000.00	29,701,413.06	1,698,586.94
7	99ZB6TZS2	BANK OF AMERICA REPO 4.840% 01/16/2025 DD 11/15/24	109,382,325.000	0.00	109,382,325.00	109,382,325.00	0.00

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 26a

Schedule of Active Participant Data for Cash Balance Plans as of January 1, 2024

Number and average account balance distributed by attained age and attained years of credited service

Attained Age	Attained Years of Credited Service ¹										Total
	Under 1	1-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40 & Over	
Under 25	0	0	0	0	0	0	0	0	0	0	0
	-	-	-	-	-	-	-	-	-	-	-
25-29	0	0	0	0	0	0	0	0	0	0	0
	-	-	-	-	-	-	-	-	-	-	-
30-34	0	56	0	0	0	0	0	0	0	0	56
	-	2,738	-	-	-	-	-	-	-	-	2,738
35-39	0	196	99	1	0	0	0	0	0	0	296
	-	4,914	18,996	-	-	-	-	-	-	-	9,688
40-44	1	87	156	111	3	0	0	0	0	0	358
	-	5,549	19,535	42,191	-	-	-	-	-	-	23,314
45-49	1	67	106	250	80	0	0	0	0	0	504
	-	7,393	27,205	56,955	123,622	-	-	-	-	-	54,658
50-54	2	50	75	206	151	65	4	0	0	0	553
	-	11,589	29,045	66,747	135,388	199,362	-	-	-	-	91,804
55-59	2	36	54	135	126	104	92	9	0	0	558
	-	14,609	43,176	83,239	136,888	233,808	225,776	-	-	-	140,667
60-64	0	29	50	82	88	48	77	51	8	0	433
	-	13,797	50,872	90,590	139,192	190,028	312,541	257,952	-	-	164,702
65-69	0	8	19	21	17	9	11	11	11	0	107
	-	-	-	128,965	-	-	-	-	-	-	175,041
70 & over	0	5	2	6	4	3	0	0	1	1	22
	-	-	-	-	-	-	-	-	-	-	160,400
Total	6	534	561	812	469	229	184	71	20	1	2,887
	-	7,052	28,005	68,366	134,253	212,210	271,139	264,390	293,213	-	90,665

¹ Age and service for purposes of determining category are based on exact (not rounded) values.

Plan Name: Unum Group Pension Plan
 EIN / PN: 62-1598430/001
 Plan Sponsor: Unum Group
 Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Schedule SB, Part V Statement of Actuarial Assumptions/Methods

Economic Assumptions

Interest rate basis:

- Applicable month September
- Interest rate 3-Segment Rates

Interest rates:	Reflecting Stabilization	Not Reflecting Stabilization
• First segment rate	4.75%	3.62%
• Second segment rate	4.87%	4.46%
• Third segment rate	5.59%	4.52%
• Effective interest rate	5.16%	4.45%

Pension equity plan interest rate 3.50%

Annual rates of increase

- Compensation N/A
- Statutory limits on compensation/benefits N/A
- National Average Wage Index N/A
- Assumed cost of living increase N/A

Plan-related expenses Plan-related expenses are assumed to be the amount of the administrative expenses paid during the prior year adjusted for expected changes in expenses during the current year. The amount included this year for plan-related expenses is \$9,179,629.

Plan Name: Unum Group Pension Plan
EIN / PN: 62-1598430/001
Plan Sponsor: Unum Group
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

As permitted by law, rates reflecting stabilization are used to determine the funding target, and thus the minimum required contribution under IRC §430 for the plan. Because these assumptions are subject to a corridor based on average interest rates over a 25-year period, they may differ from (and currently are higher than) current market interest rates, and may be inconsistent with other economic assumptions used in the valuation.

Demographic Assumptions

Inclusion date	The valuation date coincident with or next following the date on which the employee enters the plan.
New or rehired employees	It was assumed there will be no new or rehired employees.
Mortality	For all participants: separate rates for non-annuitants and annuitants based on Pri-2012 “Employees” and “Healthy Annuitants” (participants and beneficiaries combined) tables, respectively, without collar or amount adjustments and then projected forward with a generational projection as specified in the regulations under §1.430(h)(3)-1 using the IRS adjusted Scale MP-2021 (i.e., MP-2021 with no mortality improvement for 2020-2023 and future mortality improvement capped at 0.78% for years after 2024).

Plan Name:	Unum Group Pension Plan
EIN / PN:	62-1598430/001
Plan Sponsor:	Unum Group
Valuation Date:	January 1, 2024

SCHEDULE SB ATTACHMENTS

Termination rates not due to disability, retirement, or mortality

- Home office participants

Age	Rate
<41	0.0600
41	0.0580
42	0.0560
43	0.0540
44	0.0520
45+	0.0500

- Sales participants

Age	Rate
<36	0.0800
36	0.0780
37	0.0760
38	0.0740
39	0.0720
40	0.0700
41	0.0680
42	0.0660
43	0.0640
44	0.0620
45+	0.0600

Disability

The rates at which participants are assumed to become disabled by age and gender are shown below:

Age	Males	Females
25	0.09%	0.09%
35	0.13%	0.13%
45	0.33%	0.33%
55	1.02%	1.02%

Plan Name: Unum Group Pension Plan
EIN / PN: 62-1598430/001
Plan Sponsor: Unum Group
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Retirement

For purposes of determining the Funding Target and Target Normal Cost (both disregarding at-risk assumptions), the rates at which participants are assumed to retire by age are shown below:

From active employment:

Home Office Participants	
Age	Retirement Rate
55-58	7%
59-60	10%
61	15%
62-64	20%
65-69	30%
70+	100%

Sales Participants	
Age	Retirement Rate
55-60	10%
61	15%
62	20%
63-69	25%
70+	100%

Benefit commencement date:

- Preretirement death benefit If eligible for a lump sum, upon death, otherwise the later of the death of the active participant or the date the participant would have attained age 55.
- Deferred vested benefit The later of age 65 (age 62 for former Provident and Paul Revere participants who are eligible for an unreduced benefit at age 62) or termination of employment.
- Disability benefit If eligible for a lump sum, upon disability, otherwise the later of age 65 or age at disability.
- Retirement benefit Upon termination of employment.

Form of payment

Participants not eligible for a lump sum are assumed to elect the normal form. For participants eligible for a lump sum, 55% are assumed to elect a lump sum and 45% are assumed to elect the normal form. Lump sum benefits reflect the valuation segment rates and the 2024 PPA lump sum mortality table.

Plan compensation

Not applicable.

Plan Name: Unum Group Pension Plan
EIN / PN: 62-1598430/001
Plan Sponsor: Unum Group
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Percent married 80% of eligible participants. Used to value pre-retirement surviving spouse benefits.

Spouse age Wife three years younger than husband.

Cash flow timing of benefit payments Annuity payments are payable monthly at the beginning of the month, and lump sums are payable on the date of decrement.

Methods

Valuation date First day of plan year.

Funding target Present value of accrued benefits.

Target normal cost Present value of benefits expected to accrue during plan year plus plan-related expenses expected to be paid from plan assets during plan year.

Decrement timing The approach used is called rounded middle of year (rounded MOY) decrement timing. Most events are assumed to occur at the middle of year during which the eligibility condition will be met or the start/end date will occur. For death and disability decrements, the rate applied is based on the participant's rounded age (nearest integer age) at the beginning of the year, to align with the methodology generally used to create those rate tables. For retirement and withdrawal decrements: the age is generally the participant's rounded age at the middle of the year.

Plan Name: Unum Group Pension Plan
EIN / PN: 62-1598430/001
Plan Sponsor: Unum Group
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Actuarial value of assets

Average of the fair market value of assets on the valuation date and the two immediately preceding valuation dates, adjusted for contributions, benefits, administrative expenses and expected earnings of 7.25% (with such expected earnings limited as described in IRS Notice 2009-22). The average asset value must be within 10% of market value, including discounted contributions receivable (discounted using the effective interest rate for the prior plan year).

The method of computing the actuarial value of assets complies with rules governing the calculation of such values under the Pension Protection Act of 2006 (PPA). These rules produce smoothed values that reflect the underlying market value of plan assets but fluctuate less than the market value. As a result, the actuarial value of assets will be lower than the market value in some years and greater in other years. However, over the long term under PPA's smoothing rules, the method has a significant bias to produce an actuarial value of assets that is below the market value of assets.

Benefits not valued

All benefits described in the Plan Provisions section of this report were valued. WTW has reviewed the plan provisions with Unum Group and, based on that review, is not aware of any significant benefits required to be valued that were not.

Sources of Data and Other Information

The plan sponsor through its third-party administrator furnished participant data as of January 1, 2024 and information on plan provisions. Information on assets and contributions was provided by the plan trustee. Data and other information were reviewed for reasonableness and consistency, but no audit was performed. Based on discussions with the plan sponsor, assumptions or estimates were made when data were not available, and the data was adjusted to reflect any significant events that occurred between the date the data was collected and the measurement date. In consultation with the plan sponsor, there were no significant issues found with missing or inconsistent data. We are aware of no adjustments made by the data provider. We are not aware of any errors or omissions in the data that would have a significant effect on the results of our calculations.

