

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 09/01/2024 and ending 08/31/2025	
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 NEA MEMBERS INSURANCE PLAN
1b	Three-digit plan number (PN) ▶ 520
1c	Effective date of plan 09/01/1978
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) NATIONAL EDUCATION ASSOCIATION OF THE UNITED STATES 1201 16TH ST NW STE 813 WASHINGTON, DC 20036-3201
2b	Employer Identification Number (EIN) 53-0115260
2c	Plan Sponsor's telephone number 202-833-7179
2d	Business code (see instructions) 813930

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.	06/01/2026	JAMES TESTERMAN
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	06/01/2026	NOEL CANDELARIA
	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 2672384
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) 2543679 6a(2) 2528845 6b 96376 6c 6d 2625221 6e 6f 2625221 6g(1) 6g(2) 6h
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:

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

4A 4B 4F 4H 4Q

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 5
- (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 172122892

SCHEDULE A (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Insurance 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. ► Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).	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 09/01/2024 and ending 08/31/2025		
A Name of plan NEA MEMBERS INSURANCE PLAN	B Three-digit plan number (PN) ►	520
C Plan sponsor's name as shown on line 2a of Form 5500 NATIONAL EDUCATION ASSOCIATION OF THE UNITED STATES	D Employer Identification Number (EIN) 53-0115260	

Part I	Information Concerning Insurance Contract Coverage, Fees, and Commissions	Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.
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1 Coverage Information:

(a) Name of insurance carrier THE PRUDENTIAL INSURANCE COMPANY OF AMERICA
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(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
22-1211670	68241	37000-1	3093414	09/01/2024	08/31/2025

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.

(a) Total amount of commissions paid	(b) Total amount of fees paid
0	0

3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid
--

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid
--

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
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(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
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(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

Part II Investment and Annuity Contract Information

Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

4 Current value of plan's interest under this contract in the general account at year end	4	
5 Current value of plan's interest under this contract in separate accounts at year end.....	5	

6 Contracts With Allocated Funds:**a** State the basis of premium rates ► [SEE ATTACHED SCHEDULE](#)

b Premiums paid to carrier	6b	
c Premiums due but unpaid at the end of the year	6c	
d If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount. Specify nature of costs ►	6d	

e Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity
(3) ☐ other (specify) ►

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ► ☐**7** Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

a Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee
(3) ☐ guaranteed investment (4) ☐ other ►

b Balance at the end of the previous year	7b	
c Additions: (1) Contributions deposited during the year	7c(1)	
(2) Dividends and credits.....	7c(2)	
(3) Interest credited during the year.....	7c(3)	
(4) Transferred from separate account	7c(4)	
(5) Other (specify below)..... ►	7c(5)	
(6) Total additions	7c(6)	
d Total of balance and additions (add lines 7b and 7c(6))	7d	
e Deductions:		
(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	
(2) Administration charge made by carrier.....	7e(2)	
(3) Transferred to separate account	7e(3)	
(4) Other (specify below)..... ►	7e(4)	
(5) Total deductions	7e(5)	
f Balance at the end of the current year (subtract line 7e(5) from line 7d).....	7f	

Part III Welfare Benefit Contract Information

If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organizations(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

8 Benefit and contract type (check all applicable boxes)

- a** ☐ Health (other than dental or vision)
b ☐ Dental
c ☐ Vision
d ☒ Life insurance
e ☐ Temporary disability (accident and sickness)
f ☐ Long-term disability
g ☐ Supplemental unemployment
h ☐ Prescription drug
i ☐ Stop loss (large deductible)
j ☐ HMO contract
k ☐ PPO contract
l ☐ Indemnity contract
m ☐ Other (specify) ▶

9 Experience-rated contracts:

a Premiums: (1) Amount received	9a(1)	1652012	
(2) Increase (decrease) in amount due but unpaid	9a(2)	0	
(3) Increase (decrease) in unearned premium reserve	9a(3)	0	
(4) Earned ((1) + (2) - (3))	9a(4)	1652012	
b Benefit charges (1) Claims paid	9b(1)	1348960	
(2) Increase (decrease) in claim reserves	9b(2)	81590	
(3) Incurred claims (add (1) and (2))	9b(3)	1430550	
(4) Claims charged	9b(4)	1430550	
c Remainder of premium: (1) Retention charges (on an accrual basis) --			
(A) Commissions	9c(1)(A)	0	
(B) Administrative service or other fees	9c(1)(B)	0	
(C) Other specific acquisition costs	9c(1)(C)	0	
(D) Other expenses	9c(1)(D)	176549	
(E) Taxes	9c(1)(E)	42935	
(F) Charges for risks or other contingencies	9c(1)(F)	1978	
(G) Other retention charges	9c(1)(G)	0	
(H) Total retention	9c(1)(H)	221462	
(2) Dividends or retroactive rate refunds. (These amounts were ☐ paid in cash, or ☐ credited.)	9c(2)		
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement	9d(1)	0	
(2) Claim reserves	9d(2)	386123	
(3) Other reserves	9d(3)	0	
e Dividends or retroactive rate refunds due. (Do not include amount entered in line 9c(2).)	9e	0	

10 Nonexperience-rated contracts:

a Total premiums or subscription charges paid to carrier	10a	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount. Specify nature of costs.	10b	

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A? ☐ Yes ☒ No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

SCHEDULE A (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Insurance 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. ▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).	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 09/01/2024 and ending 08/31/2025	
A Name of plan NEA MEMBERS INSURANCE PLAN	B Three-digit plan number (PN) ▶ 520
C Plan sponsor's name as shown on line 2a of Form 5500 NATIONAL EDUCATION ASSOCIATION OF THE UNITED STATES	D Employer Identification Number (EIN) 53-0115260

Part I	Information Concerning Insurance Contract Coverage, Fees, and Commissions	Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.
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1 Coverage Information:

(a) Name of insurance carrier
THE PRUDENTIAL INSURANCE COMPANY OF AMERICA

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
22-1211670	68241	20400-1	370097	09/01/2024	08/31/2025

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.

(a) Total amount of commissions paid 265695	(b) Total amount of fees paid 1625
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3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid
EDUCATORS INSURANCE SERVICES, INC. 4000 ROUTE 66
1ST FLOOR
TINTON FALLS, NJ 07753

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
0	1625	ENROLLMENT SERVICE FEES	5

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid
PEARL 1200 E. GLEN AVENUE
PEORIA HEIGHTS, IL 61616

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
265695	0	SALES AND SERVICE COMPENSATION	3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

Part II Investment and Annuity Contract Information

Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

4 Current value of plan's interest under this contract in the general account at year end	4	
5 Current value of plan's interest under this contract in separate accounts at year end.....	5	

6 Contracts With Allocated Funds:**a** State the basis of premium rates ► [SEE ATTACHED SCHEDULE](#)

b Premiums paid to carrier	6b	
c Premiums due but unpaid at the end of the year	6c	
d If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount. Specify nature of costs ►	6d	

e Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity
(3) ☐ other (specify) ►

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ► ☐**7** Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

a Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee
(3) ☐ guaranteed investment (4) ☐ other ►

b Balance at the end of the previous year	7b	
c Additions: (1) Contributions deposited during the year	7c(1)	
(2) Dividends and credits.....	7c(2)	
(3) Interest credited during the year.....	7c(3)	
(4) Transferred from separate account	7c(4)	
(5) Other (specify below)..... ►	7c(5)	
(6) Total additions	7c(6)	
d Total of balance and additions (add lines 7b and 7c(6))	7d	
e Deductions:		
(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	
(2) Administration charge made by carrier.....	7e(2)	
(3) Transferred to separate account	7e(3)	
(4) Other (specify below)..... ►	7e(4)	
(5) Total deductions	7e(5)	
f Balance at the end of the current year (subtract line 7e(5) from line 7d).....	7f	

Part III Welfare Benefit Contract Information

If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organizations(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

8 Benefit and contract type (check all applicable boxes)

- a** ☐ Health (other than dental or vision)
b ☐ Dental
c ☐ Vision
d ☒ Life insurance
e ☐ Temporary disability (accident and sickness)
f ☐ Long-term disability
g ☐ Supplemental unemployment
h ☐ Prescription drug
i ☐ Stop loss (large deductible)
j ☐ HMO contract
k ☐ PPO contract
l ☐ Indemnity contract
m ☐ Other (specify) ▶

9 Experience-rated contracts:

a Premiums: (1) Amount received	9a(1)	56986549	
(2) Increase (decrease) in amount due but unpaid	9a(2)	0	
(3) Increase (decrease) in unearned premium reserve	9a(3)	0	
(4) Earned ((1) + (2) - (3))	9a(4)	56986549	
b Benefit charges (1) Claims paid	9b(1)	58099954	
(2) Increase (decrease) in claim reserves	9b(2)	-4319376	
(3) Incurred claims (add (1) and (2))	9b(3)	53780578	
(4) Claims charged	9b(4)	53872965	
c Remainder of premium: (1) Retention charges (on an accrual basis) --			
(A) Commissions	9c(1)(A)	0	
(B) Administrative service or other fees	9c(1)(B)	0	
(C) Other specific acquisition costs	9c(1)(C)	0	
(D) Other expenses	9c(1)(D)	1098115	
(E) Taxes	9c(1)(E)	1450597	
(F) Charges for risks or other contingencies	9c(1)(F)	46826	
(G) Other retention charges	9c(1)(G)	0	
(H) Total retention	9c(1)(H)	2595538	
(2) Dividends or retroactive rate refunds. (These amounts were ☐ paid in cash, or ☐ credited.)	9c(2)	0	
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement	9d(1)	0	
(2) Claim reserves	9d(2)	17775509	
(3) Other reserves	9d(3)	45578716	
e Dividends or retroactive rate refunds due. (Do not include amount entered in line 9c(2).)	9e	0	

10 Nonexperience-rated contracts:

a Total premiums or subscription charges paid to carrier	10a	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount. Specify nature of costs.	10b	

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A? ☐ Yes ☒ No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

SCHEDULE A (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Insurance 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. ▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).	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 09/01/2024 and ending 08/31/2025	
A Name of plan NEA MEMBERS INSURANCE PLAN	B Three-digit plan number (PN) ▶ 520
C Plan sponsor's name as shown on line 2a of Form 5500 NATIONAL EDUCATION ASSOCIATION OF THE UNITED STATES	D Employer Identification Number (EIN) 53-0115260

Part I	Information Concerning Insurance Contract Coverage, Fees, and Commissions	Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.
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1 Coverage Information:

(a) Name of insurance carrier
THE PRUDENTIAL COMPANY OF AMERICA

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
22-1211670	68241	20400-2	2715	09/01/2024	08/31/2025

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.

(a) Total amount of commissions paid	(b) Total amount of fees paid
0	0

3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
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(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

Part II Investment and Annuity Contract Information

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4 Current value of plan's interest under this contract in the general account at year end	4	
5 Current value of plan's interest under this contract in separate accounts at year end.....	5	

6 Contracts With Allocated Funds:**a** State the basis of premium rates ► [SEE ATTACHED SCHEDULE](#)

b Premiums paid to carrier	6b	
c Premiums due but unpaid at the end of the year	6c	
d If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount. Specify nature of costs ►	6d	

e Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity
(3) ☐ other (specify) ►

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ► ☐**7** Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

a Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee
(3) ☐ guaranteed investment (4) ☐ other ►

b Balance at the end of the previous year	7b	
c Additions: (1) Contributions deposited during the year	7c(1)	
(2) Dividends and credits.....	7c(2)	
(3) Interest credited during the year.....	7c(3)	
(4) Transferred from separate account	7c(4)	
(5) Other (specify below)..... ►	7c(5)	
(6) Total additions	7c(6)	
d Total of balance and additions (add lines 7b and 7c(6))	7d	
e Deductions:		
(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	
(2) Administration charge made by carrier.....	7e(2)	
(3) Transferred to separate account	7e(3)	
(4) Other (specify below)..... ►	7e(4)	
(5) Total deductions	7e(5)	
f Balance at the end of the current year (subtract line 7e(5) from line 7d).....	7f	

Part III Welfare Benefit Contract Information

If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organizations(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

8 Benefit and contract type (check all applicable boxes)

- a** ☐ Health (other than dental or vision)
b ☐ Dental
c ☐ Vision
d ☒ Life insurance
e ☐ Temporary disability (accident and sickness)
f ☐ Long-term disability
g ☐ Supplemental unemployment
h ☐ Prescription drug
i ☐ Stop loss (large deductible)
j ☐ HMO contract
k ☐ PPO contract
l ☐ Indemnity contract
m ☐ Other (specify) ▶

9 Experience-rated contracts:

a Premiums: (1) Amount received	9a(1)		
(2) Increase (decrease) in amount due but unpaid	9a(2)		
(3) Increase (decrease) in unearned premium reserve	9a(3)		
(4) Earned ((1) + (2) - (3))		9a(4)	
b Benefit charges (1) Claims paid	9b(1)		
(2) Increase (decrease) in claim reserves	9b(2)		
(3) Incurred claims (add (1) and (2))		9b(3)	
(4) Claims charged		9b(4)	
c Remainder of premium: (1) Retention charges (on an accrual basis) --			
(A) Commissions	9c(1)(A)		
(B) Administrative service or other fees	9c(1)(B)		
(C) Other specific acquisition costs	9c(1)(C)		
(D) Other expenses	9c(1)(D)		
(E) Taxes	9c(1)(E)		
(F) Charges for risks or other contingencies	9c(1)(F)		
(G) Other retention charges	9c(1)(G)		
(H) Total retention		9c(1)(H)	
(2) Dividends or retroactive rate refunds. (These amounts were ☐ paid in cash, or ☐ credited.)		9c(2)	
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement		9d(1)	
(2) Claim reserves		9d(2)	
(3) Other reserves		9d(3)	
e Dividends or retroactive rate refunds due. (Do not include amount entered in line 9c(2).)		9e	

10 Nonexperience-rated contracts:

a Total premiums or subscription charges paid to carrier	10a	1036762
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount. Specify nature of costs.	10b	0

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A? ☐ Yes ☒ No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

SCHEDULE A (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Insurance 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. ▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).	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 09/01/2024 and ending 08/31/2025	
A Name of plan NEA MEMBERS INSURANCE PLAN	B Three-digit plan number (PN) ▶ 520
C Plan sponsor's name as shown on line 2a of Form 5500 NATIONAL EDUCATION ASSOCIATION OF THE UNITED STATES	D Employer Identification Number (EIN) 53-0115260

Part I	Information Concerning Insurance Contract Coverage, Fees, and Commissions	Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.
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1 Coverage Information:

(a) Name of insurance carrier
MINNESOTA LIFE INSURANCE COMPANY

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
41-0417830	66168	32475 & 32878	2202	09/01/2024	08/31/2025

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.