Assumptions Rationale - Significant Economic Assumptions

Discount rate

The basis chosen was selected by the plan sponsor from among choices prescribed by law, all of which are based on observed market data over certain periods of time.

Plan Name: Unum Group Pension Plan
EIN / PN: 62-1598430/001
Plan Sponsor: Unum Group
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Pension equity plan interest credit	Defined in the plan provisions as the increase in the National Average Wages (NAW), subject to a minimum of 2.75% and a maximum of 5%. The assumed increase in NAW is based on expected increases in CPI and real wages.
Expected return on plan assets	We understand that the expected return on assets assumption reflects the plan sponsor's estimate of future experience for trust asset returns, reflecting the plan's current asset allocation and any expected changes during the current plan year, current market conditions and the plan sponsor's expectations for future market conditions.
Lump sum conversion rate	As required by IRC §430, lump sum benefits are valued using "annuity substitution", so that the interest rates assumed are effectively the same as described above for the discount rate.
Administrative expenses	Administrative expenses expected to be paid from the trust during the year are estimated as the actual expenses paid from the trust during the preceding year, adjusted for expected changes in expenses during the current year.

Plan Name:	Unum Group Pension Plan
EIN / PN:	62-1598430/001
Plan Sponsor:	Unum Group
Valuation Date:	January 1, 2024

SCHEDULE SB ATTACHMENTS

Assumptions Rationale - Significant Demographic Assumptions

Healthy Mortality	Assumptions used for funding purposes are as prescribed by IRC §430(h).
Disabled Mortality	Assumptions used for funding purposes are as prescribed by IRC §430(h).
Termination	Termination rates were based on a plan experience study conducted during 2019, with annual consideration of whether any conditions have changed that would be expected to produce different results in the future.
Disability	Disability rates were based on a plan experience study, with annual consideration of whether any conditions have changed that would be expected to produce different results in the future.
Retirement	Retirement rates were based on a plan experience study conducted during 2019, with annual consideration of whether any conditions have changed that would be expected to produce different results in the future.

Source of Prescribed Methods

Funding methods	The methods used for funding purposes as described in Appendix A, including the method of determining plan assets, are “prescribed methods set by law”, as defined in the actuarial standards of practice (ASOPs). These methods are required by IRC §430, or were selected by the plan sponsor from a range of methods permitted by IRC §430.
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Plan Name:	Unum Group Pension Plan
EIN / PN:	62-1598430/001
Plan Sponsor:	Unum Group
Valuation Date:	January 1, 2024

SCHEDULE SB ATTACHMENTS

Changes in Assumptions and Methods

Change in assumptions and methods since prior valuation

- The segment interest rates used to calculate the funding target, target normal cost and the lump sum interest rate were updated from an applicable month of September 2022 to September 2023 as required by IRC §430.
- The mortality table used to calculate the funding target and target normal cost was changed from using a static projection of mortality improvement to a generational projection as required by guidance issued by IRS under IRC §430.
- The assumed plan-related expenses added to the target normal cost were updated from \$9,222,958 for 2023 to \$9,179,629 for 2024.

Plan Name: Unum Group Pension Plan
EIN / PN: 62-1598430/001
Plan Sponsor: Unum Group
Valuation Date: January 1, 2024

Plan Name	Unum Group Pension Plan
Plan Sponsor EIN	62-1598430
ERISA Plan #	001
Plan Year Ending	12/31/2024

The required attachment marked with an "X" in the Attachment column is included within the Accountant's Opinion attachment to Sch. H, Part III, Line 3, which consists of the entire audit report issued by the plan's Independent Qualified Public Accountant (IQPA).

Form/Schedule	Line #	Description	Attachment
5500 Sch. H	Line 3	Financial statements used in formulating the IQPA's opinion	X
5500 Sch. H	Line 4a	Schedule of Delinquent Participant Contributions	
5500 Sch. H	Line 4i	Schedule of Assets (Held at End of Year)	X
5500 Sch. H	Line 4i	Schedule of Assets (Acquired and Disposed of Within Year)	
5500 Sch. H	Line 4j	Schedule of Reportable Transactions	X

SCHEDULE SB (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Single-Employer Defined Benefit Plan Actuarial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500 or 5500-SF.	OMB No. 1210-0110 2024 This Form is Open to Public Inspection
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024	
► Round off amounts to nearest dollar.	
► Caution: A penalty of \$1,000 will be assessed for late filing of this report unless reasonable cause is established.	
A Name of plan UNUM GROUP PENSION PLAN	B Three-digit plan number (PN) ► 001
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF UNUM GROUP	D Employer Identification Number (EIN) 62-1598430
E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B	F Prior year plan size: ☐ 100 or fewer ☐ 101-500 ☒ More than 500

Part I	Basic Information			
1	Enter the valuation date: Month 01 Day 01 Year 2024			
2	Assets:			
a	Market value	2a	1,295,871,291	
b	Actuarial value	2b	1,418,569,313	
3	Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a	For retired participants and beneficiaries receiving payment	3,129	776,519,812	776,519,812
b	For terminated vested participants	4,096	356,876,382	356,876,382
c	For active participants	2,887	307,906,245	311,838,279
d	Total	10,112	1,441,302,439	1,445,234,473
4	If the plan is in at-risk status, check the box and complete lines (a) and (b) ☐			
a	Funding target disregarding prescribed at-risk assumptions	4a		
b	Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	4b		
5	Effective interest rate	5	5.16%	
6	Target normal cost			
a	Present value of current plan year accruals	6a	0	
b	Expected plan-related expenses	6b	9,179,629	
c	Target normal cost	6c	9,179,629	

Statement by Enrolled Actuary	
To the best of my knowledge, the information supplied in this schedule and accompanying schedules, statements and attachments, if any, is complete and accurate. Each prescribed assumption was applied in accordance with applicable law and regulations. In my opinion, each other assumption is reasonable (taking into account the experience of the plan and reasonable expectations) and such other assumptions, in combination, offer my best estimate of anticipated experience under the plan.	
SIGN HERE	Timothy W. Devoe TWD Signature of actuary
Timothy W. Devoe Type or print name of actuary	9/23/2025 Date
Willis Towers Watson US LLC Firm name	2307222 Most recent enrollment number
75 Arlington Street Floor 2 Boston MA 02116 Address of the firm	617-638-3700 Telephone number (including area code)
If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions ☐	

Part II Beginning of Year Carryover and Prefunding Balances

	(a) Carryover balance	(b) Prefunding balance
7 Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	63,778,483	0
8 Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	22,015,583	0
9 Amount remaining (line 7 minus line 8)	41,762,900	0
10 Interest on line 9 using prior year's actual return of <u>11.57%</u>	4,831,968	0
11 Prior year's excess contributions to be added to prefunding balance:		
a Present value of excess contributions (line 38a from prior year)		0
b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of <u>5.29%</u>		0
b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
c Total available at beginning of current plan year to add to prefunding balance		0
d Portion of (c) to be added to prefunding balance		0
12 Other reductions in balances due to elections or deemed elections	0	0
13 Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	46,594,868	0

Part III Funding Percentages

14 Funding target attainment percentage	14	94.93 %
15 Adjusted funding target attainment percentage	15	95.17 %
16 Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	90.78 %
17 If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and Liquidity Shortfalls**18** Contributions made to the plan for the plan year by employer(s) and employees:

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
Totals ▶			18(b)	0	18(c) 0

19 Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:

a Contributions allocated toward unpaid minimum required contributions from prior years.	19a	0
b Contributions made to avoid restrictions adjusted to valuation date	19b	0
c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	0

20 Quarterly contributions and liquidity shortfalls:

- a** Did the plan have a "funding shortfall" for the prior year? ☒ Yes ☐ No
- b** If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner? ☒ Yes ☐ No

c If line 20a is "Yes," see instructions and complete the following table as applicable:

Liquidity shortfall as of end of quarter of this plan year				
(1) 1st	(2) 2nd	(3) 3rd	(4) 4th	
0	0	0	0	0

Part V	Assumptions Used to Determine Funding Target and Target Normal Cost
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21 Discount rate:			
a Segment rates:	1st segment: 4.75 %	2nd segment: 4.87 %	3rd segment: 5.59 % ☐ N/A, full yield curve used
b Applicable month (enter code).....			21b 4
22 Weighted average retirement age			22 63
23 Mortality table(s) (see instructions) ☐ Prescribed - combined ☒ Prescribed - separate ☐ Substitute			

Part VI	Miscellaneous Items
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24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment.	☐ Yes ☒ No
25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment.	☐ Yes ☒ No
26 Demographic and benefit information	
a Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment.	☒ Yes ☐ No
b Is the plan required to provide a projection of expected benefit payments? If "Yes," see instructions regarding required attachment ...	☒ Yes ☐ No
27 If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment.....	27

Part VII	Reconciliation of Unpaid Minimum Required Contributions For Prior Years
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28 Unpaid minimum required contributions for all prior years	28	0
29 Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a).....	29	0
30 Remaining amount of unpaid minimum required contributions (line 28 minus line 29).....	30	0