(a) Total amount of commissions paid	(b) Total amount of fees paid
0	0

3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
0	0		

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

Part II Investment and Annuity Contract Information

Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

4 Current value of plan's interest under this contract in the general account at year end	4	
5 Current value of plan's interest under this contract in separate accounts at year end.....	5	

6 Contracts With Allocated Funds:**a** State the basis of premium rates ► [SEE ATTACHED SCHEDULE](#)

b Premiums paid to carrier	6b	
c Premiums due but unpaid at the end of the year	6c	
d If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount. Specify nature of costs ►	6d	

e Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity
(3) ☐ other (specify) ►

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ► ☐**7** Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

a Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee
(3) ☐ guaranteed investment (4) ☐ other ►

b Balance at the end of the previous year	7b	
c Additions: (1) Contributions deposited during the year	7c(1)	
(2) Dividends and credits.....	7c(2)	
(3) Interest credited during the year.....	7c(3)	
(4) Transferred from separate account	7c(4)	
(5) Other (specify below)..... ►	7c(5)	
(6) Total additions	7c(6)	
d Total of balance and additions (add lines 7b and 7c(6))	7d	
e Deductions:		
(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	
(2) Administration charge made by carrier.....	7e(2)	
(3) Transferred to separate account	7e(3)	
(4) Other (specify below)..... ►	7e(4)	
(5) Total deductions	7e(5)	
f Balance at the end of the current year (subtract line 7e(5) from line 7d).....	7f	

Part III Welfare Benefit Contract Information

If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organizations(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

8 Benefit and contract type (check all applicable boxes)

- a** ☐ Health (other than dental or vision)
b ☐ Dental
c ☐ Vision
d ☒ Life insurance
e ☐ Temporary disability (accident and sickness)
f ☐ Long-term disability
g ☐ Supplemental unemployment
h ☐ Prescription drug
i ☐ Stop loss (large deductible)
j ☐ HMO contract
k ☐ PPO contract
l ☐ Indemnity contract
m ☐ Other (specify) ▶

9 Experience-rated contracts:

a Premiums: (1) Amount received	9a(1)	1180217	
(2) Increase (decrease) in amount due but unpaid	9a(2)		
(3) Increase (decrease) in unearned premium reserve	9a(3)	-61063	
(4) Earned ((1) + (2) - (3))	9a(4)		1241280
b Benefit charges (1) Claims paid	9b(1)	1976740	
(2) Increase (decrease) in claim reserves	9b(2)	-88678	
(3) Incurred claims (add (1) and (2))	9b(3)		1888062
(4) Claims charged	9b(4)		0
c Remainder of premium: (1) Retention charges (on an accrual basis) --			
(A) Commissions	9c(1)(A)	0	
(B) Administrative service or other fees	9c(1)(B)	0	
(C) Other specific acquisition costs	9c(1)(C)	0	
(D) Other expenses	9c(1)(D)	16931	
(E) Taxes	9c(1)(E)	37646	
(F) Charges for risks or other contingencies	9c(1)(F)	0	
(G) Other retention charges	9c(1)(G)	0	
(H) Total retention	9c(1)(H)		54577
(2) Dividends or retroactive rate refunds. (These amounts were ☐ paid in cash, or ☐ credited.)	9c(2)		0
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement	9d(1)		0
(2) Claim reserves	9d(2)		265527
(3) Other reserves	9d(3)		4698240
e Dividends or retroactive rate refunds due. (Do not include amount entered in line 9c(2).)	9e		0

10 Nonexperience-rated contracts:

a Total premiums or subscription charges paid to carrier	10a	0
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount. Specify nature of costs.	10b	

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A? ☐ Yes ☒ No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

SCHEDULE A (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Insurance 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. ▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).	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 09/01/2024 and ending 08/31/2025		
A Name of plan NEA MEMBERS INSURANCE PLAN	B Three-digit plan number (PN) ▶	520
C Plan sponsor's name as shown on line 2a of Form 5500 NATIONAL EDUCATION ASSOCIATION OF THE UNITED STATES	D Employer Identification Number (EIN) 53-0115260	

Part I	Information Concerning Insurance Contract Coverage, Fees, and Commissions	Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.
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1 Coverage Information:

(a) Name of insurance carrier
UNITED AMERICAN INSURANCE COMPANY

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
73-1128555	92916	9800	6713	09/01/2024	08/31/2025

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.

(a) Total amount of commissions paid	(b) Total amount of fees paid
0	0

3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
0	0		

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

Part II Investment and Annuity Contract Information

Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

4 Current value of plan's interest under this contract in the general account at year end	4	
5 Current value of plan's interest under this contract in separate accounts at year end.....	5	

6 Contracts With Allocated Funds:**a** State the basis of premium rates ► [SEE ATTACHED SCHEDULE](#)

b Premiums paid to carrier	6b	
c Premiums due but unpaid at the end of the year	6c	
d If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount. Specify nature of costs ►	6d	

e Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity
(3) ☐ other (specify) ►

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ► ☐**7** Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

a Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee
(3) ☐ guaranteed investment (4) ☐ other ►

b Balance at the end of the previous year	7b	
c Additions: (1) Contributions deposited during the year	7c(1)	
(2) Dividends and credits.....	7c(2)	
(3) Interest credited during the year.....	7c(3)	
(4) Transferred from separate account	7c(4)	
(5) Other (specify below)..... ►	7c(5)	
(6) Total additions	7c(6)	
d Total of balance and additions (add lines 7b and 7c(6))	7d	
e Deductions:		
(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	
(2) Administration charge made by carrier.....	7e(2)	
(3) Transferred to separate account	7e(3)	
(4) Other (specify below)..... ►	7e(4)	
(5) Total deductions	7e(5)	
f Balance at the end of the current year (subtract line 7e(5) from line 7d).....	7f	

Part III Welfare Benefit Contract Information

If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organizations(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

8 Benefit and contract type (check all applicable boxes)

- a** ☒ Health (other than dental or vision)
b ☐ Dental
c ☐ Vision
d ☐ Life insurance
e ☐ Temporary disability (accident and sickness)
f ☐ Long-term disability
g ☐ Supplemental unemployment
h ☐ Prescription drug
i ☐ Stop loss (large deductible)
j ☐ HMO contract
k ☐ PPO contract
l ☐ Indemnity contract
m ☐ Other (specify) ▶

9 Experience-rated contracts:

a Premiums: (1) Amount received	9a(1)		
(2) Increase (decrease) in amount due but unpaid	9a(2)		
(3) Increase (decrease) in unearned premium reserve	9a(3)		
(4) Earned ((1) + (2) - (3))		9a(4)	
b Benefit charges (1) Claims paid	9b(1)		
(2) Increase (decrease) in claim reserves	9b(2)		
(3) Incurred claims (add (1) and (2))		9b(3)	
(4) Claims charged		9b(4)	
c Remainder of premium: (1) Retention charges (on an accrual basis) --			
(A) Commissions	9c(1)(A)		
(B) Administrative service or other fees	9c(1)(B)		
(C) Other specific acquisition costs	9c(1)(C)		
(D) Other expenses	9c(1)(D)		
(E) Taxes	9c(1)(E)		
(F) Charges for risks or other contingencies	9c(1)(F)		
(G) Other retention charges	9c(1)(G)		
(H) Total retention		9c(1)(H)	
(2) Dividends or retroactive rate refunds. (These amounts were ☐ paid in cash, or ☐ credited.)		9c(2)	
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement		9d(1)	
(2) Claim reserves		9d(2)	
(3) Other reserves		9d(3)	
e Dividends or retroactive rate refunds due. (Do not include amount entered in line 9c(2).)		9e	

10 Nonexperience-rated contracts:

a Total premiums or subscription charges paid to carrier	10a	21043394
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount. Specify nature of costs.	10b	0

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A? ☐ Yes ☒ No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

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 09/01/2024 and ending 08/31/2025

A Name of plan NEA MEMBERS INSURANCE PLAN	B Three-digit plan number (PN) 520
C Plan sponsor's name as shown on line 2a of Form 5500 NATIONAL EDUCATION ASSOCIATION OF THE UNITED STATES	D Employer Identification Number (EIN) 53-0115260

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).....

X

YesNo
- 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
ARIEL INVESTMENT	
02-0712418	

(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
-----	--

(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

(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)

NEA MEMBER BENEFITS

52-0855767

(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?
49 50 10 15 38	NEA IS SOLE MEMBER	25913888	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

DUCENTA SQUARED ASSET MANAGEMENT

85-0584508

(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	22865	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

PEARL INSURANCE GROUP LLC

88-2137818

(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?
12 23 40	NONE	7671654	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)

BUCK GLOBAL, LLC

13-3954297

(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 50	NONE	202611	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

BNY MELLON ASSET SERVICING

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?
19 50 62	NONE	122574	Yes ☒ No ☐	Yes ☒ No ☐		Yes ☒ No ☐

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

MOONEY, GREEN, SANDON ET AL PC

52-1958229

(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	19978	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)

SAVI SOLUTION PBC

81-2750411

(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?
	NONE	165000	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

ABLETO, INC

46-2468224

(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?
49	NONE	35200	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

RBC WEALTH MANAGEMENT

41-1416330

(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?
27 50	NONE	100000	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)

SMITH AFFILIATED

13-3100579

(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	23863	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

MARSH USA

36-1436000

(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?
22 50	NONE	75000	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

CALIBRE CPA GROUP

47-0900880

(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?
10 50	NONE	49440	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)

RHUMBLINE ADVISORS

04-3118582

(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	30000	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

(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?
			Yes ☐ No ☐	Yes ☐ No ☐		Yes ☐ No ☐

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

(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?
			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 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 09/01/2024 and ending 08/31/2025

A Name of plan NEA MEMBERS INSURANCE PLAN	B Three-digit plan number (PN) ▶ 520
C Plan sponsor's name as shown on line 2a of Form 5500 NATIONAL EDUCATION ASSOCIATION OF THE UNITED STATES	D Employer Identification Number (EIN) 53-0115260

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	920138	3669445
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions.....	1b(2)	1590108	1914050
(3) Other	1b(3)	2114698	1851837
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	31851837	25859678
(2) U.S. Government securities	1c(2)	11182408	11501996
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)	8532882	8481815
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	8937	
(B) Common	1c(4)(B)	32700879	32233428
(5) Partnership/joint venture interests	1c(5)	14677044	17363613
(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)		
(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)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	16184586	12921228
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)	67464778	63740348
(15) Other.....	1c(15)	4524279	4725633

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	191752574	184263071
Liabilities			
g Benefit claims payable	1g	22373409	18141650
h Operating payables	1h	7590023	4987977
i Acquisition indebtedness	1i		
j Other liabilities	1j	11026426	10756859
k Total liabilities (add all amounts in lines 1g through 1j)	1k	40989858	33886486
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	150762716	150376585

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)	105000185	
(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)		105000185
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	3066387	
(B) U.S. Government securities	2b(1)(B)	464710	
(C) Corporate debt instruments	2b(1)(C)	393360	
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)	46549	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		3971006
(2) Dividends:			
(A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)	396879	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	250319	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		647198
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets:			
(A) Aggregate proceeds	2b(4)(A)	23097042	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	22833430	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		263612
(5) Unrealized appreciation (depreciation) of assets:			
(A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)	3345830	
(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)		
(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)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		2485884
c Other income	2c		-11386
d Total income. Add all income amounts in column (b) and enter total	2d		115702329

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	76548209	
(2) To insurance carriers for the provision of benefits	2e(2)	12771102	
(3) Other	2e(3)	200200	
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		89519511
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)	280758	
(2) Contract administrator fees	2i(2)		
(3) Recordkeeping fees	2i(3)	299303	
(4) IQPA audit fees	2i(4)	25988888	
(5) Investment advisory and investment management fees	2i(5)		
(6) Bank or trust company trustee/custodial fees	2i(6)		
(7) Actuarial fees	2i(7)		
(8) Legal fees	2i(8)		
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses	2i(11)		
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		26568949
j Total expenses. Add all expense amounts in column (b) and enter total	2j		116088460

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		-386131
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: **CALIBRE CPA GROUP**

(2) EIN: **47-0900880**

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?	☒		1500000
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?	☒		17363613
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 _____.

NEA MEMBERS INSURANCE PLAN & TRUST

FINANCIAL STATEMENTS

AUGUST 31, 2025





NEA MEMBERS INSURANCE PLAN & TRUST

FINANCIAL STATEMENTS

YEARS ENDED AUGUST 31, 2025 AND 2024

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INDEPENDENT AUDITOR'S REPORT

To the Board of Trustees of
NEA Members Insurance Plan & Trust

Opinion

We have audited the accompanying financial statements of the NEA Members Insurance Plan & Trust (the Plan), a benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), which comprise the statements of benefit obligations and net assets available for benefits as of August 31, 2025 and 2024, and the related statements of changes in benefit obligations and net assets available for benefits for the years then ended, and the related notes to the financial statements.

In our opinion, the financial statements referred to above present fairly, in all material respects, the benefit obligations and net assets available for benefits of the Plan as of August 31, 2025 and 2024, and the changes in its benefit obligations and net assets available for benefits for the years then ended in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of 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 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.





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 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

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

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

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of 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.



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.

Supplemental Schedules Required by ERISA

Our audits were conducted for the purpose of forming an opinion on the financial statements taken as a whole. The accompanying schedules of assets (held at end of year) and reportable transactions are presented for the purpose of additional analysis and are not a required part of the financial statements, but are supplemental information required by the Department of Labor's (DOL) 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 has been subjected to the 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 auditing standards generally accepted in the United States of America.

In forming our opinion on the supplemental schedules, we evaluated whether the supplemental schedules, including their form and content, are presented in conformity with the DOL's Rules and Regulations for Reporting and Disclosure under ERISA. In our opinion, the information in the accompanying schedules is fairly stated, in all material respects, in relation to the financial statements as a whole, and the form and content are presented in conformity with the DOL's Rules and Regulations for Reporting and Disclosure under ERISA.

Calibre CPA Group, PLLC

Bethesda, MD
March 27, 2026

NEA MEMBERS INSURANCE PLAN & TRUST

STATEMENTS OF BENEFIT OBLIGATIONS AND NET ASSETS AVAILABLE FOR BENEFITS

AUGUST 31, 2025 AND 2024

	<u>2025</u>	<u>2024</u>
Statements of Benefit Obligations		
Benefit obligations		
Reported but unpaid claims	\$ 1,717,000	\$ 2,097,500
Incurred but unreported claims	16,424,650	20,275,909
Accrued disability - related claims and reserve	3,865,509	4,076,903
Accrued grace period reserve	1,215,568	1,358,207
Whole and level premium life insurance liabilities	<u>45,578,716</u>	<u>45,060,671</u>
Total benefit obligations	<u>68,801,443</u>	<u>72,869,190</u>
Statements of Net Assets Available for Benefits		
Assets		
Cash and cash equivalents	4,231,391	1,072,915
Investments		
Investment securities, at fair value	87,555,666	88,285,506
Cash held by Prudential Insurance Company		
Advance premium account	24,969,779	31,224,569
Life and disability insurance investment	63,740,348	67,464,778
Receivable for securities sold	110,531	-
Other assets	<u>3,655,356</u>	<u>3,704,806</u>
Total assets	<u>184,263,071</u>	<u>191,752,574</u>
Liabilities		
Due to NEA Member Benefits	2,457,568	3,448,007
Accounts payable	2,530,409	4,142,016
Payable for securities purchased	74,954	-
Unearned premiums	<u>10,681,905</u>	<u>11,026,426</u>
Total liabilities	<u>15,744,836</u>	<u>18,616,449</u>
Net assets available for benefits	<u>168,518,235</u>	<u>173,136,125</u>
Excess of net assets available for benefits over benefit obligations	<u>\$ 99,716,792</u>	<u>\$ 100,266,935</u>

See accompanying notes to financial statements.

NEA MEMBERS INSURANCE PLAN & TRUST

STATEMENTS OF CHANGES IN BENEFIT OBLIGATIONS AND NET ASSETS AVAILABLE FOR BENEFITS

YEARS ENDED AUGUST 31, 2025 AND 2024

	2025	2024
Statements of Changes in Benefit Obligations		
Amounts currently payable		
Claims reported and approved for payment	\$ 76,548,209	\$ 83,177,605
Claims paid	<u>(80,779,968)</u>	<u>(86,309,903)</u>
Net change in amounts currently payable	<u>(4,231,759)</u>	<u>(3,132,298)</u>
Benefit obligations, net of amounts currently payable		
Change in benefit obligations attributable to		
Benefits charges, net of contributions	(3,955,747)	(6,319,811)
Changes in actuarial assumptions	(112,000)	(170,000)
Amounts reclassified as currently payable	<u>4,231,759</u>	<u>3,132,298</u>
Net change in benefit obligations	<u>164,012</u>	<u>(3,357,513)</u>
Net change in total benefit obligations	<u>(4,067,747)</u>	<u>(6,489,811)</u>
Statements of Changes in Net Assets Available for Benefits		
Additions		
Members' contributions		
Life insurance and accidental death and dismemberment	82,681,735	84,037,539
Preferred term life	1,430,327	1,761,946
Retiree health	<u>20,888,123</u>	<u>19,365,280</u>
Total members' contributions	<u>105,000,185</u>	<u>105,164,765</u>
Investment income		
Interest earned from Advance Premium Account	815,886	452,048
Interest earned from life and disability investment	2,210,489	2,525,118
Dividends, interest and other income	1,591,830	1,936,769
Net appreciation in fair value of investments	<u>6,083,940</u>	<u>10,226,361</u>
Net investment income	<u>10,702,145</u>	<u>15,140,296</u>
Total additions	<u>115,702,330</u>	<u>120,305,061</u>
Deductions		
Claims paid		
Life insurance and accidental death and dismemberment	58,197,031	64,618,472
Complimentary life insurance program	1,348,960	1,604,929
Preferred term life	345,854	721,222
Retiree health	<u>20,888,123</u>	<u>19,365,280</u>
Total claims paid	<u>80,779,968</u>	<u>86,309,903</u>
Other benefits		
Student loan navigator	165,000	355,000
Mental health	<u>35,200</u>	<u>30,000</u>
Total other benefits	<u>200,200</u>	<u>385,000</u>

See accompanying notes to financial statements.

NEA MEMBERS INSURANCE PLAN & TRUST

STATEMENTS OF CHANGES IN BENEFIT OBLIGATIONS AND NET ASSETS AVAILABLE FOR BENEFITS (CONTINUED)

YEARS ENDED AUGUST 31, 2025 AND 2024

	2025	2024
Deductions (continued)		
Administrative expenses paid to administrators		
Life insurance and accidental death and dismemberment	\$ 12,558,882	\$ 14,621,017
Preferred term life	212,221	266,233
Total administrative expenses paid to administrators	<u>12,771,103</u>	<u>14,887,250</u>
Amounts paid and accrued to NEA Member Benefits for operational and marketing services		
Programmatic expenses	6,756,360	6,893,911
Marketing and advertising	17,583,991	19,175,441
State marketing agreements	<u>1,351,126</u>	<u>1,543,738</u>
Total amounts paid and accrued to NEA Member Benefits for operational and marketing services	<u>25,691,477</u>	<u>27,613,090</u>
Other general and administrative expenses		
Consultation services	501,913	664,131
Management information systems	222,411	260,529
Travel expenses	8,172	8,038
Insurance, office and other expenses	75,000	50,000
Professional services	<u>69,976</u>	<u>147,199</u>
Total other general and administrative expenses	<u>877,472</u>	<u>1,129,897</u>
Total deductions	<u>120,320,220</u>	<u>130,325,140</u>
Net change in net assets available for benefits	<u>(4,617,890)</u>	<u>(10,020,079)</u>
Excess of net assets available for benefits over benefit obligations		
Beginning of year	100,266,935	103,797,203
Change in excess of net assets available for benefits over benefit obligations	<u>(550,143)</u>	<u>(3,530,268)</u>
End of year	<u>\$ 99,716,792</u>	<u>\$ 100,266,935</u>



NEA MEMBERS INSURANCE PLAN & TRUST

NOTES TO FINANCIAL STATEMENTS

YEARS ENDED AUGUST 31, 2025 AND 2024

NOTE 1. PURPOSE OF THE PLAN AND TRUST

The NEA Members Insurance Plan (the Plan) and the NEA Members Insurance Trust (the Trust) were organized on September 1, 1978. The Plan provides certain employee welfare benefits to National Education Association (NEA) members and their dependents; the Trust is the funding vehicle for the benefits provided under the Plan. Prudential Insurance Company of America, Inc. (Prudential) underwrites two programs under the Plan, life insurance and AD&D insurance. In May 2002, Marsh Affinity Services (now Mercer) assumed the administration of the Prudential programs. Minnesota Mutual Life Insurance Company underwrites a preferred term life insurance program under the Plan; however, this program is no longer marketed.

On April 1, 1995, the Plan began offering medical benefits supplementing Medicare under the NEA Medicare Supplement Program, which, until August 2014 was a self-funded program managed by several administrators. Effective August 27, 2014, United American Insurance Company took over administration of the Medicare Supplement Program (now known as Retiree Health Program) on a fully-insured basis.

These programs, which offer NEA members the opportunity to purchase group life, accidental death and dismemberment, and medical insurance benefits, are classified as employee benefit plans, subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA), as amended.

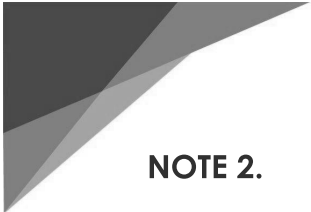
The Plan, through the Trust, makes available for purchase on a voluntary basis life and accidental death and dismemberment insurance to the NEA active, retired, student, reserve, staff, and life members and their dependents underwritten by Prudential.

Participants should refer to the Summary Plan description for more complete information.

NOTE 2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Specific policies that affect significant aspects of the Plan's financial statements are as follows:

Basis of Accounting - The accompanying financial statements have been prepared using the accrual basis of accounting. Under this basis, revenue is recognized when earned and expenses are recognized when incurred, except for the payment of benefits.



NOTE 2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Contributions - Contribution payments from members are based on the respective insurance coverage in force, at rates established under the Plan. The portion of contribution payments received prior to the effective period of coverage is recorded as unearned premiums. Contributions are collected by several administrators on behalf of the Plan.

Cash Held by Prudential - Any funds held by Prudential that are assets of the Plan are maintained in interest-bearing accounts. The Advanced Premium Account earned interest at a rate of 3% per annum in fiscal years 2025 and 2024. Prudential also holds certain assets shown as Life & Disability Insurance Investment (Note 8).

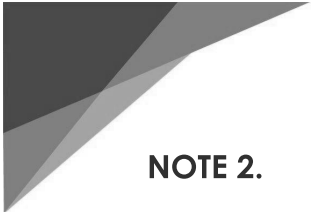
Cash and Cash Equivalents - Cash and cash equivalents consist of checking accounts. Cash and cash equivalents are carried at cost, which approximates market value.

Investment Valuation and Income Recognition - Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. Purchases and sales of investment securities are recognized on a trade-date basis. Net appreciation in fair value of investments includes the Plan's gains and losses on investments bought and sold, as well as during the year. Dividends are recognized on the ex-dividend date. Interest income is reported on the accrual basis. See Note 3 for more information on investments and fair value measurements.

Use of Estimates in the Preparation of Financial Statements - The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America (GAAP) requires management to make estimates and assumptions that affect the reported amounts of assets, liabilities, benefit obligations (including incurred but not recorded claims and claims payable) and changes therein, and the disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

Risks and Uncertainties - The Plan utilizes various investment instruments including cash equivalents, fixed income securities, common/collective trusts, registered investment companies and common stock. Investment securities, in general, are exposed to various risks, such as interest rate, credit, and overall market volatility. Market values of investments may decline for a number of reasons, including changes in prevailing market and interest rates, increase in defaults and credit rating downgrades. Due to the level of risk associated with investment securities, it is reasonably possible that changes in the values of investment securities will occur in the near term, and they could materially affect the amounts reported in the financial statements.

The actuarial present value of benefit obligations and certain liabilities for claims incurred but not reported and disability claims and reserves are reported based on certain assumptions pertaining to interest rates, health care trend rates and participant demographics, all of which are subject to change. Due to uncertainties inherent in the estimations and assumptions process, it is at least reasonably possible that actual results



NOTE 2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

could differ materially from those estimates. Management monitors actual experience and, if circumstances warrant, revises its assumptions and the related future policy benefit estimates.

Payment of Benefits - Claim payments are reported when paid in the accompanying statements of changes in benefit obligations and net assets available for benefits.

Termination of the Plan - Although it has not expressed any intention to do so, the Plan sponsor has the right under the Plan to modify the benefits provided to, and contributions required of, participants to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of termination of the Plan, remaining assets will be applied in a uniform and nondiscriminatory manner toward the provision of benefits for or on account of the participants. No assets of the Plan may revert to the Plan sponsor or be used for purposes other than for the exclusive benefit of the Plan's participants.

NOTE 3. INVESTMENTS AND FAIR VALUE MEASUREMENTS

Accounting standards provide the framework for measuring fair value which provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets (Level 1) and the lowest priority to unobservable inputs (Level 3). The three levels of the fair value hierarchy are described as follows:

Level 1 Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.

Level 2 Inputs to the valuation methodology include other significant observable inputs including:

- Quoted prices for similar assets or liabilities in active markets;
- Quoted prices for identical or similar assets or liabilities in inactive markets;
- Inputs other than quoted prices that are observable for the asset or liability; and
- Inputs that are derived principally from or corroborated by observable market data by correlation or other means.

If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.

Level 3 Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

The asset's or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement.

NOTE 3. INVESTMENTS AND FAIR VALUE MEASUREMENTS (CONTINUED)

Valuation techniques maximize the use of relevant observable inputs and minimize the use of unobservable inputs.

The following tables set forth by level, within the fair value hierarchy, the Plan's assets at fair value as of August 31, 2025 and 2024:

Description	Total Investments at August 31, 2025	Quoted Market Prices for Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)
Interest-bearing cash	\$ 327,953	\$ -	\$ 327,953	\$ -
U.S. Government and government agency obligations	11,501,996	5,521,448	5,980,548	-
Corporate debt	8,481,815	-	8,481,815	-
Corporate stock	32,233,428	32,233,428	-	-
Registered investment companies	12,921,228	12,921,228	-	-
Exchange-traded funds	<u>4,725,633</u>	<u>4,725,633</u>	<u>-</u>	<u>-</u>
Subtotal	70,192,053	<u>\$ 55,401,737</u>	<u>\$ 14,790,316</u>	<u>\$ -</u>
Investments measured at net asset value*	<u>17,363,613</u>			
Total	<u>\$ 87,555,666</u>			

Description	Total Investments at August 31, 2024	Quoted Market Prices for Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)
Interest-bearing cash	\$ 474,491	\$ -	\$ 474,491	\$ -
U.S. Government and government agency obligations	11,182,408	4,625,351	6,557,057	-
Corporate debt	8,532,882	-	8,532,882	-
Corporate stock	32,700,879	32,700,879	-	-
Preferred stock	8,937	-	8,937	-
Registered investment companies	16,184,586	16,184,586	-	-
Exchange-traded funds	<u>4,524,279</u>	<u>4,524,279</u>	<u>-</u>	<u>-</u>
Subtotal	73,608,462	<u>\$ 58,035,095</u>	<u>\$ 15,573,367</u>	<u>\$ -</u>
Investments measured at net asset value*	<u>14,677,044</u>			
Total	<u>\$ 88,285,506</u>			

*In accordance with Accounting Standards Codification (ASC), investments that were measured at net asset value per share (or its equivalent) have not been classified in the fair value hierarchy. The fair value amounts presented in these tables are intended to permit reconciliation of the fair value hierarchy to the line items presented in the statements of benefits obligations and net assets available for benefits.

NOTE 3. INVESTMENTS AND FAIR VALUE MEASUREMENTS (CONTINUED)

The following are descriptions of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at August 31, 2025 and 2024.

Interest-bearing cash: The Plan's investment in interest-bearing cash is comprised of money market funds. Money market funds are valued at cost which approximates fair value.

U.S. Government and government agency obligations, preferred stock and corporate debt: The Plan's investment in U.S. Treasury bills, notes and bonds are valued at quoted market prices. All other U.S. Government and government agency obligations, preferred stock and corporate debt securities are valued using pricing models maximizing the use of observable inputs for similar securities.

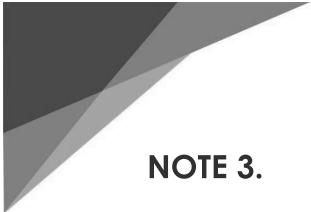
Registered investment companies, exchange-traded funds and corporate stock: The Plan's investments in registered investment companies, exchange-traded funds and corporate stock are valued at quoted market price at the close of business each day.

Investments measured at net asset value: Investments measured using the net asset value (NAV) practical expedient are generally valued based on the estimated fair market value of the investments' underlying assets, less its liabilities and the Plan's percentage ownership in each respective investment fund. The Plan's investment in these investment entities is subject to the terms of the respective agreements. Income or loss from investments in these investment entities is net of the Plan's proportionate share of fees and expenses incurred or charged by these investment entities. The Plan's risk of loss in these entities is limited to its investment.

The following tables summarize the Plan's investments in certain entities that calculate NAV per share as fair value measurements as of August 31, 2025 and 2024:

August 31, 2025				
	Fair Value	Unfunded Commitments	Redemption Frequency	Redemption Notice Period
Partnerships/joint venture interests	\$ 9,632,971	\$ 3,997,751	Varies*	Varies*
Pooled investment fund	7,730,642	-	Monthly	30 Days Notice
Total	<u>\$ 17,363,613</u>	<u>\$ 3,997,751</u>		
August 31, 2024				
	Fair Value	Unfunded Commitments	Redemption Frequency	Redemption Notice Period
Partnerships/joint venture interests	\$ 8,217,752	\$ 6,500,000	Varies*	Varies*
Pooled investment fund	6,459,292	-	Monthly	30 Days Notice
Total	<u>\$ 14,677,044</u>	<u>\$ 6,500,000</u>		

*For investments in partnerships and joint venture interest, generally redemptions are not allowed by the limited partner's option. Any redemptions, if allowed, require approval of the General Partner.



NOTE 3. INVESTMENTS AND FAIR VALUE MEASUREMENTS (CONTINUED)

The following summarizes the investment strategy for each of the Plan's investments in the tables presented on the previous page:

Partnerships/Joint Venture Interests

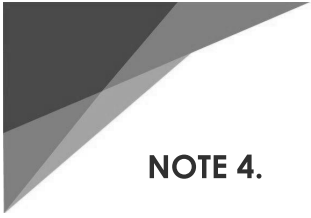
Hatteras Core Alternatives TEI Institutional Fund, LP: The Plan's investments in this category includes an investment in Hatteras Multi-Strategy TEI (the Fund). The objective of the Fund was to provide capital appreciation consistent with the return characteristic of the alternative investment portfolios of larger endowments through investments in the six asset classes of: Opportunistic Equity, Enhanced Fixed Income, Absolute Return, Real Estate, Private Equity and Energy & Natural Resources. The secondary objective was to achieve capital appreciation with less volatility than that of the equity markets. The Fund is currently in liquidation and there were no unfunded commitments as of August 31, 2025.

Artemis Real Estate Partners Fund III, LP: The Plan's investments in this category also include an investment in Artemis Real Estate Partners Fund III, LP. The objective of the investment is to generate long-term capital appreciation by making value-added investments in domestic commercial real estate, including, but not limited to multifamily, office, industrial, healthcare, self-storage, hospitality and retail assets. The liquidity of the investments is limited to quarterly withdrawals on specific dates only, with written notice. There were no unfunded commitments as of August 31, 2025.

StepStone VC Diversity I, LP and Stepstone VC Diversity II, LP: The Plan's investments in this category also include two investments in the StepStone VC Diversity I, LP Fund (VCD I) and StepStone VC Diversity II, LP Fund (VCD II). The objective of these investments is to provide investors with access and allocation to premier venture capital funds by investing in funds that target early and growth stage investments across all sectors and demographics. The funds do not allow redemptions. The Plan committed \$5,000,000 to each investment fund. As of August 31, 2025, \$500,000 and \$3,497,751 remained unfunded to VCD I and VCD II, respectively.