Part VIII	Minimum Required Contribution For Current Year
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31 Target normal cost and excess assets (see instructions):			
a Target normal cost (line 6c).....	31a	9,179,629	
b Excess assets, if applicable, but not greater than line 31a	31b	0	
32 Amortization installments:	Outstanding Balance	Installment	
a Net shortfall amortization installment	73,260,028	7,263,348	
b Waiver amortization installment	0	0	
33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	33		
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)....	34	16,442,977	
	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	16,442,977	0	16,442,977
36 Additional cash requirement (line 34 minus line 35).....	36	0	
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c).....	37	0	
38 Present value of excess contributions for current year (see instructions)			
a Total (excess, if any, of line 37 over line 36)	38a	0	
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	38b	0	
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37).....	39	0	
40 Unpaid minimum required contributions for all years	40	0	

Part IX	Pension Funding Relief Under the American Rescue Plan Act of 2021 (See Instructions)
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41 If an election was made to use the extended amortization rule for a plan year beginning on or before December 31, 2021, check the box to indicate the first plan year for which the rule applies. ☐ 2019 ☐ 2020 ☒ 2021
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SCHEDULE SB ATTACHMENTS

Schedule SB – Statement by Enrolled Actuary

Plan Sponsor	Unum Group
EIN/PN	62-1598430/001
Plan Name	Unum Group Pension Plan
Valuation Date	January 1, 2024
Enrolled Actuary	Timothy W. Devoe
Enrollment Number	23-07222

The actuarial assumptions that are not mandated by IRC § 430 and regulations, represent the enrolled actuary's best estimate of anticipated experience under the plan, subject to the following conditions:

The actuarial valuation, on which the information in this Schedule SB is based, has been prepared in reliance upon the employee and financial data furnished by the plan administrator and the trustee. The enrolled actuary has not made a rigorous check of the accuracy of this information but has accepted it after reviewing it and concluding it is reasonable in relation to similar information furnished in previous years. The amounts of contributions and dates paid shown in Item 18 of Schedule SB were listed in reliance on information provided by the plan administrator and/or trustee.

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 22
Description of Weighted Average Retirement Age
as of January 1, 2024

See Schedule SB, Part V - Statement of Actuarial Assumptions/Methods for retirement rates. The average retirement age for Line 22 was calculated by determining the average age at retirement for those current active participants expected to reach retirement, based on all current decrements assumed.

Plan Name:	Unum Group Pension Plan
EIN / PN:	62-1598430/001
Plan Sponsor:	Unum Group
Valuation Date:	January 1, 2024

SCHEDULE SB ATTACHMENTS

Schedule SB, Part V Statement of Actuarial Assumptions/Methods

Economic Assumptions

Interest rate basis:

- Applicable month September
- Interest rate 3-Segment Rates

Interest rates:	Reflecting Stabilization	Not Reflecting Stabilization
• First segment rate	4.75%	3.62%
• Second segment rate	4.87%	4.46%
• Third segment rate	5.59%	4.52%
• Effective interest rate	5.16%	4.45%

Pension equity plan interest rate 3.50%

Annual rates of increase

- Compensation N/A
- Statutory limits on compensation/benefits N/A
- National Average Wage Index N/A
- Assumed cost of living increase N/A

Plan-related expenses Plan-related expenses are assumed to be the amount of the administrative expenses paid during the prior year adjusted for expected changes in expenses during the current year. The amount included this year for plan-related expenses is \$9,179,629.

Plan Name: Unum Group Pension Plan
EIN / PN: 62-1598430/001
Plan Sponsor: Unum Group
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

As permitted by law, rates reflecting stabilization are used to determine the funding target, and thus the minimum required contribution under IRC §430 for the plan. Because these assumptions are subject to a corridor based on average interest rates over a 25-year period, they may differ from (and currently are higher than) current market interest rates, and may be inconsistent with other economic assumptions used in the valuation.

Demographic Assumptions

Inclusion date	The valuation date coincident with or next following the date on which the employee enters the plan.
New or rehired employees	It was assumed there will be no new or rehired employees.
Mortality	For all participants: separate rates for non-annuitants and annuitants based on Pri-2012 “Employees” and “Healthy Annuitants” (participants and beneficiaries combined) tables, respectively, without collar or amount adjustments and then projected forward with a generational projection as specified in the regulations under §1.430(h)(3)-1 using the IRS adjusted Scale MP-2021 (i.e., MP-2021 with no mortality improvement for 2020-2023 and future mortality improvement capped at 0.78% for years after 2024).

Plan Name:	Unum Group Pension Plan
EIN / PN:	62-1598430/001
Plan Sponsor:	Unum Group
Valuation Date:	January 1, 2024

SCHEDULE SB ATTACHMENTS

Termination rates not due to disability, retirement, or mortality

- Home office participants

Age	Rate
<41	0.0600
41	0.0580
42	0.0560
43	0.0540
44	0.0520
45+	0.0500

- Sales participants

Age	Rate
<36	0.0800
36	0.0780
37	0.0760
38	0.0740
39	0.0720
40	0.0700
41	0.0680
42	0.0660
43	0.0640
44	0.0620
45+	0.0600

Disability

The rates at which participants are assumed to become disabled by age and gender are shown below:

Age	Males	Females
25	0.09%	0.09%
35	0.13%	0.13%
45	0.33%	0.33%
55	1.02%	1.02%

Plan Name: Unum Group Pension Plan
EIN / PN: 62-1598430/001
Plan Sponsor: Unum Group
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Retirement

For purposes of determining the Funding Target and Target Normal Cost (both disregarding at-risk assumptions), the rates at which participants are assumed to retire by age are shown below:

From active employment:

Home Office Participants	
Age	Retirement Rate
55-58	7%
59-60	10%
61	15%
62-64	20%
65-69	30%
70+	100%

Sales Participants	
Age	Retirement Rate
55-60	10%
61	15%
62	20%
63-69	25%
70+	100%

Benefit commencement date:

- Preretirement death benefit If eligible for a lump sum, upon death, otherwise the later of the death of the active participant or the date the participant would have attained age 55.
- Deferred vested benefit The later of age 65 (age 62 for former Provident and Paul Revere participants who are eligible for an unreduced benefit at age 62) or termination of employment.
- Disability benefit If eligible for a lump sum, upon disability, otherwise the later of age 65 or age at disability.
- Retirement benefit Upon termination of employment.

Form of payment

Participants not eligible for a lump sum are assumed to elect the normal form. For participants eligible for a lump sum, 55% are assumed to elect a lump sum and 45% are assumed to elect the normal form. Lump sum benefits reflect the valuation segment rates and the 2024 PPA lump sum mortality table.

Plan compensation

Not applicable.

Plan Name: Unum Group Pension Plan
EIN / PN: 62-1598430/001
Plan Sponsor: Unum Group
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Percent married	80% of eligible participants. Used to value pre-retirement surviving spouse benefits.
Spouse age	Wife three years younger than husband.
Cash flow timing of benefit payments	Annuity payments are payable monthly at the beginning of the month, and lump sums are payable on the date of decrement.

Methods

Valuation date	First day of plan year.
Funding target	Present value of accrued benefits.
Target normal cost	Present value of benefits expected to accrue during plan year plus plan-related expenses expected to be paid from plan assets during plan year.
Decrement timing	The approach used is called rounded middle of year (rounded MOY) decrement timing. Most events are assumed to occur at the middle of year during which the eligibility condition will be met or the start/end date will occur. For death and disability decrements, the rate applied is based on the participant's rounded age (nearest integer age) at the beginning of the year, to align with the methodology generally used to create those rate tables. For retirement and withdrawal decrements: the age is generally the participant's rounded age at the middle of the year.

Plan Name:	Unum Group Pension Plan
EIN / PN:	62-1598430/001
Plan Sponsor:	Unum Group
Valuation Date:	January 1, 2024

SCHEDULE SB ATTACHMENTS

Actuarial value of assets

Average of the fair market value of assets on the valuation date and the two immediately preceding valuation dates, adjusted for contributions, benefits, administrative expenses and expected earnings of 7.25% (with such expected earnings limited as described in IRS Notice 2009-22). The average asset value must be within 10% of market value, including discounted contributions receivable (discounted using the effective interest rate for the prior plan year).

The method of computing the actuarial value of assets complies with rules governing the calculation of such values under the Pension Protection Act of 2006 (PPA). These rules produce smoothed values that reflect the underlying market value of plan assets but fluctuate less than the market value. As a result, the actuarial value of assets will be lower than the market value in some years and greater in other years. However, over the long term under PPA's smoothing rules, the method has a significant bias to produce an actuarial value of assets that is below the market value of assets.

Benefits not valued

All benefits described in the Plan Provisions section of this report were valued. WTW has reviewed the plan provisions with Unum Group and, based on that review, is not aware of any significant benefits required to be valued that were not.

Sources of Data and Other Information

The plan sponsor through its third-party administrator furnished participant data as of January 1, 2024 and information on plan provisions. Information on assets and contributions was provided by the plan trustee. Data and other information were reviewed for reasonableness and consistency, but no audit was performed. Based on discussions with the plan sponsor, assumptions or estimates were made when data were not available, and the data was adjusted to reflect any significant events that occurred between the date the data was collected and the measurement date. In consultation with the plan sponsor, there were no significant issues found with missing or inconsistent data. We are aware of no adjustments made by the data provider. We are not aware of any errors or omissions in the data that would have a significant effect on the results of our calculations.

Assumptions Rationale - Significant Economic Assumptions

Discount rate

The basis chosen was selected by the plan sponsor from among choices prescribed by law, all of which are based on observed market data over certain periods of time.

Plan Name: Unum Group Pension Plan
EIN / PN: 62-1598430/001
Plan Sponsor: Unum Group
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Pension equity plan interest credit	Defined in the plan provisions as the increase in the National Average Wages (NAW), subject to a minimum of 2.75% and a maximum of 5%. The assumed increase in NAW is based on expected increases in CPI and real wages.
Expected return on plan assets	We understand that the expected return on assets assumption reflects the plan sponsor's estimate of future experience for trust asset returns, reflecting the plan's current asset allocation and any expected changes during the current plan year, current market conditions and the plan sponsor's expectations for future market conditions.
Lump sum conversion rate	As required by IRC §430, lump sum benefits are valued using "annuity substitution", so that the interest rates assumed are effectively the same as described above for the discount rate.
Administrative expenses	Administrative expenses expected to be paid from the trust during the year are estimated as the actual expenses paid from the trust during the preceding year, adjusted for expected changes in expenses during the current year.

Plan Name:	Unum Group Pension Plan
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Assumptions Rationale - Significant Demographic Assumptions

Healthy Mortality	Assumptions used for funding purposes are as prescribed by IRC §430(h).
Disabled Mortality	Assumptions used for funding purposes are as prescribed by IRC §430(h).
Termination	Termination rates were based on a plan experience study conducted during 2019, with annual consideration of whether any conditions have changed that would be expected to produce different results in the future.
Disability	Disability rates were based on a plan experience study, with annual consideration of whether any conditions have changed that would be expected to produce different results in the future.
Retirement	Retirement rates were based on a plan experience study conducted during 2019, with annual consideration of whether any conditions have changed that would be expected to produce different results in the future.

Source of Prescribed Methods

Funding methods	The methods used for funding purposes as described in Appendix A, including the method of determining plan assets, are “prescribed methods set by law”, as defined in the actuarial standards of practice (ASOPs). These methods are required by IRC §430, or were selected by the plan sponsor from a range of methods permitted by IRC §430.
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Plan Name: Unum Group Pension Plan
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SCHEDULE SB ATTACHMENTS

Changes in Assumptions and Methods

Change in assumptions and methods since prior valuation

- The segment interest rates used to calculate the funding target, target normal cost and the lump sum interest rate were updated from an applicable month of September 2022 to September 2023 as required by IRC §430.
- The mortality table used to calculate the funding target and target normal cost was changed from using a static projection of mortality improvement to a generational projection as required by guidance issued by IRS under IRC §430.
- The assumed plan-related expenses added to the target normal cost were updated from \$9,222,958 for 2023 to \$9,179,629 for 2024.

Plan Name: Unum Group Pension Plan
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SCHEDULE SB ATTACHMENTS

Schedule SB, Part V Summary of Plan Provisions

Plan sponsor

Unum Group

Plan

Unum Group Pension Plan

Effective Date and Most Recent Amendment

The plan was originally effective January 1, 2000. The last restatement reflected herein is effective January 1, 2015. The plan was amended to freeze benefit accruals and participation effective December 31, 2013. In addition, all active participants on December 31, 2013 are fully vested. Effective January 1, 2016, the plan was amended to increase the limit on lump sum distributions from \$10,000 to \$100,000. Effective January 1, 2018, the preretirement death benefit was changed to a qualified 100% contingent survivor annuity in the event a participant dies prior to reaching commencement eligibility and affirmatively electing a form of benefit.

Plan Year

The twelve-month period ending December 31.

Coverage and Participation

All employees except those covered by a collective bargaining agreement, independent contractors, on-call enrollers or interns, participants in a Canadian pension plan sponsored by Unum Group, employees of Colonial Companies, Inc. who are entitled to receive vested commissions (except regional directors), nonresident aliens who receive no income from sources within the U.S., leased employees, and individuals compensated solely by commission are covered.

Covered employees will participate as soon as they complete 1 year of eligibility service. An employee shall accrue 1 year of eligibility service if he or she completes at least 1,000 hours of service during the 12-month period beginning on his or her date of employment. If the employee does not complete 1,000 hours of service as of the first anniversary of his or her date of employment, the computation period for determining eligibility service shall be the plan year, beginning with the plan year in which the employee's first anniversary of employment occurs.

Participation is closed effective December 31, 2013.

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Benefit Service

Effective January 1, 2000, an eligible employee earns 1 year of benefit service for each plan year in which he completes 1,000 hours of service. Prior to January 1, 2000, the eligible employee is credited with benefit service earned under the prior plan on December 31, 1999 (March 31, 2000 for former Provident Plan participants).

No benefit service is earned after December 31, 2013.

Vesting Service

Effective January 1, 2000, an employee earns 1 year of vesting service for each plan year in which he completes 1,000 hours of service. Prior to January 1, 2000, the employee is credited with vesting service earned under the prior plan on December 31, 1999 (March 31, 2000 for former Provident Plan participants).

Earnings

Effective January 1, 2000, earnings are base pay received in each plan year during which the employee accrues Benefit Service. Earnings also include payments received from a field or sales compensation plan, remuneration paid by a foreign affiliate to an individual who is treated as an employee, extended time and overtime payments, and earnings paid under a recognized annual incentive program. Earnings do not include other bonuses, commissions, prizes, awards or allowances for incidentals.

Earnings after December 31, 2013 are not considered.

Final Average Earnings

The average of the highest 5 year of compensation (whether or not consecutive) during the 10 years prior to termination.

Interest Adjustment

National Average Wage rate of increase published by the Social Security Administration in the preceding year (minimum 2.75%; maximum 5.00%).

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Normal Retirement Benefit

Normal Retirement Date: Age 65

Monthly Benefit: The greater of the Benefit Value of the Basic Benefit plus Transition Benefit, or the applicable minimum benefit.

Normal Form of Retirement Income: Life annuity for unmarried and 66-2/3% contingent annuity for married participants.

Optional Forms of Retirement Income in Lieu of Normal Form

- 50%, 66-2/3%, 75%, or 100% contingent survivor annuities.
- 5, 10, or 15-year term certain and life.
- Life annuity option with 3.00% per year cost of living increases.
- Lump sum option (if less than \$100,000).

Late Retirement Benefit

Eligibility: Retirement after age 65.

Monthly Benefit: The greater of the Benefit Value of the Basic Benefit plus Transition Benefit, or the applicable minimum benefit.

Early Retirement Benefit

Eligibility: Age 55 with 5 years of Vesting Service.

Monthly Benefit: The greater of the Benefit Value, measured at benefit commencement, of the Basic Benefit plus Transition Benefit or the applicable minimum benefit reduced for early retirement.

Disability Benefit

Eligibility: 5 years of vesting service and cessation of active employment due to total disability.

Monthly Benefit: Benefit determined as of the participant's benefit commencement date, with participant continuing to receive Benefit Service and Vesting service while disabled. During period of disability, participant is credited with earnings equal to earnings (excluding overtime and inactive compensation) immediately prior to disability period. This provision was modified effective January 1, 2005 for future disabled participants to discontinue service accruals upon termination from employment 12 months after date of disability.

Benefit Commencement: Payable at age 65 or at an age not earlier than age 55.

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Vested Benefits Upon Termination of Service

Vesting: 100% vested after 5 years (3 years effective January 1, 2008) of vesting service, or age 65. All active participants on December 31, 2013 are fully vested.

Termination Benefit: Benefit Value equals the Basic Benefit plus Transition Benefit determined as of the date of termination, increased on the first day of each Plan Year following the participant's date of termination using the Interest Adjustment, and then divided by the Benefit Value Factor based on the participant's age as of the Benefit Commencement Date.

Participant receives the greater of the Benefit Value measured at benefit commencement or the applicable minimum benefit.

Preretirement Death Benefit

Eligibility: Death of a married participant who has earned the right to a vested benefit.

Benefit: The amount that would be payable to the spouse if the participant terminated on his or her date of death, elected payment at the earliest eligibility for early retirement in the form of a qualified 100% contingent survivor annuity (or actual form affirmatively elected by participant prior to death), and died prior to the first payment.

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Benefit Formulas

Basic Benefit

Former UNUM Plan participants on December 31, 1999—Basic Benefit is Y% of Final Average Earnings for Benefit Service prior to January 1, 2000, plus X% of Final Average Earnings for Benefit Service on and after January 1, 2000; plus 3.50% of Final Average Earnings in excess of covered compensation at termination, times years of Benefit Service.

All Others—Basic Benefit is X% of Final Average Earnings plus 3.50% of Final Average Earnings in excess of covered compensation at termination, times year of Benefit Service.