Pooled Investment Fund

Ariel International Developed Markets/Emerging Markets LLC: The Plan's investment in this category includes a single investment, the Ariel International Developed Markets/Emerging Markets LLC. The objective of the investment is to generate long-term capital appreciation with the investment of undervalued, quality franchises in overseas and emerging markets with an intrinsic value approach. Its primary investment strategies are: seeking long-term capital appreciation, seeking long-term capital preservation, to generate attractive absolute and risk-adjusted returns, and to attain higher relative returns compared to its benchmark over a full market cycle. These strategies use various techniques to hedge currency exposure, or to invest significant cash inflows into the market, including derivatives, exchange-traded funds and other hedges. The liquidity of the investments is limited to monthly withdrawals on specific dates only, with 30 days written notice. There were no unfunded commitments as of August 31, 2025.



NOTE 4. RELATED PARTY TRANSACTIONS AND PARTY-IN-INTEREST TRANSACTIONS

NEA is the sponsor and administrator of the Plan. NEA also appoints and removes the Trustees of the Trust. The Trust maintains an administrative agreement with NEA to provide administrative and promotional services for the Plan's programs. NEA contracts with NEA Member Benefits (NEA MB), a corporation wholly controlled by NEA, to provide the operational and marketing services for the Plan. NEA MB expended approximately \$25.9 million and \$27.9 million for such support for the years ended August 31, 2025 and 2024, respectively. As of August 31, 2025 and 2024, the Plan has accrued \$2,457,568 and \$3,448,007, respectively, for amounts due to NEA MB for administrative and support services.

The Plan also pays certain investment and administrative fees directly to service providers. These transactions qualify as party-in-interest transactions, which are exempt from the prohibited transaction rules of ERISA.

NOTE 5. BENEFIT OBLIGATIONS

Reported but Unpaid Claims

The Plan received life insurance claims which have not been processed or approved as of August 31. The liability established to provide for claims to be paid was \$1,717,000 and \$2,097,500 for the years ended August 31, 2025 and 2024, respectively.

Incurred but Unreported Claims

As of August 31, 2025 and 2024, the Plan has accrued \$16,424,650 and \$20,275,909, respectively, to provide for its liability for life and AD&D insurance claims incurred but not reported. This obligation has been calculated based on analyses of the historical lag between the time a claim is incurred and the time the claim is paid.

Accrued Disability – Related Claims and Reserves

Under the Plan, life insurance coverage is available for members under approved disability status. As of August 31, 2025 and 2024, the Plan has accrued \$3,865,509 and \$4,076,903, respectively, to recognize the liability for life insurance coverage for members under approved disability status, to recognize the liability for disability claims that have occurred but have not been reported, and for claims submitted and approved but not paid. These obligations are calculated based on various disability mortality tables and a discount rate of 4.54% and 4.60% as of August 31, 2025 and 2024, respectively.

Accrued Grace Period Reserve

Under the Plan, claims may be paid for members who have terminated coverage and die within 60 days of their termination date (30 days for AD&D). As of August 31, 2025 and 2024, the Plan has accrued \$1,215,568 and \$1,358,207, respectively, for the grace period reserve.



NOTE 5. BENEFIT OBLIGATIONS (CONTINUED)

Whole Life and Level Premium Life – Policy Liabilities

In the 1960s, the Plan introduced life insurance coverage with cash surrender values. These products are no longer actively marketed, but there is a closed group of members who are still covered and could surrender their certificate to receive a cash value. As of August 31, 2025 and 2024, the Plan has obligations in the amounts of \$11,942,370 and \$12,011,909, respectively, based on the contractually guaranteed cash surrender values. The method for calculating this statutory obligation is calculated using state-prescribed mortality tables and interest rates that cannot exceed the state prescribed maximum rates.

In September 2006, the Plan began marketing Level Premium Group Term (LPGT), which provides coverage for a 10- or 20-year term at contribution rates that remain level during the term. Because mortality increases during the term, reserves are required in the early years of the term to fund the later years. As of August 31, 2025 and 2024, the Plan has accrued an LPGT policy liability in the amounts of \$33,636,346 and \$33,048,762, respectively.

NOTE 6. EXTRAORDINARY CLAIM EXPERIENCES

Prudential provides individual stop loss protection for 50% of any LPGT claim in excess of \$500,000 per covered life. Prudential provides aggregate stop loss protection that limits claim losses, as follows: 1) Prudential life claims are limited to Prudential life contributions; and 2) Prudential AD&D claims are limited to Prudential AD&D contributions.

NOTE 7. INCOME TAX STATUS

The Trust, established under the Plan to hold the Plan's assets, is a voluntary employees' beneficiary association pursuant to Section 501(c)(9) of the Internal Revenue Code (IRC) and accordingly, the Trust's net investment income is exempt from income taxes. The Trust has obtained an exemption letter from the Internal Revenue Service dated September 29, 1978, stating that the Trust is tax-exempt. Management believes that the Trust, as amended, continues to qualify and to operate in accordance with the applicable requirements of the IRC. Therefore, no provision for income taxes has been included in the Trust's financial statements.

The Plan follows authoritative guidance for uncertainty in income taxes included in ASC Topic *Income Taxes*. These provide consistent guidance for the accounting for uncertainty in income taxes recognized in an entity's financial statements and prescribe a threshold of "more than likely not" for recognition and derecognition of tax positions taken or expected to be taken in a tax return.

NOTE 7. INCOME TAX STATUS (CONTINUED)

The Plan performed an evaluation of uncertain tax positions for the years ended August 31, 2025 and 2024, and determined that there were no matters that would require recognition in the financial statements. As of August 31, 2025, the statutes of limitations for the tax years 2021 through 2023 remains open with the U.S. federal jurisdiction where a return is filed.

NOTE 8. ASSETS AND BENEFIT OBLIGATIONS HELD BY PRUDENTIAL

Some assets and related liabilities are maintained by Prudential. Assets held in Prudential's general fund as of August 31, 2025 and 2024 are:

	2025	2024
Assets held in Prudential's general fund	<u>\$ 63,740,348</u>	<u>\$ 67,464,778</u>
Corresponding benefit obligations		
Reported but unpaid claims	\$ 1,717,000	\$ 2,097,500
Incurred but unreported claims	16,159,123	19,921,704
Accrued disability	285,509	384,903
Whole life and level premium life	<u>45,578,716</u>	<u>45,060,671</u>
	<u>\$ 63,740,348</u>	<u>\$ 67,464,778</u>
Interest earned on the investments was transferred to the Trust in the amount of	<u>\$ 2,210,489</u>	<u>\$ 2,525,118</u>

NOTE 9. RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

The following is a reconciliation of net assets available for benefits as of August 31, 2025 and 2024 per the financial statements to the Form 5500:

	2025	2024
Net assets available for benefits per the financial statements	\$ 168,518,235	\$ 173,136,125
Less: benefits obligations currently payable	<u>(18,141,650)</u>	<u>(22,373,409)</u>
Net assets available for benefits per the Form 5500	<u>\$ 150,376,585</u>	<u>\$ 150,762,716</u>

The following is a reconciliation of claims paid as of August 31, 2025 and 2024 per the financial statements to the Form 5500:

	2025	2024
Claims and insurance premiums paid per the financial statements	\$ 80,779,968	\$ 86,309,903
Add: amounts currently payable at August 31, 2024	18,141,650	22,373,409
Less: amounts currently payable at August 31, 2023	<u>(22,373,409)</u>	<u>(25,505,707)</u>
Claims and insurance premiums paid per the Form 5500	<u>\$ 76,548,209</u>	<u>\$ 83,177,605</u>

**NOTE 9. RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500
(CONTINUED)**

Claims and insurance premiums paid that have been processed and approved for payment at year-end, but not paid, and claims incurred but not reported are not considered liabilities under GAAP and, therefore, are not presented as liabilities or claims and premiums paid in the accompanying financial statements but are recorded on the Form 5500 as a liability.

NOTE 10. UNINSURED CASH

The Plan maintains its cash primarily with one bank, which at times may exceed the federally insured limits per bank.

NOTE 11. SUBSEQUENT EVENTS REVIEW

Subsequent events have been evaluated through March 27, 2026, which is the date the financial statements were available to be issued. This review and evaluation revealed no material event or transaction which would require an adjustment or disclosure in the accompanying financial statements.



SUPPLEMENTAL INFORMATION



NEA MEMBERS INSURANCE PLAN & TRUST

SCHEDULE OF ASSETS (HELD AT END OF YEAR)

AUGUST 31, 2025

Form 5500, Part IV, Schedule H, Line 4i

E.I.N. 53-0115260
Plan No. 520

(a)	(b) Identity of issuer, borrower, lessor or similar party	(c) Description			(d) Cost	(e) Current Value
		Face Value/Shares	Maturity Date	Interest Rate		
INTEREST-BEARING CASH						
	BNY MELLON CASH RESERVE	65,966	12/31/2049	0.10%	\$ 65,966	\$ 65,966
	DREYFUS TREASURY SECURITIES	261,987	12/31/2035	5.27%	261,987	261,987
	TOTAL INTEREST-BEARING CASH				327,953	327,953
U.S. GOVERNMENT SECURITIES						
	FEDERAL HOME LN BK CONS BD	216,667	03/30/2037	2.35%	171,273	169,867
	FEDERAL NATL MTG ASSN STRIP	100,000	11/15/2030	0.00%	77,701	81,417
	FHLMC POOL #G0-7502	91,901	10/01/2043	4.00%	89,874	89,044
	FHLMC POOL #QG-5227	237,803	06/01/2053	6.00%	242,557	243,706
	FHLMC POOL #RA-8767	73,225	03/01/2053	5.00%	72,836	72,896
	FHLMC POOL #RB-5163	53,713	05/01/2042	3.00%	49,042	49,065
	FHLMC POOL #RB-5175	67,657	08/01/2042	4.00%	65,713	65,526
	FHLMC POOL #SC-0334	114,802	01/01/2043	4.50%	113,836	113,285
	FHLMC POOL #SD-2184	45,088	01/01/2053	6.00%	45,964	46,307
	FHLMC POOL #SD-2428	140,457	01/01/2053	5.00%	139,489	139,415
	FHLMC POOL #SD-2688	48,774	04/01/2053	5.50%	49,347	49,423
	FHLMC POOL #SD-3954	60,175	11/01/2052	4.00%	57,188	56,278
	FHLMC POOL #SD-8255	76,457	10/01/2052	3.50%	71,948	69,211
	FHLMC POOL #SD-8267	97,485	10/01/2052	5.00%	96,830	96,700
	FHLMC POOL #SD-8342	108,241	06/01/2053	5.50%	108,148	109,335
	FHLMC POOL #ZN-1436	146,718	11/01/2048	5.00%	148,171	147,238
	FHLMC MULTICLASS MTG 4191 NB	153	04/15/2043	1.25%	145	147
	FNMA POOL #0AL6968	188,976	06/01/2045	3.50%	177,148	176,219
	FNMA POOL #0AM1622	76,589	12/01/2042	3.83%	71,882	70,531
	FNMA POOL #0BM1068	68,482	01/01/2032	3.50%	67,253	67,744
	FNMA POOL #0BR2084	213,165	06/01/2051	VAR RT	197,431	202,052
	FNMA POOL #0CA8256	64,367	12/01/2050	2.50%	55,021	53,622
	FNMA POOL #0CB2635	107,571	01/01/2052	2.50%	88,880	90,319
	FNMA POOL #0CB3609	87,415	05/01/2052	3.50%	80,594	79,271
	FNMA POOL #0CB5848	155,526	03/01/2053	5.50%	156,328	157,939
	FNMA POOL #0CB9655	93,877	12/01/2054	5.00%	92,044	92,693
	FNMA POOL #0DA0508	181,380	10/01/2053	6.00%	184,802	185,336
	FNMA POOL #0FA2225	172,880	11/01/2052	5.50%	177,904	176,504
	FNMA POOL #0FM6063	94,214	02/01/2051	3.00%	84,780	82,364
	FNMA POOL #0FS1246	162,620	06/01/2048	4.00%	157,245	156,327
	FNMA POOL #0FS1779	208,091	12/01/2047	3.00%	190,875	190,133
	FNMA POOL #0FS4018	41,526	07/01/2052	3.00%	37,077	36,161
	FNMA POOL #0FS5154	155,822	02/01/2051	4.00%	152,949	148,316
	FNMA POOL #0FS5443	46,958	06/01/2043	4.50%	46,531	46,435
	FNMA POOL #0FS5635	263,253	11/01/2052	4.00%	245,803	246,218
	FNMA POOL #0FS5833	47,873	10/01/2053	6.00%	49,373	49,518
	FNMA POOL #0FS7278	69,300	11/01/2053	5.00%	67,345	68,528
	FNMA POOL #0FS8386	133,022	06/01/2049	4.00%	126,392	126,817
	FNMA POOL #0MA4306	171,182	04/01/2051	2.50%	139,620	143,579
	FNMA POOL #0MA4370	113,737	05/01/2051	2.00%	87,702	88,310
	FNMA POOL #0MA4617	29,011	04/01/2042	3.00%	26,731	26,500
	FNMA POOL #0MA4684	31,204	05/01/2052	4.50%	30,409	30,123
	FNMA POOL #0MA5089	35,115	07/01/2053	4.00%	32,663	32,819
	FNMA POOL #0MA5294	77,601	02/01/2054	5.00%	77,039	76,552
	FNMA GTD REMIC P/T 09-6 LA	7,405	07/25/2038	VAR RT	6,524	6,552
	FRESB 2019-SB59 MORTG SB59 A7F	63,823	12/25/2025	VAR RT	62,521	63,474
	FRESB 2019-SB63 MORTG SB63 A7F	58,818	04/25/2026	VAR RT	56,574	57,955
	GNMA GTD REMIC P/T 24-22 EL	120,000	02/20/2054	3.00%	94,351	89,425
	GNMA II POOL #0786474	116,337	01/20/2053	5.00%	115,719	116,015
	GNMA II POOL #0787911	191,445	04/20/2055	5.50%	191,924	193,347
	GNMA II POOL #0MA5530	483,206	10/20/2048	5.00%	482,110	487,250
	GNMA II POOL #0MA6514	67,097	03/20/2035	3.50%	65,190	65,074
	GNMA II POOL #0MA9906	136,408	09/20/2054	5.50%	137,010	137,508
	GNMA II POOL #0MB0148	53,527	01/20/2055	6.00%	54,037	54,623
	GNMA II POOL #0MB0206	48,870	02/20/2055	6.00%	49,359	49,876
	GNMA II POOL #0MB0309	64,287	04/20/2055	6.00%	64,940	65,603
	GNMA II POOL #0MB0425	34,802	06/20/2055	6.00%	35,398	35,530
	SBA GTD PARTN CTF5 2012-20L 1	63,092	12/01/2032	1.93%	57,747	58,526
	U S TREASURY BOND	450,000	11/15/2050	1.63%	261,000	232,403
	U S TREASURY BOND	50,000	11/15/2040	1.38%	33,272	31,860

NEA MEMBERS INSURANCE PLAN & TRUST

SCHEDULE OF ASSETS (HELD AT END OF YEAR), (CONTINUED)