Age Plus Vesting Service	Y%	X%
<30	3.50%	3.00%
30-39	4.00%	3.50%
40-49	5.00%	4.00%
50-54	6.00%	5.00%
55-59	7.00%	6.00%
60-64	7.50%	6.50%
65-69	7.80%	6.80%
70-74	8.00%	7.00%
75-79	8.20%	7.20%
80-84	8.40%	7.40%
85-89	8.60%	7.60%
90-94	8.80%	7.80%
95 and above	9.00%	8.00%

Transition Benefit

All (a) UNUM or Colonial participants as of December 31, 1996 who attained age 45 by June 30, 1997 or (b) Paul Revere participants as of March 31, 2000 who attained age 45 and completed 20 years of Vesting Service as of March 31, 2000 are entitled to the Transition Benefit, as follows: A% of the participant's Final Average Earnings plus B% of the participant's Final Average Earnings in excess of covered compensation, times years of Benefit Service up to 30 years (15 years for Colonial participants).

Age Nearest Birthday on Transition Date	A%	B%
>60	2.50%	2.00%
55-59	2.00%	2.00%
50-54	1.25%	1.25%
45-49	0.50%	0.50%

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Transition date is June 30, 1997 for former UNUM and Colonial participants, and March 31, 2000 for former Paul Revere participants.

Minimum Value Basic Benefit Plus Transition Benefit

The Basic Benefit plus Transition Benefit as of the valuation date, multiplied by the Interest Adjustment effective for the Plan year for the period from the valuation date to the assumed date of decrement. This minimum is calculated and compared with the accrued benefit as of the assumed date of decrement.

Benefit Value

The Benefit Value of the Basic Benefit and Transition Benefit is determined by dividing such Basic Benefit and Transition Benefit by a factor from the following table:

Age at Benefit Commencement	Factor
65	9.00
64	9.20
63	9.40
62	9.60
61	9.80
60	10.00
59	10.20
58	10.40
57	10.60
56	10.80
55	11.00

For ages older than 65, the factor is determined by reducing the age 65 factor by 0.2 for each whole year over 65, but not less than 5.0. For ages younger than age 55, the factor is determined by increasing the age 55 factor by 0.2 for each whole year under 55.

Plan Name: Unum Group Pension Plan
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Minimum Benefit Formulas

Grandfathered Minimum Benefit UNUM

For pre-1997 UNUM Plan participants on December 31, 1996 who were at least age 50, the minimum Normal Retirement Benefit equals the sum of (i) and (ii):

- (i) The product of (a), (b) and (c) as follows:
 - (a) Accrued benefit on December 31, 1996 under pre-1997 UNUM plan.
 - (b) A fraction, the numerator of which is the Final Average Earnings through the earlier of termination of employment and December 31, 2001, and the denominator of which is Final Average Earnings as defined under the pre-1997 UNUM Plan as of December 31, 1996.
 - (c) A fraction, the numerator of which is Benefit Service as of the earlier of termination of employment and December 31, 2001 (maximum 25 years) and the denominator of which is credited service as of December 31, 1996 (maximum 25 years).
- (ii) 1.00% of Final Average Earnings through the earlier of December 31, 2001 and termination of employment times years of Benefit Service in excess of 25 earned after December 31, 1996 and before January 1, 2002.

For early retirement, the benefit is reduced 5.00% per year prior to age 65.

Grandfathered Minimum Benefit Provident

For Provident Plan participants on March 31, 2000 who were at least age 50 with 5 years of Benefit Service, the minimum Normal Retirement Benefit equals the sum of (i) and (ii):

- (i) The product of (a), (b) and (c) as follows:
 - (a) Accrued benefit as of March 31, 2000 under the Provident Plan.
 - (b) A fraction, the numerator of which is final average pay through the earlier of termination of employment and December 31, 2004, and the denominator of which is final average pay as of March 31, 2000.
 - (c) A fraction, the numerator of which is Benefit Service as of the earlier of termination of employment and December 31, 2004 (maximum 20 years) and the denominator of which is Benefit Service as of March 31, 2000 (maximum 20 years).
- (ii) 1.00% of final average pay through the earlier of December 31, 2004 and termination of employment, times years of Benefit Service in excess of 20, up to 30 years, earned after March 31, 2000 through the earlier of December 31, 2004 and termination of employment

For early retirement and vested terminated participants, the benefit is reduced 4.00% per year prior to age 62.

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SCHEDULE SB ATTACHMENTS

Grandfathered Minimum Benefit Colonial

For pre-1997 Colonial Plan participants on December 31, 1996 who were at least age 50, the minimum Normal Retirement Benefit equals sum of (i) and (ii):

- (i) The product of (a), (b) and (c) as follows:
 - (a) Accrued benefit as of December 31, 1996 under pre-1997 Colonial Plan.
 - (b) A fraction, the numerator of which is Final Average Earnings through the earlier of termination of employment and December 31, 2001, and the denominator of which is Final Average Earnings under the pre-1997 Colonial Plan as of December 31, 1996.
 - (c) A fraction, the numerator of which is Benefit Service as of the earlier of termination of employment and December 31, 2001 (maximum 20 years) and the denominator of which is credited service as of December 31, 1996 (maximum 20 years).
- (ii) The sum of 0.75% of Final Average Earnings through the earlier of December 31, 2001 and termination of employment plus 0.75% of Final Average Earnings in excess of covered compensation, times years of Benefit Service in excess of 20 but not in excess of 35 earned after December 31, 1996 and before January 1, 2002.

For early retirement, the benefit is reduced 6.67% per year for the first 5 years prior to age 65, and 3.33% per year for the next 5 years.

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Grandfathered Minimum Benefit Paul Revere

For Paul Revere Plan participants on March 31, 2000 who were at least age 50 with 5 years of Benefit Service, the product of (a), (b) and (c) as follows:

- (a) Accrued benefit as of March 31, 2000 under the Paul Revere Plan.
- (b) A fraction, the numerator of which is final average earnings through the earlier of termination of employment and December 31, 2004 and the denominator of which is final average earnings as of March 31, 2000.
- (c) A fraction, the numerator of which is Benefit Service as of the earlier of termination of employment and December 31, 2004 (maximum 35 years), and the denominator of which is Benefit Service as of March 31, 2000 (maximum 35 years).

For early commencement, the benefit is reduced as follows:

Age	Early Retirement Reduction Factor	Vested Terminated Reduction Factor
65	1.000	1.000
64	1.000	0.933
63	1.000	0.867
62	1.000	0.800
61	0.950	0.733
60	0.900	0.667
59	0.850	0.633
58	0.800	0.600
57	0.750	0.567
56	0.688	0.533
55	0.632	0.500

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Minimum Rule of 85 Benefit

All employees who were participants in the pre-1997 UNUM plan, whose sum of age and all Benefit Services equaled at least 65 as of December 31, 1996, and who will be eligible for early retirement before January 1, 2007 will have a minimum Rule 85 benefit payable at Normal Retirement Date calculated as the sum of (i) and (ii):

- (i) The product of (a), (b) and (c) as follows:
 - (a) Accrued benefit as of December 31, 1996 under pre-1997 UNUM Plan.
 - (b) A fraction, the numerator of which is Final Average Earnings through the earlier of termination of employment and December 31, 2001, and the denominator of which is Final Average Earnings under the pre-1997 UNUM Plan as of December 31, 1996.
 - (c) A fraction, the numerator of which is Benefit Service as of the earlier of termination of employment and December 31, 2006 (maximum 25 years) and the denominator of which is Benefit Service as of December 31, 1996 (maximum 25 years).
- (ii) The product of (a), (b) and (c) as follows: % of Final Average Earnings through the earlier of December 31, 2001 and termination of employment times years of Benefit Service in excess of 25 earned after December 31, 1996 through the earlier of December 31, 2004 and termination of employment.

If the participant's age in years and completed months plus Benefit Service at Early Retirement Date equals or exceeds 85, the Rule of 85 Benefit described above is reduced by the following factors:

Age at Early Retirement	Factor
60-64	1.00
59	0.95
58	0.90
57	0.85
56	0.80
55	0.75

If the participant has fewer than 85 points at benefit commencement, but satisfies all other conditions for the Rule of 85 benefit, the benefit is reduced 5.00% per year for each year before age 65.

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Minimum Benefit All Participants

The benefit payable shall not be less than the prior plan accrued benefit under the UNUM Plan on December 31, 1999 or the Provident Plan or Paul Revere Plan on March 31, 2000. The prior plan accrued benefit includes any early retirement benefit or retirement-type subsidiary available under such prior plan.

Changes in Plan Provisions since Last Actuarial Valuation

There have been no changes in the plan provisions since the prior valuation.

Plan Name: Unum Group Pension Plan
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Plan Sponsor: Unum Group
Valuation Date: January 1, 2024

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Schedule SB, Line 26a

Schedule of Active Participant Data for Cash Balance Plans as of January 1, 2024

Number and average account balance distributed by attained age and attained years of credited service

Attained Age	Under 1	Attained Years of Credited Service¹									Total
		1-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40 & Over	
Under 25	0	0	0	0	0	0	0	0	0	0	0
25-29	-	-	-	-	-	-	-	-	-	-	-
	0	0	0	0	0	0	0	0	0	0	0
30-34	-	-	-	-	-	-	-	-	-	-	-
	0	56	0	0	0	0	0	0	0	0	56
35-39	-	2,738	-	-	-	-	-	-	-	-	2,738
	0	196	99	1	0	0	0	0	0	0	296
40-44	-	4,914	18,996	-	-	-	-	-	-	-	9,688
	1	87	156	111	3	0	0	0	0	0	358
45-49	-	5,549	19,535	42,191	-	-	-	-	-	-	23,314
	1	67	106	250	80	0	0	0	0	0	504
50-54	-	7,393	27,205	56,955	123,622	-	-	-	-	-	54,658
	2	50	75	206	151	65	4	0	0	0	553
55-59	-	11,589	29,045	66,747	135,388	199,362	-	-	-	-	91,804
	2	36	54	135	126	104	92	9	0	0	558
60-64	-	14,609	43,176	83,239	136,888	233,808	225,776	-	-	-	140,667
	0	29	50	82	88	48	77	51	8	0	433
65-69	-	13,797	50,872	90,590	139,192	190,028	312,541	257,952	-	-	164,702
	0	8	19	21	17	9	11	11	11	0	107
70 & over	-	-	-	128,965	-	-	-	-	-	-	175,041
	0	5	2	6	4	3	0	0	1	1	22
Total	-	-	-	-	-	-	-	-	-	-	160,400
	6	534	561	812	469	229	184	71	20	1	2,887
	-	7,052	28,005	68,366	134,253	212,210	271,139	264,390	293,213	-	90,665

¹ Age and service for purposes of determining category are based on exact (not rounded) values.

Plan Name: Unum Group Pension Plan

EIN / PN: 62-1598430/001

Plan Sponsor: Unum Group

Valuation Date: January 1, 2024

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Schedule SB, Line 26b Schedule of Projection of Expected Benefit Payments

Plan Year	Active Participants	Terminated Vested Participants	Retired Participants and Beneficiaries Receiving Payments	Total
2024	5,177,299	1,695,224	67,449,541	74,322,064
2025	7,940,528	3,918,294	66,009,888	77,868,710
2026	10,398,909	6,708,023	64,664,448	81,771,380
2027	12,545,306	9,463,033	63,454,366	85,462,705
2028	14,551,892	11,937,017	62,219,475	88,708,384
2029	16,525,069	14,309,219	60,817,371	91,651,659
2030	18,170,987	16,458,730	59,302,407	93,932,124
2031	19,764,571	18,433,062	57,810,538	96,008,171
2032	21,111,985	20,544,288	56,304,419	97,960,692
2033	22,167,365	22,691,480	54,710,255	99,569,100
2034	23,085,133	24,814,217	53,048,501	100,947,851
2035	23,866,818	26,943,889	51,285,497	102,096,204
2036	24,486,038	29,011,168	49,388,895	102,886,101
2037	24,918,374	30,721,003	47,379,290	103,018,667
2038	25,205,112	31,974,410	45,246,897	102,426,419
2039	25,532,707	32,893,488	43,010,163	101,436,358
2040	25,618,141	33,438,812	40,678,660	99,735,613
2041	25,552,283	33,684,223	38,258,659	97,495,165
2042	25,369,839	33,684,841	35,766,873	94,821,553
2043	25,034,806	33,666,064	33,222,863	91,923,733
2044	24,573,611	33,586,075	30,648,627	88,808,313
2045	24,012,624	33,255,113	28,068,017	85,335,754
2046	23,371,035	32,658,816	25,506,054	81,535,905
2047	22,609,177	31,956,608	22,988,329	77,554,114
2048	21,753,969	31,194,604	20,540,469	73,489,042
2049	20,870,492	30,227,594	18,187,397	69,285,483
2050	19,962,960	29,059,836	15,952,312	64,975,108
2051	18,978,981	27,786,614	13,855,528	60,621,123
2052	17,933,726	26,425,127	11,913,602	56,272,455

Plan Name: Unum Group Pension Plan
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Valuation Date: January 1, 2024

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Plan Year	Active Participants	Terminated Vested Participants	Retired Participants and Beneficiaries Receiving Payments	Total
2053	16,870,138	24,993,160	10,138,713	52,002,011
2054	15,778,972	23,502,825	8,538,196	47,819,993
2055	14,672,867	21,978,825	7,114,580	43,766,272
2056	13,563,553	20,435,200	5,865,869	39,864,622
2057	12,465,657	18,897,057	4,785,913	36,148,627
2058	11,385,894	17,376,774	3,865,165	32,627,833
2059	10,337,243	15,886,905	3,091,385	29,315,533
2060	9,326,997	14,438,724	2,450,422	26,216,143
2061	8,361,634	13,042,703	1,927,064	23,331,401
2062	7,446,844	11,708,175	1,505,778	20,660,797
2063	6,587,936	10,443,199	1,171,336	18,202,471
2064	5,788,144	9,254,554	909,368	15,952,066
2065	5,049,846	8,147,354	706,750	13,903,950
2066	4,374,263	7,124,993	551,837	12,051,093
2067	3,761,523	6,189,044	434,591	10,385,158
2068	3,210,755	5,339,403	346,572	8,896,730
2069	2,720,143	4,574,501	280,833	7,575,477
2070	2,287,015	3,891,481	231,774	6,410,270
2071	1,908,127	3,286,472	194,994	5,389,593
2072	1,579,729	2,754,772	167,111	4,501,612
2073	1,297,644	2,291,159	145,587	3,734,390

Plan Name: Unum Group Pension Plan
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Plan Sponsor: Unum Group
Valuation Date: January 1, 2024

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Schedule SB, Line 32
Schedule of Amortization Bases
as of January 1, 2024

Type of Base	Date Established	Initial Amount	Remaining Amortization Period (Years)	Outstanding Balance	Amortization Payment
1. Shortfall	01/01/2024	(60,774,445)	15.00000	(60,774,445)	(5,529,277)
2. Shortfall	01/01/2023	139,686,893	14.00000	134,034,473	12,792,625
Total				73,260,028	7,263,348

Plan Name:
EIN / PN:
Plan Sponsor:
Valuation Date:

Unum Group Pension Plan
62-1598430/001
Unum Group
January 1, 2024

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Schedule SB, Line 22
Description of Weighted Average Retirement Age
as of January 1, 2024

See Schedule SB, Part V - Statement of Actuarial Assumptions/Methods for retirement rates. The average retirement age for Line 22 was calculated by determining the average age at retirement for those current active participants expected to reach retirement, based on all current decrements assumed.

Plan Name:	Unum Group Pension Plan
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Plan Sponsor:	Unum Group
Valuation Date:	January 1, 2024

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 26b Schedule of Projection of Expected Benefit Payments

Plan Year	Active Participants	Terminated Vested Participants	Retired Participants and Beneficiaries Receiving Payments	Total
2024	5,177,299	1,695,224	67,449,541	74,322,064
2025	7,940,528	3,918,294	66,009,888	77,868,710
2026	10,398,909	6,708,023	64,664,448	81,771,380
2027	12,545,306	9,463,033	63,454,366	85,462,705
2028	14,551,892	11,937,017	62,219,475	88,708,384
2029	16,525,069	14,309,219	60,817,371	91,651,659
2030	18,170,987	16,458,730	59,302,407	93,932,124
2031	19,764,571	18,433,062	57,810,538	96,008,171
2032	21,111,985	20,544,288	56,304,419	97,960,692
2033	22,167,365	22,691,480	54,710,255	99,569,100
2034	23,085,133	24,814,217	53,048,501	100,947,851
2035	23,866,818	26,943,889	51,285,497	102,096,204
2036	24,486,038	29,011,168	49,388,895	102,886,101
2037	24,918,374	30,721,003	47,379,290	103,018,667
2038	25,205,112	31,974,410	45,246,897	102,426,419
2039	25,532,707	32,893,488	43,010,163	101,436,358
2040	25,618,141	33,438,812	40,678,660	99,735,613
2041	25,552,283	33,684,223	38,258,659	97,495,165
2042	25,369,839	33,684,841	35,766,873	94,821,553
2043	25,034,806	33,666,064	33,222,863	91,923,733
2044	24,573,611	33,586,075	30,648,627	88,808,313
2045	24,012,624	33,255,113	28,068,017	85,335,754
2046	23,371,035	32,658,816	25,506,054	81,535,905
2047	22,609,177	31,956,608	22,988,329	77,554,114
2048	21,753,969	31,194,604	20,540,469	73,489,042
2049	20,870,492	30,227,594	18,187,397	69,285,483
2050	19,962,960	29,059,836	15,952,312	64,975,108
2051	18,978,981	27,786,614	13,855,528	60,621,123
2052	17,933,726	26,425,127	11,913,602	56,272,455