AUGUST 31, 2025

Form 5500, Part IV, Schedule H, Line 4i

E.I.N. 53-0115260
Plan No. 520

(a)	(b) Identity of issuer, borrower, lessor or similar party	(c) Description			(d) Cost	(e) Current Value
		Face Value/Shares	Maturity Date	Interest Rate		
	U S TREASURY BOND	300,000	11/15/2051	1.88%	\$ 184,629	\$ 163,407
	U S TREASURY BOND	175,000	02/15/2044	4.50%	179,730	167,734
	U S TREASURY BOND	492,000	08/15/2054	4.25%	462,712	440,473
	U S TREASURY BOND	136,000	05/15/2045	5.00%	135,873	138,274
	U S TREASURY NOTE	150,000	05/15/2033	3.38%	144,410	143,736
	U S TREASURY NOTE	450,000	07/15/2026	4.50%	454,167	452,214
	U S TREASURY NOTE	150,000	11/30/2030	4.38%	154,758	154,482
	U S TREASURY NOTE	175,000	07/31/2026	4.38%	175,591	175,707
	U S TREASURY NOTE	150,000	08/31/2026	3.75%	149,813	149,810
	U S TREASURY NOTE	150,000	11/30/2026	4.25%	149,736	150,791
	U S TREASURY NOTE	275,000	03/31/2030	4.00%	274,055	278,685
	U S TREASURY NOTE	425,000	05/15/2035	4.25%	421,567	426,262
	U S TREASURY NOTE	100,000	08/15/2035	4.25%	99,527	100,172
	U S TREASURY NOTE	87,000	01/31/2030	4.25%	88,597	89,025
	U S TREASURY NOTE	378,000	06/30/2027	3.75%	378,178	378,605
	U S TREASURY NOTE	1,773,000	08/15/2035	4.25%	1,771,262	1,776,050
	U S TREASURY NOTE	72,000	08/31/2030	3.63%	71,727	71,758
	TOTAL U.S. GOVERNMENT SECURITIES				11,565,891	11,501,996
	CORPORATE DEBT INSTRUMENTS					
	ABBVIE INC	15,000	05/14/2035	4.50%	14,760	14,538
	ACRISURE LLC / ACRISURE F 144A	32,000	07/01/2032	6.75%	32,320	32,831
	ADVANCE AUTO PARTS INC 144A	50,000	08/01/2033	7.38%	50,000	51,269
	AES CORP/THE	60,000	07/15/2055	VAR RT	59,991	58,049
	ALLY FINANCIAL INC	27,000	06/13/2029	VAR RT	28,636	28,568
	AMERICAN EXPRESS CO	175,000	01/30/2031	VAR RT	175,166	180,325
	AMERICAN TOWER CORP	250,000	09/15/2031	2.30%	212,460	220,005
	AMGEN INC	150,000	03/02/2033	5.25%	154,214	153,950
	AMGEN INC	21,000	03/02/2063	5.75%	21,601	20,192
	ANGEL OAK MORTGAGE T 4 A1 144A	56,357	01/25/2069	VAR RT	57,017	56,969
	APA CORP 144A	55,000	02/15/2035	6.10%	51,830	55,044
	APOLLO DEBT SOLUTIONS BDC	60,000	04/13/2029	6.90%	62,047	63,124
	APOLLO GLOBAL MANAGEMENT INC	49,000	11/15/2033	6.38%	53,906	54,048
	APPLE INC	250,000	08/20/2050	2.40%	161,678	146,700
	ARTHUR J GALLAGHER & CO	19,000	02/15/2034	6.50%	20,907	20,844
	ARTHUR J GALLAGHER & CO	19,000	02/15/2054	6.75%	21,965	20,755
	AS MILEAGE PLAN IP LTD 144A	15,000	10/20/2029	5.02%	15,000	15,017
	AT&T INC	150,000	02/01/2032	2.25%	126,540	129,899
	ATHENE HOLDING LTD	34,000	01/15/2034	5.88%	35,167	35,221
	BANK OF NEW YORK MELLON CORP/T	175,000	02/11/2031	VAR RT	175,000	179,772
	BANK OF NOVA SCOTIA/THE	32,000	02/01/2034	5.65%	33,744	33,698
	BAT CAPITAL CORP	19,000	08/02/2033	6.42%	20,614	20,711
	BAT CAPITAL CORP	16,000	08/02/2043	7.08%	17,865	17,751
	BAYLOR SCOTT & WHITE HOLDINGS	235,000	11/15/2045	4.19%	211,387	194,173
	BOEING CO/THE	75,000	05/01/2034	3.60%	63,977	66,844
	BOEING CO/THE	105,000	02/04/2026	2.20%	100,603	103,932
	BRANDYWINE OPERATING PARTNERSH	25,000	04/12/2029	8.88%	27,155	27,185
	BRISTOL-MYERS SQUIBB CO	9,000	11/15/2033	5.90%	9,806	9,695
	BRISTOL-MYERS SQUIBB CO	14,000	11/15/2063	6.40%	16,074	14,991
	BROADCOM INC	125,000	07/15/2030	4.60%	125,124	126,151
	BUCKEYE PARTNERS LP	14,000	11/15/2043	5.85%	12,660	12,547
	CANADIAN PACIFIC RAILWAY CO	125,000	12/02/2051	3.10%	87,161	81,311
	CANTOR FITZGERALD LP 144A	55,000	12/12/2028	7.20%	59,094	58,930
	CAPITAL ONE FINANCIAL CORP	60,000	02/01/2030	VAR RT	61,144	62,183
	CAPITAL ONE FINANCIAL CORP	60,000	01/30/2036	VAR RT	59,168	61,876
	CARRIER GLOBAL CORP	24,000	04/05/2040	3.38%	19,384	19,167
	CBRE SERVICES INC	43,000	04/01/2029	5.50%	44,470	44,587
	CENTENE CORP	8,000	12/15/2029	4.63%	7,782	7,702
	CENTENE CORP	20,000	08/01/2031	2.63%	16,970	16,949
	CHEMOURS CO/THE	54,000	05/15/2027	5.38%	52,471	53,771
	CHENIERE ENERGY PARTNERS LP	40,000	10/01/2029	4.50%	39,144	39,907
	CIGNA GROUP/THE	125,000	05/15/2031	5.13%	128,171	129,399
	CME GROUP INC	23,000	06/15/2048	4.15%	20,277	19,109
	CNO FINANCIAL GROUP INC	60,000	06/15/2034	6.45%	62,620	63,066
	CNO GLOBAL FUNDING 144A	90,000	09/09/2029	4.95%	89,445	92,031
	COMCAST CORP	150,000	01/15/2033	4.25%	145,083	145,718
	CONSOLIDATED ENERGY FINAN 144A	150,000	05/15/2026	6.50%	145,125	145,707
	CONSTELLATION BRANDS INC	13,000	11/15/2048	5.25%	12,634	11,774
	COREBRIDGE FINANCIAL INC	15,000	09/15/2033	6.05%	15,955	15,908
	COREBRIDGE FINANCIAL INC	5,000	01/15/2034	5.75%	5,216	5,222
	COREWEAVE INC 144A	55,000	06/01/2030	9.25%	55,103	55,198

NEA MEMBERS INSURANCE PLAN & TRUST

SCHEDULE OF ASSETS (HELD AT END OF YEAR), (CONTINUED)

AUGUST 31, 2025

Form 5500, Part IV, Schedule H, Line 4i

E.I.N. 53-0115260
Plan No. 520

(a)	(b) Identity of issuer, borrower, lessor or similar party	(c) Description			(d) Cost	(e) Current Value
		Face Value/Shares	Maturity Date	Interest Rate		
	CRESCENT ENERGY FINANCE LLC	75,000	10/15/2030	9.75%	\$ 69,188	\$ 78,057
	DAIMLER TRUCK FINANCE NOR 144A	150,000	09/20/2033	5.50%	148,212	153,822
	DALLAS-FORT WORTH TX INTERNATI	200,000	11/01/2030	2.55%	181,340	185,196
	DR HORTON INC	100,000	10/15/2035	5.50%	99,964	102,386
	ECOPETROL SA	40,000	01/19/2036	8.38%	40,248	40,517
	EDISON INTERNATIONAL	105,000	12/31/2049	VAR RT	98,989	102,026
	EDISON INTERNATIONAL	75,000	12/31/2049	VAR RT	66,375	67,054
	ELEVANCE HEALTH INC	30,000	10/15/2052	6.10%	32,685	30,240
	ENBRIDGE INC	17,000	01/15/2084	VAR RT	18,632	19,231
	ENERGY TRANSFER LP	19,000	06/15/2048	6.00%	19,227	18,216
	FIRST CITIZENS BANCSHARES INC/	48,000	03/12/2040	VAR RT	48,263	48,211
	FORD CREDIT AUTO OWNER TRU A B	70,000	11/15/2029	5.26%	71,504	71,450
	GCAT 2024-INV1 T INV1 2A6 144A	52,330	01/25/2054	VAR RT	53,009	53,165
	GENERAL MOTORS FINANCIAL CO IN	52,000	01/07/2029	5.80%	53,864	53,981
	GLENCORE FUNDING LLC 144A	52,000	10/06/2033	6.50%	56,347	56,752
	GLOBAL ATLANTIC FIN CO 144A	55,000	03/15/2054	6.75%	56,389	56,207
	GOLDMAN SACHS BDC INC	92,000	03/11/2027	6.38%	94,610	94,099
	GOLDMAN SACHS GROUP INC/THE	70,000	10/23/2030	VAR RT	70,148	70,746
	HPS CORPORATE LENDING FUN 144A	84,000	06/05/2030	5.85%	83,581	85,346
	HUMANA INC	19,000	03/15/2034	5.95%	20,101	19,885
	HUNTINGTON BANCSHARES INC/OH	25,000	08/21/2029	VAR RT	26,266	26,332
	HYUNDAI CAPITAL AMERICA 144A	28,000	09/21/2028	6.10%	29,331	29,287
	JP MORGAN MORTGAG VIS1 A1 144A	56,935	07/25/2064	VAR RT	57,847	57,447
	JPMORGAN CHASE & CO	100,000	07/22/2035	VAR RT	102,674	102,034
	JPMORGAN CHASE & CO	30,000	07/25/2033	VAR RT	30,182	30,411
	LADDER CAPITAL FINANCE HO 144A	100,000	07/15/2031	7.00%	104,525	105,144
	LINDBLAD EXPEDITIONS LLC 144A	30,000	09/15/2030	7.00%	30,375	30,736
	LOCKHEED MARTIN CORP	25,000	02/15/2055	5.20%	25,426	23,256
	MACQUARIE BANK LTD 144A	100,000	06/12/2028	VAR RT	100,000	100,524
	MATTEL INC	46,000	11/01/2041	5.45%	43,205	41,362
	METLIFE INC	9,000	12/15/2066	6.40%	9,467	9,424
	METLIFE INC	28,000	01/15/2054	5.25%	28,160	26,338
	MICRON TECHNOLOGY INC	62,000	01/15/2031	5.30%	63,570	63,960
	MIDAMERICAN ENERGY CO	14,000	09/15/2054	5.85%	15,099	14,383
	MORGAN STANLEY	250,000	01/22/2031	VAR RT	226,273	232,930
	NATIONAL RURAL UTILITIES COOPE	250,000	03/15/2031	1.35%	204,685	213,755
	NEW HOME CO INC/THE 144A	30,000	11/01/2030	8.50%	30,563	31,115
	NEW YORK ST DORM AUTH ST PERSO	271,002	03/15/2033	5.29%	275,777	275,546
	NEWELL BRANDS INC 144A	50,000	06/01/2028	8.50%	50,500	52,787
	NEWMARK GROUP INC	60,000	01/12/2029	7.50%	63,263	64,149
	NEXTERA ENERGY CAPITAL HOLDING	200,000	01/15/2052	3.00%	132,512	123,924
	NORFOLK SOUTHERN CORP	24,000	08/01/2054	5.35%	24,144	22,852
	ONEOK INC	70,000	06/01/2047	5.45%	64,997	62,684
	PACIFIC GAS AND ELECTRIC CO	26,000	01/15/2053	6.75%	28,493	26,852
	PACIFIC GAS AND ELECTRIC CO	35,000	03/15/2034	6.95%	37,141	38,336
	PACIFIC GAS AND ELECTRIC CO	45,000	03/01/2035	5.70%	43,882	45,609
	PACIFICORP	10,000	01/15/2055	5.80%	10,183	9,494
	PARAMOUNT GLOBAL	55,000	09/01/2043	5.85%	47,929	49,485
	PARAMOUNT GLOBAL	7,000	05/19/2050	4.95%	5,235	5,483
	PATTERSON-UTI ENERGY INC	54,000	10/01/2033	7.15%	57,671	56,385
	PBF HOLDING CO LLC / PBF 144A	55,000	03/15/2030	9.88%	53,900	56,784
	PBF HOLDING CO LLC / PBF FINAN	45,000	02/15/2028	6.00%	41,242	44,201
	PIONEER NATURAL RESOURCES CO	150,000	01/15/2031	2.15%	130,538	134,550
	PNC FINANCIAL SERVICES GROUP I	24,000	10/20/2034	VAR RT	27,036	26,943
	QUEST DIAGNOSTICS INC	14,000	11/30/2033	6.40%	15,421	15,423
	RENAISSANCE HOLDINGS LTD	65,000	06/05/2033	5.75%	66,240	67,506
	ROYAL BANK OF CANADA	175,000	10/18/2030	VAR RT	175,000	176,461
	ROYAL BANK OF CANADA	54,000	11/01/2027	6.00%	56,593	56,170
	RTX CORP	16,000	03/15/2054	6.40%	18,383	17,322
	SELECTIVE INSURANCE GROUP INC	55,000	04/15/2035	5.90%	55,578	56,696
	SIRIUSPOINT LTD	59,000	04/05/2029	7.00%	61,873	62,431
	SIXTH STREET SPECIALTY LENDING	65,000	03/01/2029	6.13%	66,622	67,067
	SOUTHERN CALIFORNIA EDISON CO	18,000	10/01/2028	5.65%	18,770	18,632
	SOUTHERN CALIFORNIA GAS CO	15,000	06/01/2053	5.75%	15,650	14,692
	SOUTHERN CO/THE	200,000	03/15/2035	4.85%	203,100	196,310
	TANGER PROPERTIES LP	60,000	09/01/2031	2.75%	51,673	53,435
	TIDEWATER INC 144A	25,000	07/15/2030	9.13%	25,625	26,673
	TPG OPERATING GROUP II LP	60,000	03/05/2034	5.88%	60,100	62,835
	TRUIST FINANCIAL CORP	10,000	01/26/2034	VAR RT	9,938	10,073
	TRUIST FINANCIAL CORP	20,000	12/31/2049	VAR RT	19,700	19,906
	UNIV OF CALIFORNIA REVENUES	150,000	05/15/2045	4.13%	139,125	133,271
	VALE OVERSEAS LTD	55,000	06/28/2054	6.40%	55,908	54,991
	VENTAS REALTY LP	100,000	04/15/2049	4.88%	90,457	85,700

NEA MEMBERS INSURANCE PLAN & TRUST

SCHEDULE OF ASSETS (HELD AT END OF YEAR), (CONTINUED)