Plan Name: Unum Group Pension Plan
EIN / PN: 62-1598430/001
Plan Sponsor: Unum Group
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Plan Year	Active Participants	Terminated Vested Participants	Retired Participants and Beneficiaries Receiving Payments	Total
2053	16,870,138	24,993,160	10,138,713	52,002,011
2054	15,778,972	23,502,825	8,538,196	47,819,993
2055	14,672,867	21,978,825	7,114,580	43,766,272
2056	13,563,553	20,435,200	5,865,869	39,864,622
2057	12,465,657	18,897,057	4,785,913	36,148,627
2058	11,385,894	17,376,774	3,865,165	32,627,833
2059	10,337,243	15,886,905	3,091,385	29,315,533
2060	9,326,997	14,438,724	2,450,422	26,216,143
2061	8,361,634	13,042,703	1,927,064	23,331,401
2062	7,446,844	11,708,175	1,505,778	20,660,797
2063	6,587,936	10,443,199	1,171,336	18,202,471
2064	5,788,144	9,254,554	909,368	15,952,066
2065	5,049,846	8,147,354	706,750	13,903,950
2066	4,374,263	7,124,993	551,837	12,051,093
2067	3,761,523	6,189,044	434,591	10,385,158
2068	3,210,755	5,339,403	346,572	8,896,730
2069	2,720,143	4,574,501	280,833	7,575,477
2070	2,287,015	3,891,481	231,774	6,410,270
2071	1,908,127	3,286,472	194,994	5,389,593
2072	1,579,729	2,754,772	167,111	4,501,612
2073	1,297,644	2,291,159	145,587	3,734,390

Plan Name: Unum Group Pension Plan
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SCHEDULE SB ATTACHMENTS

Schedule SB – Statement by Enrolled Actuary

Plan Sponsor	Unum Group
EIN/PN	62-1598430/001
Plan Name	Unum Group Pension Plan
Valuation Date	January 1, 2024
Enrolled Actuary	Timothy W. Devoe
Enrollment Number	23-07222

The actuarial assumptions that are not mandated by IRC § 430 and regulations, represent the enrolled actuary's best estimate of anticipated experience under the plan, subject to the following conditions:

The actuarial valuation, on which the information in this Schedule SB is based, has been prepared in reliance upon the employee and financial data furnished by the plan administrator and the trustee. The enrolled actuary has not made a rigorous check of the accuracy of this information but has accepted it after reviewing it and concluding it is reasonable in relation to similar information furnished in previous years. The amounts of contributions and dates paid shown in Item 18 of Schedule SB were listed in reliance on information provided by the plan administrator and/or trustee.

SCHEDULE SB ATTACHMENTS

Schedule SB, Part V Summary of Plan Provisions

Plan sponsor

Unum Group

Plan

Unum Group Pension Plan

Effective Date and Most Recent Amendment

The plan was originally effective January 1, 2000. The last restatement reflected herein is effective January 1, 2015. The plan was amended to freeze benefit accruals and participation effective December 31, 2013. In addition, all active participants on December 31, 2013 are fully vested. Effective January 1, 2016, the plan was amended to increase the limit on lump sum distributions from \$10,000 to \$100,000. Effective January 1, 2018, the preretirement death benefit was changed to a qualified 100% contingent survivor annuity in the event a participant dies prior to reaching commencement eligibility and affirmatively electing a form of benefit.

Plan Year

The twelve-month period ending December 31.

Coverage and Participation

All employees except those covered by a collective bargaining agreement, independent contractors, on-call enrollers or interns, participants in a Canadian pension plan sponsored by Unum Group, employees of Colonial Companies, Inc. who are entitled to receive vested commissions (except regional directors), nonresident aliens who receive no income from sources within the U.S., leased employees, and individuals compensated solely by commission are covered.

Covered employees will participate as soon as they complete 1 year of eligibility service. An employee shall accrue 1 year of eligibility service if he or she completes at least 1,000 hours of service during the 12-month period beginning on his or her date of employment. If the employee does not complete 1,000 hours of service as of the first anniversary of his or her date of employment, the computation period for determining eligibility service shall be the plan year, beginning with the plan year in which the employee's first anniversary of employment occurs.

Participation is closed effective December 31, 2013.

Plan Name:	Unum Group Pension Plan
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SCHEDULE SB ATTACHMENTS

Benefit Service

Effective January 1, 2000, an eligible employee earns 1 year of benefit service for each plan year in which he completes 1,000 hours of service. Prior to January 1, 2000, the eligible employee is credited with benefit service earned under the prior plan on December 31, 1999 (March 31, 2000 for former Provident Plan participants).

No benefit service is earned after December 31, 2013.

Vesting Service

Effective January 1, 2000, an employee earns 1 year of vesting service for each plan year in which he completes 1,000 hours of service. Prior to January 1, 2000, the employee is credited with vesting service earned under the prior plan on December 31, 1999 (March 31, 2000 for former Provident Plan participants).

Earnings

Effective January 1, 2000, earnings are base pay received in each plan year during which the employee accrues Benefit Service. Earnings also include payments received from a field or sales compensation plan, remuneration paid by a foreign affiliate to an individual who is treated as an employee, extended time and overtime payments, and earnings paid under a recognized annual incentive program. Earnings do not include other bonuses, commissions, prizes, awards or allowances for incidentals.

Earnings after December 31, 2013 are not considered.

Final Average Earnings

The average of the highest 5 year of compensation (whether or not consecutive) during the 10 years prior to termination.

Interest Adjustment

National Average Wage rate of increase published by the Social Security Administration in the preceding year (minimum 2.75%; maximum 5.00%).

Plan Name:	Unum Group Pension Plan
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Plan Sponsor:	Unum Group
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SCHEDULE SB ATTACHMENTS

Normal Retirement Benefit

Normal Retirement Date: Age 65

Monthly Benefit: The greater of the Benefit Value of the Basic Benefit plus Transition Benefit, or the applicable minimum benefit.

Normal Form of Retirement Income: Life annuity for unmarried and 66-2/3% contingent annuity for married participants.

Optional Forms of Retirement Income in Lieu of Normal Form

- 50%, 66-2/3%, 75%, or 100% contingent survivor annuities.
- 5, 10, or 15-year term certain and life.
- Life annuity option with 3.00% per year cost of living increases.
- Lump sum option (if less than \$100,000).

Late Retirement Benefit

Eligibility: Retirement after age 65.

Monthly Benefit: The greater of the Benefit Value of the Basic Benefit plus Transition Benefit, or the applicable minimum benefit.

Early Retirement Benefit

Eligibility: Age 55 with 5 years of Vesting Service.

Monthly Benefit: The greater of the Benefit Value, measured at benefit commencement, of the Basic Benefit plus Transition Benefit or the applicable minimum benefit reduced for early retirement.

Disability Benefit

Eligibility: 5 years of vesting service and cessation of active employment due to total disability.

Monthly Benefit: Benefit determined as of the participant's benefit commencement date, with participant continuing to receive Benefit Service and Vesting service while disabled. During period of disability, participant is credited with earnings equal to earnings (excluding overtime and inactive compensation) immediately prior to disability period. This provision was modified effective January 1, 2005 for future disabled participants to discontinue service accruals upon termination from employment 12 months after date of disability.

Benefit Commencement: Payable at age 65 or at an age not earlier than age 55.

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SCHEDULE SB ATTACHMENTS

Vested Benefits Upon Termination of Service

Vesting: 100% vested after 5 years (3 years effective January 1, 2008) of vesting service, or age 65. All active participants on December 31, 2013 are fully vested.

Termination Benefit: Benefit Value equals the Basic Benefit plus Transition Benefit determined as of the date of termination, increased on the first day of each Plan Year following the participant's date of termination using the Interest Adjustment, and then divided by the Benefit Value Factor based on the participant's age as of the Benefit Commencement Date.

Participant receives the greater of the Benefit Value measured at benefit commencement or the applicable minimum benefit.

Preretirement Death Benefit

Eligibility: Death of a married participant who has earned the right to a vested benefit.

Benefit: The amount that would be payable to the spouse if the participant terminated on his or her date of death, elected payment at the earliest eligibility for early retirement in the form of a qualified 100% contingent survivor annuity (or actual form affirmatively elected by participant prior to death), and died prior to the first payment.

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Plan Sponsor:	Unum Group
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SCHEDULE SB ATTACHMENTS

Benefit Formulas

Basic Benefit

Former UNUM Plan participants on December 31, 1999—Basic Benefit is Y% of Final Average Earnings for Benefit Service prior to January 1, 2000, plus X% of Final Average Earnings for Benefit Service on and after January 1, 2000; plus 3.50% of Final Average Earnings in excess of covered compensation at termination, times years of Benefit Service.

All Others—Basic Benefit is X% of Final Average Earnings plus 3.50% of Final Average Earnings in excess of covered compensation at termination, times year of Benefit Service.

Age Plus Vesting Service	Y%	X%
<30	3.50%	3.00%
30-39	4.00%	3.50%
40-49	5.00%	4.00%
50-54	6.00%	5.00%
55-59	7.00%	6.00%
60-64	7.50%	6.50%
65-69	7.80%	6.80%
70-74	8.00%	7.00%
75-79	8.20%	7.20%
80-84	8.40%	7.40%
85-89	8.60%	7.60%
90-94	8.80%	7.80%
95 and above	9.00%	8.00%

Transition Benefit

All (a) UNUM or Colonial participants as of December 31, 1996 who attained age 45 by June 30, 1997 or (b) Paul Revere participants as of March 31, 2000 who attained age 45 and completed 20 years of Vesting Service as of March 31, 2000 are entitled to the Transition Benefit, as follows: A% of the participant's Final Average Earnings plus B% of the participant's Final Average Earnings in excess of covered compensation, times years of Benefit Service up to 30 years (15 years for Colonial participants).

Age Nearest Birthday on Transition Date	A%	B%
>60	2.50%	2.00%
55-59	2.00%	2.00%
50-54	1.25%	1.25%
45-49	0.50%	0.50%

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Transition date is June 30, 1997 for former UNUM and Colonial participants, and March 31, 2000 for former Paul Revere participants.

Minimum Value Basic Benefit Plus Transition Benefit

The Basic Benefit plus Transition Benefit as of the valuation date, multiplied by the Interest Adjustment effective for the Plan year for the period from the valuation date to the assumed date of decrement. This minimum is calculated and compared with the accrued benefit as of the assumed date of decrement.

Benefit Value

The Benefit Value of the Basic Benefit and Transition Benefit is determined by dividing such Basic Benefit and Transition Benefit by a factor from the following table:

Age at Benefit Commencement	Factor
65	9.00
64	9.20
63	9.40
62	9.60
61	9.80
60	10.00
59	10.20
58	10.40
57	10.60
56	10.80
55	11.00

For ages older than 65, the factor is determined by reducing the age 65 factor by 0.2 for each whole year over 65, but not less than 5.0. For ages younger than age 55, the factor is determined by increasing the age 55 factor by 0.2 for each whole year under 55.

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Minimum Benefit Formulas

Grandfathered Minimum Benefit UNUM

For pre-1997 UNUM Plan participants on December 31, 1996 who were at least age 50, the minimum Normal Retirement Benefit equals the sum of (i) and (ii):

- (i) The product of (a), (b) and (c) as follows:
 - (a) Accrued benefit on December 31, 1996 under pre-1997 UNUM plan.
 - (b) A fraction, the numerator of which is the Final Average Earnings through the earlier of termination of employment and December 31, 2001, and the denominator of which is Final Average Earnings as defined under the pre-1997 UNUM Plan as of December 31, 1996.
 - (c) A fraction, the numerator of which is Benefit Service as of the earlier of termination of employment and December 31, 2001 (maximum 25 years) and the denominator of which is credited service as of December 31, 1996 (maximum 25 years).
- (ii) 1.00% of Final Average Earnings through the earlier of December 31, 2001 and termination of employment times years of Benefit Service in excess of 25 earned after December 31, 1996 and before January 1, 2002.

For early retirement, the benefit is reduced 5.00% per year prior to age 65.

Grandfathered Minimum Benefit Provident

For Provident Plan participants on March 31, 2000 who were at least age 50 with 5 years of Benefit Service, the minimum Normal Retirement Benefit equals the sum of (i) and (ii):

- (i) The product of (a), (b) and (c) as follows:
 - (a) Accrued benefit as of March 31, 2000 under the Provident Plan.
 - (b) A fraction, the numerator of which is final average pay through the earlier of termination of employment and December 31, 2004, and the denominator of which is final average pay as of March 31, 2000.
 - (c) A fraction, the numerator of which is Benefit Service as of the earlier of termination of employment and December 31, 2004 (maximum 20 years) and the denominator of which is Benefit Service as of March 31, 2000 (maximum 20 years).
- (ii) 1.00% of final average pay through the earlier of December 31, 2004 and termination of employment, times years of Benefit Service in excess of 20, up to 30 years, earned after March 31, 2000 through the earlier of December 31, 2004 and termination of employment

For early retirement and vested terminated participants, the benefit is reduced 4.00% per year prior to age 62.

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Plan Sponsor:	Unum Group
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SCHEDULE SB ATTACHMENTS

Grandfathered Minimum Benefit Colonial

For pre-1997 Colonial Plan participants on December 31, 1996 who were at least age 50, the minimum Normal Retirement Benefit equals sum of (i) and (ii):

- (i) The product of (a), (b) and (c) as follows:
 - (a) Accrued benefit as of December 31, 1996 under pre-1997 Colonial Plan.
 - (b) A fraction, the numerator of which is Final Average Earnings through the earlier of termination of employment and December 31, 2001, and the denominator of which is Final Average Earnings under the pre-1997 Colonial Plan as of December 31, 1996.
 - (c) A fraction, the numerator of which is Benefit Service as of the earlier of termination of employment and December 31, 2001 (maximum 20 years) and the denominator of which is credited service as of December 31, 1996 (maximum 20 years).
- (ii) The sum of 0.75% of Final Average Earnings through the earlier of December 31, 2001 and termination of employment plus 0.75% of Final Average Earnings in excess of covered compensation, times years of Benefit Service in excess of 20 but not in excess of 35 earned after December 31, 1996 and before January 1, 2002.

For early retirement, the benefit is reduced 6.67% per year for the first 5 years prior to age 65, and 3.33% per year for the next 5 years.

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Grandfathered Minimum Benefit Paul Revere

For Paul Revere Plan participants on March 31, 2000 who were at least age 50 with 5 years of Benefit Service, the product of (a), (b) and (c) as follows:

- (a) Accrued benefit as of March 31, 2000 under the Paul Revere Plan.
- (b) A fraction, the numerator of which is final average earnings through the earlier of termination of employment and December 31, 2004 and the denominator of which is final average earnings as of March 31, 2000.
- (c) A fraction, the numerator of which is Benefit Service as of the earlier of termination of employment and December 31, 2004 (maximum 35 years), and the denominator of which is Benefit Service as of March 31, 2000 (maximum 35 years).

For early commencement, the benefit is reduced as follows:

Age	Early Retirement Reduction Factor	Vested Terminated Reduction Factor
65	1.000	1.000
64	1.000	0.933
63	1.000	0.867
62	1.000	0.800
61	0.950	0.733
60	0.900	0.667
59	0.850	0.633
58	0.800	0.600
57	0.750	0.567
56	0.688	0.533
55	0.632	0.500

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Plan Sponsor: Unum Group
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Minimum Rule of 85 Benefit

All employees who were participants in the pre-1997 UNUM plan, whose sum of age and all Benefit Services equaled at least 65 as of December 31, 1996, and who will be eligible for early retirement before January 1, 2007 will have a minimum Rule 85 benefit payable at Normal Retirement Date calculated as the sum of (i) and (ii):

- (i) The product of (a), (b) and (c) as follows:
 - (a) Accrued benefit as of December 31, 1996 under pre-1997 UNUM Plan.
 - (b) A fraction, the numerator of which is Final Average Earnings through the earlier of termination of employment and December 31, 2001, and the denominator of which is Final Average Earnings under the pre-1997 UNUM Plan as of December 31, 1996.
 - (c) A fraction, the numerator of which is Benefit Service as of the earlier of termination of employment and December 31, 2006 (maximum 25 years) and the denominator of which is Benefit Service as of December 31, 1996 (maximum 25 years).
- (ii) The product of (a), (b) and (c) as follows: % of Final Average Earnings through the earlier of December 31, 2001 and termination of employment times years of Benefit Service in excess of 25 earned after December 31, 1996 through the earlier of December 31, 2004 and termination of employment.

If the participant's age in years and completed months plus Benefit Service at Early Retirement Date equals or exceeds 85, the Rule of 85 Benefit described above is reduced by the following factors:

Age at Early Retirement	Factor
60-64	1.00
59	0.95
58	0.90
57	0.85
56	0.80
55	0.75

If the participant has fewer than 85 points at benefit commencement, but satisfies all other conditions for the Rule of 85 benefit, the benefit is reduced 5.00% per year for each year before age 65.

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SCHEDULE SB ATTACHMENTS

Minimum Benefit All Participants

The benefit payable shall not be less than the prior plan accrued benefit under the UNUM Plan on December 31, 1999 or the Provident Plan or Paul Revere Plan on March 31, 2000. The prior plan accrued benefit includes any early retirement benefit or retirement-type subsidiary available under such prior plan.

Changes in Plan Provisions since Last Actuarial Valuation

There have been no changes in the plan provisions since the prior valuation.

Plan Name:	Unum Group Pension Plan
EIN / PN:	62-1598430/001
Plan Sponsor:	Unum Group
Valuation Date:	January 1, 2024

Plan Name	Unum Group Pension Plan
Plan Sponsor EIN	62-1598430
ERISA Plan #	001
Plan Year Ending	12/31/2024

The required attachment marked with an "X" in the Attachment column is included within the Accountant's Opinion attachment to Sch. H, Part III, Line 3, which consists of the entire audit report issued by the plan's Independent Qualified Public Accountant (IQPA).

Form/Schedule	Line #	Description	Attachment
5500 Sch. H	Line 3	Financial statements used in formulating the IQPA's opinion	X
5500 Sch. H	Line 4a	Schedule of Delinquent Participant Contributions	
5500 Sch. H	Line 4i	Schedule of Assets (Held at End of Year)	X
5500 Sch. H	Line 4i	Schedule of Assets (Acquired and Disposed of Within Year)	
5500 Sch. H	Line 4j	Schedule of Reportable Transactions	X

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 32
Schedule of Amortization Bases
as of January 1, 2024

Type of Base	Date Established	Initial Amount	Remaining Amortization Period (Years)	Outstanding Balance	Amortization Payment
1. Shortfall	01/01/2024	(60,774,445)	15.00000	(60,774,445)	(5,529,277)
2. Shortfall	01/01/2023	139,686,893	14.00000	134,034,473	12,792,625
Total				73,260,028	7,263,348

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Valuation Date: January 1, 2024