AUGUST 31, 2025

Form 5500, Part IV, Schedule H, Line 4i

E.I.N. 53-0115260
Plan No. 520

(a)	(b) Identity of issuer, borrower, lessor or similar party	(c) Description			(d) Cost	(e) Current Value
		Face Value/Shares	Maturity Date	Interest Rate		
	VENTURE GLOBAL LNG INC 144A	15,000	02/01/2029	9.50%	\$ 16,904	\$ 16,493
	VERIZON COMMUNICATIONS INC	50,000	02/23/2054	5.50%	51,413	48,011
	VMWARE LLC	42,000	05/15/2030	4.70%	41,950	42,520
	WARNERMEDIA HOLDINGS INC	94,000	N/A	VAR RT	80,297	81,122
	WARNERMEDIA HOLDINGS INC	2,000	03/15/2052	5.14%	1,522	1,245
	WARNERMEDIA HOLDINGS INC	75,000	N/A	VAR RT	50,588	50,531
	WELLS FARGO & CO	21,000	07/25/2034	VAR RT	21,683	21,800
	WESTERN DIGITAL CORP	100,000	02/01/2032	3.10%	84,153	89,097
	TOTAL CORPORATE DEBT INSTRUMENTS				8,454,664	8,481,815
	CORPORATE STOCK-COMMON					
	3M CO	231	N/A	N/A	31,113	35,927
	3M CO	15	N/A	N/A	2,020	2,333
	A O SMITH CORP	51	N/A	N/A	4,270	3,636
	AAON INC	74	N/A	N/A	7,068	6,138
	AAON INC	11	N/A	N/A	1,051	912
	ABBOTT LABORATORIES	738	N/A	N/A	83,593	97,903
	ABBVIE INC	749	N/A	N/A	147,036	157,590
	ABBVIE INC	321	N/A	N/A	60,474	67,538
	ABERCROMBIE & FITCH CO	55	N/A	N/A	8,116	5,144
	ACADIA HEALTHCARE CO INC	92	N/A	N/A	7,248	2,112
	ACCENTURE PLC	266	N/A	N/A	90,959	69,152
	ACUITY INC	34	N/A	N/A	8,647	11,100
	ADOBE INC	181	N/A	N/A	103,968	64,563
	ADOBE INC	77	N/A	N/A	44,230	27,466
	ADVANCED DRAINAGE SYSTEMS INC	78	N/A	N/A	12,163	11,230
	ADVANCED MICRO DEVICES INC	689	N/A	N/A	102,358	112,052
	ADVANCED MICRO DEVICES INC	171	N/A	N/A	25,180	27,810
	AECOM	146	N/A	N/A	14,629	18,234
	AEROVIRONMENT INC	36	N/A	N/A	9,998	8,689
	AES CORP/THE	304	N/A	N/A	5,208	4,116
	AFFILIATED MANAGERS GROUP INC	32	N/A	N/A	5,563	7,194
	AFFIRM HOLDINGS INC	28	N/A	N/A	1,906	2,477
	AFLAC INC	210	N/A	N/A	23,176	22,441
	AGCO CORP	69	N/A	N/A	6,305	7,465
	AGILENT TECHNOLOGIES INC	122	N/A	N/A	17,436	15,331
	AGREE REALTY CORP	121	N/A	N/A	8,844	8,802
	AIR PRODUCTS AND CHEMICALS INC	95	N/A	N/A	26,491	27,940
	AIRBNB INC	184	N/A	N/A	21,585	24,018
	AIRBNB INC	77	N/A	N/A	9,067	10,051
	AKAMAI TECHNOLOGIES INC	65	N/A	N/A	6,620	5,143
	ALASKA AIR GROUP INC	134	N/A	N/A	7,055	8,413
	ALBEMARLE CORP	40	N/A	N/A	3,610	3,397
	ALBERTSONS COS INC	438	N/A	N/A	9,278	8,523
	ALCOA CORP	285	N/A	N/A	9,166	9,174
	ALEXANDRIA REAL ESTATE EQUITIE	67	N/A	N/A	8,011	5,523
	ALIGN TECHNOLOGY INC	30	N/A	N/A	7,117	4,259
	ALLEGION PLC	37	N/A	N/A	5,137	6,283
	ALLEGRO MICROSYSTEMS INC	144	N/A	N/A	3,513	4,442
	ALLETE INC	64	N/A	N/A	4,067	4,106
	ALLIANT ENERGY CORP	109	N/A	N/A	6,351	7,093
	ALLSTATE CORP/THE	113	N/A	N/A	21,350	22,990
	ALLY FINANCIAL INC	303	N/A	N/A	13,018	12,438
	ALLY FINANCIAL INC	6	N/A	N/A	214	246
	ALNYLAM PHARMACEUTICALS INC	23	N/A	N/A	6,222	10,270
	ALPHABET INC	1,996	N/A	N/A	329,560	426,206
	ALPHABET INC	2,473	N/A	N/A	404,039	526,526
	ALPHABET INC	554	N/A	N/A	91,497	118,296
	ALPHABET INC	680	N/A	N/A	111,098	144,779
	ALTRIA GROUP INC	710	N/A	N/A	38,177	47,719
	AMAZON.COM INC	4,013	N/A	N/A	718,113	918,977
	AMAZON.COM INC	1,263	N/A	N/A	225,986	289,227
	AMCOR PLC	969	N/A	N/A	10,303	8,362
	AMEREN CORP	114	N/A	N/A	9,406	11,375
	AMERICAN AIRLINES GROUP INC	727	N/A	N/A	7,988	9,720
	AMERICAN AIRLINES GROUP INC	8	N/A	N/A	85	107
	AMERICAN ELECTRIC POWER CO INC	226	N/A	N/A	22,663	25,091
	AMERICAN EXPRESS CO	237	N/A	N/A	61,300	78,513
	AMERICAN EXPRESS CO	33	N/A	N/A	8,535	10,932
	AMERICAN FINANCIAL GROUP INC/O	80	N/A	N/A	10,693	10,869
	AMERICAN HOMES 4 RENT	350	N/A	N/A	13,857	12,537
	AMERICAN INTERNATIONAL GROUP I	245	N/A	N/A	18,877	19,923
	AMERICAN TOWER CORP	198	N/A	N/A	44,364	40,362

NEA MEMBERS INSURANCE PLAN & TRUST

SCHEDULE OF ASSETS (HELD AT END OF YEAR), (CONTINUED)

AUGUST 31, 2025

Form 5500, Part IV, Schedule H, Line 4i

E.I.N. 53-0115260
Plan No. 520

(a)	(b) Identity of issuer, borrower, lessor or similar party	(c) Description			(d) Cost	(e) Current Value
		Face Value/Shares	Maturity Date	Interest Rate		
	AMERICAN TOWER CORP	85	N/A	N/A	\$ 19,026	\$ 17,327
	AMERICAN WATER WORKS CO INC	83	N/A	N/A	11,879	11,911
	AMERIPRISE FINANCIAL INC	41	N/A	N/A	18,427	21,107
	AMERIPRISE FINANCIAL INC	16	N/A	N/A	7,191	8,237
	AMETEK INC	99	N/A	N/A	16,934	18,295
	AMGEN INC	229	N/A	N/A	76,447	65,886
	AMGEN INC	72	N/A	N/A	23,991	20,715
	AMKOR TECHNOLOGY INC	125	N/A	N/A	4,018	3,024
	AMPHENOL CORP	505	N/A	N/A	34,062	54,974
	AMPHENOL CORP	218	N/A	N/A	17,636	23,731
	ANALOG DEVICES INC	212	N/A	N/A	49,786	53,278
	ANGLOGOLD ASHANTI PLC	11	N/A	N/A	483	623
	ANNALY CAPITAL MANAGEMENT INC	660	N/A	N/A	13,235	13,985
	ANTERO MIDSTREAM CORP	370	N/A	N/A	5,530	6,582
	ANTERO RESOURCES CORP	313	N/A	N/A	8,567	9,991
	AON PLC	92	N/A	N/A	31,622	33,764
	AON PLC	35	N/A	N/A	12,346	12,845
	APA CORP	154	N/A	N/A	4,387	3,576
	APELLIS PHARMACEUTICALS INC	18	N/A	N/A	700	496
	API GROUP CORP	395	N/A	N/A	13,389	14,094
	APOLLO GLOBAL MANAGEMENT INC	190	N/A	N/A	32,497	25,884
	APOLLO GLOBAL MANAGEMENT INC	52	N/A	N/A	6,018	7,084
	APPFOLIO INC	26	N/A	N/A	6,031	7,212
	APPFOLIO INC	4	N/A	N/A	928	1,110
	APPLE INC	6,340	N/A	N/A	1,451,629	1,471,768
	APPLE INC	2,676	N/A	N/A	606,704	621,207
	APPLIED INDUSTRIAL TECHNOLOGIE	42	N/A	N/A	8,615	11,070
	APPLIED MATERIALS INC	345	N/A	N/A	68,055	55,462
	APPLIED MATERIALS INC	41	N/A	N/A	8,088	6,591
	APPLOVIN CORP	43	N/A	N/A	3,993	20,579
	APTARGROUP INC	73	N/A	N/A	11,183	10,167
	APTIV PLC	96	N/A	N/A	6,867	7,635
	ARAMARK	283	N/A	N/A	10,354	11,068
	ARCH CAPITAL GROUP LTD	160	N/A	N/A	18,094	14,645
	ARCHER-DANIELS-MIDLAND CO	203	N/A	N/A	12,381	12,716
	ARES MANAGEMENT CORP	34	N/A	N/A	5,031	6,093
	ARISTA NETWORKS INC	436	N/A	N/A	38,518	59,536
	ARISTA NETWORKS INC	187	N/A	N/A	16,587	25,535
	ARMSTRONG WORLD INDUSTRIES INC	2	N/A	N/A	254	392
	ARROW ELECTRONICS INC	57	N/A	N/A	7,700	7,201
	ARTHUR J GALLAGHER & CO	106	N/A	N/A	30,934	32,092
	ARTHUR J GALLAGHER & CO	3	N/A	N/A	878	908
	ASGN INC	48	N/A	N/A	4,616	2,604
	ASHLAND INC	52	N/A	N/A	4,654	2,920
	ASSOCIATED BANC-CORP	171	N/A	N/A	3,960	4,612
	ASSURANT INC	22	N/A	N/A	4,320	4,743
	AST SPACEMOBILE INC	28	N/A	N/A	1,382	1,370
	ASTERA LABS INC	26	N/A	N/A	2,367	4,737
	AT&T INC	3,054	N/A	N/A	60,775	89,452
	ATI INC	157	N/A	N/A	8,171	12,174
	ATLASSIAN CORP	28	N/A	N/A	4,881	4,978
	ATMOS ENERGY CORP	64	N/A	N/A	8,367	10,632
	AUTODESK INC	91	N/A	N/A	23,514	28,638
	AUTODESK INC	39	N/A	N/A	10,124	12,273
	AUTOLIV INC	79	N/A	N/A	8,095	9,802
	AUTOMATIC DATA PROCESSING INC	174	N/A	N/A	48,008	52,905
	AUTOMATIC DATA PROCESSING INC	68	N/A	N/A	18,789	20,675
	AUTONATION INC	28	N/A	N/A	4,979	6,134
	AUTOZONE INC	8	N/A	N/A	25,524	33,588
	AUTOZONE INC	1	N/A	N/A	3,181	4,199
	AVALONBAY COMMUNITIES INC	61	N/A	N/A	13,770	11,947
	AVANTOR INC	743	N/A	N/A	19,115	10,008
	AVERY DENNISON CORP	34	N/A	N/A	7,543	5,836
	AVIENT CORP	101	N/A	N/A	4,846	3,777
	AVIS BUDGET GROUP INC	19	N/A	N/A	1,558	3,006
	AVIS BUDGET GROUP INC	1	N/A	N/A	82	158
	AVNET INC	92	N/A	N/A	5,077	5,020
	AXALTA COATING SYSTEMS LTD	241	N/A	N/A	8,746	7,534
	AXON ENTERPRISE INC	32	N/A	N/A	12,504	23,913
	AXON ENTERPRISE INC	14	N/A	N/A	5,602	10,462
	BAKER HUGHES CO	402	N/A	N/A	14,138	18,251
	BALL CORP	119	N/A	N/A	7,593	6,264
	BANK OF AMERICA CORP	2,787	N/A	N/A	113,570	141,412

NEA MEMBERS INSURANCE PLAN & TRUST

SCHEDULE OF ASSETS (HELD AT END OF YEAR), (CONTINUED)

AUGUST 31, 2025

Form 5500, Part IV, Schedule H, Line 4i

E.I.N. 53-0115260
Plan No. 520

(a)	(b) Identity of issuer, borrower, lessor or similar party	(c) Description			(d) Cost	(e) Current Value
		Face Value/Shares	Maturity Date	Interest Rate		
	BANK OF AMERICA CORP	98	N/A	N/A	\$ 4,618	\$ 4,973
	BANK OF NEW YORK MELLON CORP/T	299	N/A	N/A	20,398	31,574
	BANK OF NEW YORK MELLON CORP/T	9	N/A	N/A	821	950
	BANK OZK	116	N/A	N/A	5,028	6,087
	BATH & BODY WORKS INC	229	N/A	N/A	6,935	6,689
	BAXTER INTERNATIONAL INC	218	N/A	N/A	8,271	5,382
	BECTON DICKINSON & CO	124	N/A	N/A	30,059	23,930
	BELDEN INC	44	N/A	N/A	4,720	5,729
	BELLRING BRANDS INC	141	N/A	N/A	7,734	5,788
	BENTLEY SYSTEMS INC	24	N/A	N/A	1,235	1,336
	BERKSHIRE HATHAWAY INC	778	N/A	N/A	370,198	391,318
	BEST BUY CO INC	82	N/A	N/A	8,233	6,038
	BILL HOLDINGS INC	103	N/A	N/A	9,221	4,781
	BIOGEN INC	62	N/A	N/A	12,695	8,198
	BIOMARIN PHARMACEUTICAL INC	210	N/A	N/A	19,154	12,237
	BIO-RAD LABORATORIES INC	21	N/A	N/A	6,930	6,255
	BIO-TECHNE CORP	67	N/A	N/A	4,957	3,660
	BJ'S WHOLESALE CLUB HOLDINGS I	146	N/A	N/A	11,715	14,261
	BJ'S WHOLESALE CLUB HOLDINGS I	3	N/A	N/A	343	293
	BLACK HILLS CORP	79	N/A	N/A	4,663	4,725
	BLACKBAUD INC	42	N/A	N/A	3,511	2,802
	BLACKROCK INC	62	N/A	N/A	56,166	69,883
	BLACKSTONE INC	306	N/A	N/A	43,562	52,448
	BLACKSTONE INC	132	N/A	N/A	18,898	22,625
	BLOCK INC	235	N/A	N/A	18,646	18,715
	BLOCK INC	36	N/A	N/A	2,379	2,867
	BLUE OWL CAPITAL INC	110	N/A	N/A	1,973	2,037
	BOEING CO/THE	317	N/A	N/A	53,397	74,394
	BOEING CO/THE	18	N/A	N/A	3,138	4,224
	BOOKING HOLDINGS INC	14	N/A	N/A	54,729	78,387
	BOOKING HOLDINGS INC	6	N/A	N/A	23,455	33,594
	BOOZ ALLEN HAMILTON HOLDING CO	22	N/A	N/A	3,493	2,392
	BOSTON BEER CO INC/THE	9	N/A	N/A	2,445	1,990
	BOSTON SCIENTIFIC CORP	626	N/A	N/A	51,201	66,043
	BOSTON SCIENTIFIC CORP	46	N/A	N/A	4,900	4,853
	BOYD GAMING CORP	67	N/A	N/A	4,021	5,753
	BRIGHT HORIZONS FAMILY Solutio	1	N/A	N/A	141	118
	BRIGHTHOUSE FINANCIAL INC	64	N/A	N/A	2,938	3,025
	BRINK'S CO/THE	47	N/A	N/A	5,215	5,266
	BRISTOL-MYERS SQUIBB CO	853	N/A	N/A	42,607	40,245
	BRISTOL-MYERS SQUIBB CO	71	N/A	N/A	3,291	3,350
	BRIXMOR PROPERTY GROUP INC	328	N/A	N/A	8,963	9,181
	BROADCOM INC	1,996	N/A	N/A	327,307	593,590
	BROADCOM INC	838	N/A	N/A	142,123	249,213
	BROADRIDGE FINANCIAL SOLUTIONS	50	N/A	N/A	10,643	12,781
	BROADRIDGE FINANCIAL SOLUTIONS	19	N/A	N/A	4,044	4,857
	BROOKFIELD ASSET MANAGEMENT LT	23	N/A	N/A	1,268	1,384
	BROWN & BROWN INC	101	N/A	N/A	10,618	9,792
	BROWN & BROWN INC	5	N/A	N/A	524	485
	BROWN-FORMAN CORP	76	N/A	N/A	3,465	2,275
	BRUKER CORP	122	N/A	N/A	7,865	4,146
	BRUNSWICK CORP/DE	72	N/A	N/A	5,692	4,578
	BUILDERS FIRSTSOURCE INC	49	N/A	N/A	8,526	6,795
	BUNGE GLOBAL SA	50	N/A	N/A	5,069	4,211
	BURLINGTON STORES INC	70	N/A	N/A	18,756	20,348
	BURLINGTON STORES INC	11	N/A	N/A	2,951	3,197
	BWX TECHNOLOGIES INC	101	N/A	N/A	10,419	16,366
	BWX TECHNOLOGIES INC	3	N/A	N/A	309	486
	BXP INC	61	N/A	N/A	4,588	4,423
	CABOT CORP	60	N/A	N/A	6,307	4,894
	CACI INTERNATIONAL INC	25	N/A	N/A	12,203	11,993
	CADENCE BANK	202	N/A	N/A	6,509	7,603
	CADENCE DESIGN SYSTEMS INC	116	N/A	N/A	31,196	40,650
	CADENCE DESIGN SYSTEMS INC	49	N/A	N/A	13,214	17,171
	CAESARS ENTERTAINMENT INC	92	N/A	N/A	3,463	2,463
	CAMDEN PROPERTY TRUST	45	N/A	N/A	5,634	5,039
	CAMPBELL'S COMPANY/THE	84	N/A	N/A	4,176	2,682
	CAPITAL ONE FINANCIAL CORP	272	N/A	N/A	38,784	61,804
	CAPRI HOLDINGS LTD	130	N/A	N/A	4,502	2,677
	CARDINAL HEALTH INC	104	N/A	N/A	11,723	15,473
	CARDINAL HEALTH INC	22	N/A	N/A	2,480	3,273
	CARLISLE COS INC	48	N/A	N/A	20,342	18,523
	CARLISLE COS INC	1	N/A	N/A	424	386

NEA MEMBERS INSURANCE PLAN & TRUST

SCHEDULE OF ASSETS (HELD AT END OF YEAR), (CONTINUED)

AUGUST 31, 2025

Form 5500, Part IV, Schedule H, Line 4i

E.I.N. 53-0115260
Plan No. 520

(a)	(b) Identity of issuer, borrower, lessor or similar party	(c) Description			(d) Cost	(e) Current Value
		Face Value/Shares	Maturity Date	Interest Rate		
	CARLYLE GROUP INC/THE	233	N/A	N/A	\$ 9,350	\$ 15,042
	CARMAX INC	57	N/A	N/A	4,819	3,497
	CARNIVAL CORP	433	N/A	N/A	7,145	13,808
	CARNIVAL CORP	60	N/A	N/A	1,636	1,913
	CARPENTER TECHNOLOGY CORP	55	N/A	N/A	9,360	13,248
	CARPENTER TECHNOLOGY CORP	1	N/A	N/A	276	241
	CARRIER GLOBAL CORP	334	N/A	N/A	24,309	21,777
	CARVANA CO	23	N/A	N/A	6,163	8,554
	CASEY'S GENERAL STORES INC	41	N/A	N/A	15,170	20,275
	CASEY'S GENERAL STORES INC	1	N/A	N/A	383	495
	CATERPILLAR INC	200	N/A	N/A	71,220	83,808
	CATERPILLAR INC	10	N/A	N/A	3,561	4,190
	CAVA GROUP INC	90	N/A	N/A	7,727	6,080
	CAVA GROUP INC	18	N/A	N/A	1,872	1,216
	CBOE GLOBAL MARKETS INC	45	N/A	N/A	9,243	10,618
	CBRE GROUP INC	125	N/A	N/A	14,393	20,265
	CBRE GROUP INC	5	N/A	N/A	697	811
	CDW CORP/DE	57	N/A	N/A	12,861	9,391
	CDW CORP/DE	1	N/A	N/A	226	165
	CELSIUS HOLDINGS INC	174	N/A	N/A	6,544	10,941
	CELSIUS HOLDINGS INC	31	N/A	N/A	1,112	1,949
	CENCORA INC	75	N/A	N/A	18,055	21,871
	CENCORA INC	33	N/A	N/A	8,085	9,623
	CENTENE CORP	204	N/A	N/A	16,081	5,924
	CENTERPOINT ENERGY INC	274	N/A	N/A	7,480	10,333
	CF INDUSTRIES HOLDINGS INC	73	N/A	N/A	6,066	6,324
	CH ROBINSON WORLDWIDE INC	50	N/A	N/A	5,176	6,435
	CHARLES RIVER LABORATORIES INT	22	N/A	N/A	4,351	3,593
	CHARLES SCHWAB CORP/THE	725	N/A	N/A	47,901	69,484
	CHARLES SCHWAB CORP/THE	29	N/A	N/A	1,888	2,779
	CHART INDUSTRIES INC	50	N/A	N/A	6,181	9,968
	CHARTER COMMUNICATIONS INC	41	N/A	N/A	14,249	10,889
	CHEMED CORP	17	N/A	N/A	9,970	7,785
	CHEMED CORP	1	N/A	N/A	586	458
	CHENIERE ENERGY INC	18	N/A	N/A	3,335	4,353
	CHEVRON CORP	810	N/A	N/A	118,238	130,086
	CHEWY INC	243	N/A	N/A	8,134	9,953
	CHEWY INC	37	N/A	N/A	1,585	1,516
	CHIPOTLE MEXICAN GRILL INC	573	N/A	N/A	32,134	24,146
	CHIPOTLE MEXICAN GRILL INC	241	N/A	N/A	13,515	10,156
	CHOICE HOTELS INTERNATIONAL IN	25	N/A	N/A	3,190	2,990
	CHOICE HOTELS INTERNATIONAL IN	1	N/A	N/A	128	120
	CHORD ENERGY CORP	64	N/A	N/A	9,500	7,033
	CHUBB LTD	158	N/A	N/A	44,900	43,461
	CHURCH & DWIGHT CO INC	104	N/A	N/A	10,596	9,689
	CHURCHILL DOWNS INC	80	N/A	N/A	11,110	8,298
	CHURCHILL DOWNS INC	9	N/A	N/A	1,251	934
	CIENA CORP	157	N/A	N/A	9,051	14,753
	CIGNA GROUP/THE	114	N/A	N/A	41,246	34,299
	CIGNA GROUP/THE	4	N/A	N/A	1,447	1,203
	CINCINNATI FINANCIAL CORP	67	N/A	N/A	9,181	10,291
	CINTAS CORP	146	N/A	N/A	29,387	30,664
	CINTAS CORP	62	N/A	N/A	12,557	13,022
	CIRRUS LOGIC INC	59	N/A	N/A	8,596	6,737
	CISCO SYSTEMS INC	1,684	N/A	N/A	85,109	116,348
	CITIGROUP INC	794	N/A	N/A	49,736	76,677
	CITIGROUP INC	60	N/A	N/A	5,063	5,794
	CITIZENS FINANCIAL GROUP INC	170	N/A	N/A	7,319	8,888
	CIVITAS RESOURCES INC	88	N/A	N/A	5,253	3,237
	CLEAN HARBORS INC	56	N/A	N/A	13,739	13,564
	CLEVELAND-CLIFFS INC	535	N/A	N/A	6,925	5,751
	CLOROX CO/THE	53	N/A	N/A	8,390	6,265
	CLOUDFLARE INC	56	N/A	N/A	5,059	11,688
	CME GROUP INC	154	N/A	N/A	33,224	41,043
	CMS ENERGY CORP	118	N/A	N/A	8,007	8,445
	CNH INDUSTRIAL NV	956	N/A	N/A	10,358	10,946
	CNO FINANCIAL GROUP INC	102	N/A	N/A	3,562	4,026
	CNX RESOURCES CORP	154	N/A	N/A	4,261	4,497
	COCA-COLA CO/THE	1,642	N/A	N/A	118,996	113,282
	COCA-COLA CO/THE	345	N/A	N/A	24,959	23,802
	COCA-COLA CONSOLIDATED INC	65	N/A	N/A	8,620	7,621
	COGNEX CORP	187	N/A	N/A	7,590	8,217
	COGNIZANT TECHNOLOGY SOLUTIONS	203	N/A	N/A	15,787	14,667

NEA MEMBERS INSURANCE PLAN & TRUST

SCHEDULE OF ASSETS (HELD AT END OF YEAR), (CONTINUED)

AUGUST 31, 2025

Form 5500, Part IV, Schedule H, Line 4i

E.I.N. 53-0115260
Plan No. 520

(a)	(b) Identity of issuer, borrower, lessor or similar party	(c) Description			(d) Cost	(e) Current Value
		Face Value/Shares	Maturity Date	Interest Rate		
	COHERENT CORP	171	N/A	N/A	\$ 13,533	\$ 15,470
	COINBASE GLOBAL INC	89	N/A	N/A	23,716	27,104
	COINBASE GLOBAL INC	4	N/A	N/A	733	1,218
	COLGATE-PALMOLIVE CO	338	N/A	N/A	35,997	28,416
	COLGATE-PALMOLIVE CO	69	N/A	N/A	7,349	5,801
	COLUMBIA BANKING SYSTEM INC	231	N/A	N/A	5,817	6,184
	COLUMBIA SPORTSWEAR CO	35	N/A	N/A	2,826	1,950
	COMCAST CORP	1,580	N/A	N/A	62,521	53,673
	COMERICA INC	145	N/A	N/A	8,869	10,234
	COMFORT SYSTEMS USA INC	39	N/A	N/A	13,786	27,432
	COMFORT SYSTEMS USA INC	6	N/A	N/A	2,121	4,220
	COMMERCE BANCSHARES INC/MO	135	N/A	N/A	8,223	8,362
	COMMERCIAL METALS CO	125	N/A	N/A	6,699	7,209
	COMMVAULT SYSTEMS INC	49	N/A	N/A	7,613	9,146
	CONAGRA BRANDS INC	204	N/A	N/A	6,365	3,903
	CONCENTRIX CORP	51	N/A	N/A	3,837	2,691
	CONFLUENT INC	43	N/A	N/A	1,017	854
	CONOCOPHILLIPS	532	N/A	N/A	60,452	52,652
	CONSOLIDATED EDISON INC	148	N/A	N/A	15,031	14,538
	CONSTELLATION BRANDS INC	66	N/A	N/A	15,887	10,688
	CONSTELLATION ENERGY CORP	133	N/A	N/A	26,161	40,961
	CONTRA ABIOMED INC	45	N/A	N/A	-	-
	COOPER COS INC/THE	85	N/A	N/A	8,987	5,729
	COPART INC	365	N/A	N/A	19,330	17,816
	COPART INC	149	N/A	N/A	7,862	7,273
	COPT DEFENSE PROPERTIES	124	N/A	N/A	3,685	3,569
	CORCEPT THERAPEUTICS INC	17	N/A	N/A	1,245	1,185
	CORE & MAIN INC	210	N/A	N/A	10,003	13,591
	CORE & MAIN INC	22	N/A	N/A	1,057	1,424
	CORNING INC	320	N/A	N/A	13,392	21,450
	CORPAY INC	29	N/A	N/A	9,151	9,444
	CORPAY INC	12	N/A	N/A	3,775	3,908
	CORTEVA INC	282	N/A	N/A	16,159	20,922
	COSTAR GROUP INC	175	N/A	N/A	13,528	15,661
	COSTAR GROUP INC	9	N/A	N/A	727	805
	COSTCO WHOLESALE CORP	189	N/A	N/A	168,660	178,287
	COSTCO WHOLESALE CORP	81	N/A	N/A	72,512	76,409
	COTERRA ENERGY INC	319	N/A	N/A	7,761	7,796
	COTY INC	395	N/A	N/A	3,705	1,691
	COUPANG INC	225	N/A	N/A	5,166	6,431
	COUSINS PROPERTIES INC	185	N/A	N/A	5,302	5,456
	CRANE CO	54	N/A	N/A	8,553	10,006
	CRANE NXT CO	54	N/A	N/A	3,173	3,225
	CREDIT ACCEPTANCE CORP	1	N/A	N/A	461	515
	CROCS INC	62	N/A	N/A	9,063	5,406
	CROWDSTRIKE HOLDINGS INC	105	N/A	N/A	29,709	44,489
	CROWDSTRIKE HOLDINGS INC	44	N/A	N/A	12,952	18,643
	CROWN CASTLE INC	186	N/A	N/A	20,836	18,440
	CROWN HOLDINGS INC	127	N/A	N/A	11,482	12,621
	CSX CORP	795	N/A	N/A	27,245	25,845
	CUBESMART	250	N/A	N/A	12,958	10,230
	CULLEN/FROST BANKERS INC	71	N/A	N/A	7,968	9,161
	CUMMINS INC	58	N/A	N/A	18,145	23,110
	CURTISS-WRIGHT CORP	42	N/A	N/A	13,266	20,082
	CVS HEALTH CORP	528	N/A	N/A	30,223	38,623
	CYKINETICS INC	130	N/A	N/A	7,350	4,593
	DANAHER CORP	274	N/A	N/A	73,791	56,395
	DARDEN RESTAURANTS INC	51	N/A	N/A	8,066	10,554
	DARDEN RESTAURANTS INC	20	N/A	N/A	3,746	4,139
	DARLING INGREDIENTS INC	165	N/A	N/A	6,817	5,603
	DATADOG INC	133	N/A	N/A	19,412	18,178
	DATADOG INC	56	N/A	N/A	6,558	7,654
	DAVITA INC	19	N/A	N/A	2,867	2,617
	DAVITA INC	6	N/A	N/A	906	827
	DAYFORCE INC	67	N/A	N/A	3,830	4,675
	DAYFORCE INC	2	N/A	N/A	114	140
	DECKERS OUTDOOR CORP	64	N/A	N/A	10,232	7,656
	DECKERS OUTDOOR CORP	26	N/A	N/A	4,157	3,110
	DEERE & CO	108	N/A	N/A	41,660	51,693
	DELL TECHNOLOGIES INC	132	N/A	N/A	15,254	16,124
	DELL TECHNOLOGIES INC	7	N/A	N/A	809	855
	DELTA AIR LINES INC	266	N/A	N/A	11,302	16,433
	DENTSPLY SIRONA INC	219	N/A	N/A	5,539	3,132

NEA MEMBERS INSURANCE PLAN & TRUST

SCHEDULE OF ASSETS (HELD AT END OF YEAR), (CONTINUED)

AUGUST 31, 2025

Form 5500, Part IV, Schedule H, Line 4i

E.I.N. 53-0115260
Plan No. 520

(a)	(b) Identity of issuer, borrower, lessor or similar party	(c) Description			(d) Cost	(e) Current Value
		Face Value/Shares	Maturity Date	Interest Rate		
	DEVON ENERGY CORP	270	N/A	N/A	\$ 12,091	\$ 9,747
	DEXCOM INC	166	N/A	N/A	11,510	12,506
	DEXCOM INC	68	N/A	N/A	4,715	5,123
	DIAMONDBACK ENERGY INC	76	N/A	N/A	14,828	11,306
	DICK'S SPORTING GOODS INC	63	N/A	N/A	14,885	13,406
	DIGITAL REALTY TRUST INC	131	N/A	N/A	19,861	21,961
	DOCUSIGN INC	223	N/A	N/A	15,439	17,095
	DOCUSIGN INC	27	N/A	N/A	1,599	2,070
	DOLBY LABORATORIES INC	67	N/A	N/A	4,835	4,803
	DOLLAR GENERAL CORP	94	N/A	N/A	7,799	10,223
	DOLLAR TREE INC	78	N/A	N/A	6,590	8,515
	DOMINION ENERGY INC	349	N/A	N/A	19,509	20,905
	DOMINO'S PIZZA INC	15	N/A	N/A	6,213	6,875
	DOMINO'S PIZZA INC	2	N/A	N/A	828	917
	DONALDSON CO INC	132	N/A	N/A	9,600	10,516
	DOORDASH INC	144	N/A	N/A	27,450	35,316
	DOORDASH INC	65	N/A	N/A	9,616	15,941
	DOUBLEVERIFY HOLDINGS INC	14	N/A	N/A	276	228
	DOVER CORP	59	N/A	N/A	10,976	10,553
	DOW INC	276	N/A	N/A	14,788	6,798
	DOXIMITY INC	147	N/A	N/A	5,634	9,987
	DOXIMITY INC	23	N/A	N/A	1,381	1,563
	DR HORTON INC	120	N/A	N/A	22,651	20,338
	DRAFTKINGS INC	87	N/A	N/A	3,119	4,174
	DROPBOX INC	207	N/A	N/A	5,204	6,015
	DROPBOX INC	11	N/A	N/A	277	320
	DT MIDSTREAM INC	112	N/A	N/A	8,912	11,668
	DTE ENERGY CO	88	N/A	N/A	11,002	12,025
	DUKE ENERGY CORP	330	N/A	N/A	37,604	40,422
	DUOLINGO INC	44	N/A	N/A	9,938	13,106
	DUOLINGO INC	7	N/A	N/A	1,565	2,085
	DUPONT DE NEMOURS INC	169	N/A	N/A	14,238	12,999
	DUTCH BROS INC	20	N/A	N/A	1,280	1,437
	DYNATRACE INC	331	N/A	N/A	16,800	16,749
	DYNATRACE INC	52	N/A	N/A	2,639	2,631
	EAGLE MATERIALS INC	37	N/A	N/A	9,537	8,543
	EAGLE MATERIALS INC	1	N/A	N/A	266	231
	EAST WEST BANCORP INC	152	N/A	N/A	12,779	15,981
	EASTGROUP PROPERTIES INC	58	N/A	N/A	10,763	9,834
	EASTMAN CHEMICAL CO	50	N/A	N/A	5,119	3,517
	EATON CORP PLC	166	N/A	N/A	50,950	57,957
	EBAY INC	193	N/A	N/A	11,406	17,488
	EHOSTAR CORP	148	N/A	N/A	4,221	9,145
	ECOLAB INC	107	N/A	N/A	27,090	29,643
	ECOLAB INC	11	N/A	N/A	2,785	3,047
	EDISON INTERNATIONAL	164	N/A	N/A	14,273	9,205
	EDWARDS LIFESCIENCES CORP	250	N/A	N/A	17,490	20,335
	ELANCO ANIMAL HEALTH INC	175	N/A	N/A	3,212	3,211
	ELASTIC NV	15	N/A	N/A	1,143	1,276
	ELECTRONIC ARTS INC	97	N/A	N/A	14,727	16,679
	ELEVANCE HEALTH INC	96	N/A	N/A	53,461	30,590
	ELF BEAUTY INC	62	N/A	N/A	9,287	7,750
	ELI LILLY & CO	334	N/A	N/A	320,647	244,682
	ELI LILLY & CO	146	N/A	N/A	138,869	106,957
	EMCOR GROUP INC	50	N/A	N/A	19,654	31,000
	EMCOR GROUP INC	3	N/A	N/A	1,223	1,860
	EMERSON ELECTRIC CO	242	N/A	N/A	25,504	31,944
	ENCOMPASS HEALTH CORP	111	N/A	N/A	10,329	13,515
	ENERSYS	44	N/A	N/A	4,460	4,517
	ENPHASE ENERGY INC	48	N/A	N/A	5,810	1,810
	ENPHASE ENERGY INC	23	N/A	N/A	2,784	867
	ENSIGN GROUP INC/THE	63	N/A	N/A	9,061	10,822
	ENTEGRIS INC	167	N/A	N/A	17,082	13,985
	ENTEGRIS INC	4	N/A	N/A	463	335
	ENTERGY CORP	182	N/A	N/A	10,983	16,032
	ENVISTA HOLDINGS CORP	180	N/A	N/A	3,272	3,812
	EOG RESOURCES INC	232	N/A	N/A	29,886	28,958
	EPAM SYSTEMS INC	25	N/A	N/A	5,019	4,409
	EPR PROPERTIES	83	N/A	N/A	3,940	4,503
	EQT CORP	253	N/A	N/A	9,085	13,116
	EQUIFAX INC	53	N/A	N/A	16,278	13,054
	EQUIFAX INC	4	N/A	N/A	1,229	985
	EQUINIX INC	41	N/A	N/A	34,209	32,234

NEA MEMBERS INSURANCE PLAN & TRUST

SCHEDULE OF ASSETS (HELD AT END OF YEAR), (CONTINUED)

AUGUST 31, 2025

Form 5500, Part IV, Schedule H, Line 4i

E.I.N. 53-0115260
Plan No. 520

(a)	(b) Identity of issuer, borrower, lessor or similar party	(c) Description			(d) Cost	(e) Current Value
		Face Value/Shares	Maturity Date	Interest Rate		
	EQUITABLE HOLDINGS INC	336	N/A	N/A	\$ 14,282	\$ 17,895
	EQUITABLE HOLDINGS INC	55	N/A	N/A	2,339	2,929
	EQUITY LIFESTYLE PROPERTIES IN	211	N/A	N/A	15,304	12,721
	EQUITY RESIDENTIAL	137	N/A	N/A	10,259	9,058
	ERIE INDEMNITY CO	11	N/A	N/A	5,731	3,898
	ESAB CORP	63	N/A	N/A	6,613	7,268
	ESSENT GROUP LTD	112	N/A	N/A	7,200	7,027
	ESSENTIAL UTILITIES INC	285	N/A	N/A	11,088	11,260
	ESSEX PROPERTY TRUST INC	27	N/A	N/A	8,148	7,296
	ESTEE LAUDER COS INC/THE	99	N/A	N/A	9,074	9,081
	ETSY INC	12	N/A	N/A	661	636
	EURONET WORLDWIDE INC	46	N/A	N/A	4,964	4,287
	EVERCORE INC	40	N/A	N/A	9,793	12,862
	EVEREST GROUP LTD	18	N/A	N/A	7,060	6,154
	EVEREST GROUP LTD	1	N/A	N/A	380	342
	EVERGY INC	88	N/A	N/A	5,204	6,271
	EVERSOURCE ENERGY	151	N/A	N/A	10,197	9,675
	EXACT SCIENCES CORP	1	N/A	N/A	62	47
	EXELIXIS INC	292	N/A	N/A	7,771	10,927
	EXELIXIS INC	41	N/A	N/A	1,067	1,534
	EXELON CORP	418	N/A	N/A	15,922	18,258
	EXLSERVICE HOLDINGS INC	177	N/A	N/A	6,468	7,749
	EXLSERVICE HOLDINGS INC	28	N/A	N/A	1,227	1,226
	EXPAND ENERGY CORP	89	N/A	N/A	9,555	8,613
	EXPEDIA GROUP INC	52	N/A	N/A	7,233	11,170
	EXPEDIA GROUP INC	21	N/A	N/A	2,921	4,511
	EXPEDITORS INTERNATIONAL OF WA	60	N/A	N/A	7,405	7,232
	EXPONENT INC	56	N/A	N/A	6,063	3,997
	EXTRA SPACE STORAGE INC	90	N/A	N/A	15,930	12,922
	EXXON MOBIL CORP	1,833	N/A	N/A	216,184	209,494
	F5 INC	25	N/A	N/A	5,079	7,829
	FABRINET	40	N/A	N/A	9,263	13,252
	FACTSET RESEARCH SYSTEMS INC	16	N/A	N/A	6,765	5,973
	FACTSET RESEARCH SYSTEMS INC	1	N/A	N/A	423	373
	FAIR ISAAC CORP	11	N/A	N/A	19,033	16,738
	FAIR ISAAC CORP	4	N/A	N/A	6,921	6,087
	FASTENAL CO	470	N/A	N/A	16,046	23,340
	FASTENAL CO	170	N/A	N/A	5,804	8,442
	FEDERAL REALTY INVESTMENT TRUS	32	N/A	N/A	3,680	3,218
	FEDERATED HERMES INC	86	N/A	N/A	3,148	4,567
	FEDEX CORP	96	N/A	N/A	28,682	22,183
	FERGUSON ENTERPRISES INC	2	N/A	N/A	411	462
	FIDELITY NATIONAL FINANCIAL IN	287	N/A	N/A	16,922	17,183
	FIDELITY NATIONAL INFORMATION	218	N/A	N/A	17,974	15,219
	FIFTH THIRD BANCORP	268	N/A	N/A	11,441	12,266
	FIRST AMERICAN FINANCIAL CORP	113	N/A	N/A	7,209	7,458
	FIRST FINANCIAL BANKSHARES INC	142	N/A	N/A	5,207	5,278
	FIRST HORIZON CORP	552	N/A	N/A	9,158	12,475
	FIRST INDUSTRIAL REALTY TRUST	146	N/A	N/A	8,283	7,680
	FIRST SOLAR INC	46	N/A	N/A	10,459	8,979
	FIRSTCASH HOLDINGS INC	43	N/A	N/A	5,161	6,333
	FIRSTENERGY CORP	212	N/A	N/A	9,311	9,247
	FISERV INC	235	N/A	N/A	41,031	32,472
	FISERV INC	27	N/A	N/A	4,714	3,731
	FIVE BELOW INC	61	N/A	N/A	4,601	8,851
	FLAGSTAR BANK NA	325	N/A	N/A	3,545	4,167
	FLEX LTD	423	N/A	N/A	17,476	22,681
	FLOOR & DECOR HOLDINGS INC	118	N/A	N/A	13,268	9,667
	FLOOR & DECOR HOLDINGS INC	6	N/A	N/A	675	492
	FLOWERS FOODS INC	216	N/A	N/A	5,020	3,249
	FLOWSERVE CORP	145	N/A	N/A	7,233	7,781
	FLUOR CORP	182	N/A	N/A	9,040	7,466
	FLUTTER ENTERTAINMENT PLC	26	N/A	N/A	7,246	7,986
	FNB CORP/PA	397	N/A	N/A	5,947	6,626
	FORD MOTOR CO	1,681	N/A	N/A	18,810	19,785
	FORTINET INC	271	N/A	N/A	20,788	21,347
	FORTINET INC	115	N/A	N/A	9,482	9,059
	FORTIVE CORP	140	N/A	N/A	7,880	6,700
	FORTUNE BRANDS INNOVATIONS INC	133	N/A	N/A	10,562	7,783
	FOX CORP	74	N/A	N/A	3,061	4,418
	FOX CORP	46	N/A	N/A	1,768	2,509
	FRANKLIN RESOURCES INC	128	N/A	N/A	2,591	3,284
	FREEDOM HOLDING CORP/NV	2	N/A	N/A	288	342

NEA MEMBERS INSURANCE PLAN & TRUST

SCHEDULE OF ASSETS (HELD AT END OF YEAR), (CONTINUED)

AUGUST 31, 2025

Form 5500, Part IV, Schedule H, Line 4i

E.I.N. 53-0115260
Plan No. 520

(a)	(b) Identity of issuer, borrower, lessor or similar party	(c) Description			(d) Cost	(e) Current Value
		Face Value/Shares	Maturity Date	Interest Rate		
	FREEPORT-MCMORAN INC	590	N/A	N/A	\$ 26,125	\$ 26,196
	FRESHPET INC	2	N/A	N/A	272	112
	FRONTIER COMMUNICATIONS PARENT	245	N/A	N/A	7,056	9,085
	FTAI AVIATION LTD	18	N/A	N/A	2,135	2,769
	FTI CONSULTING INC	37	N/A	N/A	8,412	6,240
	GAMESTOP CORP	449	N/A	N/A	10,468	10,062
	GAMING AND LEISURE PROPERTIES	303	N/A	N/A	15,751	14,547
	GAP INC/THE	236	N/A	N/A	5,293	5,194
	GARMIN LTD	65	N/A	N/A	11,914	15,718
	GARTNER INC	33	N/A	N/A	16,235	8,289
	GARTNER INC	14	N/A	N/A	6,798	3,517
	GATX CORP	40	N/A	N/A	5,656	6,732
	GE AEROSPACE	453	N/A	N/A	79,103	124,666
	GE AEROSPACE	191	N/A	N/A	45,336	52,563
	GE HEALTHCARE TECHNOLOGIES INC	182	N/A	N/A	15,437	13,419
	GE VERNOVA INC	117	N/A	N/A	23,517	71,717
	GE VERNOVA INC	50	N/A	N/A	25,983	30,649
	GEN DIGITAL INC	236	N/A	N/A	6,245	7,127
	GEN DIGITAL INC	10	N/A	N/A	293	302
	GENERAC HOLDINGS INC	26	N/A	N/A	4,070	4,817
	GENERAL DYNAMICS CORP	108	N/A	N/A	31,875	35,054
	GENERAL MILLS INC	227	N/A	N/A	16,410	11,198
	GENERAL MOTORS CO	417	N/A	N/A	20,758	24,432
	GENPACT LTD	177	N/A	N/A	7,008	8,025
	GENTEX CORP	241	N/A	N/A	7,494	6,750
	GENUINE PARTS CO	59	N/A	N/A	8,452	8,220
	GILEAD SCIENCES INC	530	N/A	N/A	41,870	59,874
	GILEAD SCIENCES INC	60	N/A	N/A	6,640	6,778
	GITLAB INC	22	N/A	N/A	1,128	1,056
	GLACIER BANCORP INC	131	N/A	N/A	6,155	6,439
	GLOBAL PAYMENTS INC	99	N/A	N/A	10,990	8,793
	GLOBANT SA	1	N/A	N/A	202	67
	GLOBE LIFE INC	36	N/A	N/A	3,782	5,038
	GLOBUS MEDICAL INC	125	N/A	N/A	9,088	7,659
	GODADDY INC	60	N/A	N/A	10,045	8,899
	GODADDY INC	24	N/A	N/A	4,018	3,559
	GOLDMAN SACHS GROUP INC/THE	131	N/A	N/A	66,843	97,628
	GOLDMAN SACHS GROUP INC/THE	3	N/A	N/A	1,531	2,236
	GOODYEAR TIRE & RUBBER CO/THE	315	N/A	N/A	2,778	2,671
	GRACO INC	186	N/A	N/A	15,503	15,883
	GRAHAM HOLDINGS CO	4	N/A	N/A	3,266	4,344
	GRAND CANYON EDUCATION INC	31	N/A	N/A	4,513	6,249
	GRAND CANYON EDUCATION INC	1	N/A	N/A	145	202
	GRAPHIC PACKAGING HOLDING CO	332	N/A	N/A	9,833	7,394
	GREIF INC	28	N/A	N/A	1,751	1,829
	GUIDEWIRE SOFTWARE INC	93	N/A	N/A	19,148	20,183
	GUIDEWIRE SOFTWARE INC	15	N/A	N/A	3,011	3,255
	GXO LOGISTICS INC	126	N/A	N/A	6,306	6,634
	H&R BLOCK INC	148	N/A	N/A	9,370	7,452
	H&R BLOCK INC	4	N/A	N/A	253	201
	HAEMONETICS CORP	55	N/A	N/A	4,157	3,000
	HALLIBURTON CO	359	N/A	N/A	11,161	8,160
	HALOZYME THERAPEUTICS INC	136	N/A	N/A	8,684	9,948
	HALOZYME THERAPEUTICS INC	22	N/A	N/A	1,149	1,609
	HAMILTON LANE INC	48	N/A	N/A	7,785	7,408
	HAMILTON LANE INC	4	N/A	N/A	577	617
	HANCOCK WHITNEY CORP	95	N/A	N/A	5,109	5,977
	HANOVER INSURANCE GROUP INC/TH	40	N/A	N/A	5,889	6,939
	HARLEY-DAVIDSON INC	116	N/A	N/A	4,263	3,378
	HARTFORD INSURANCE GROUP INC/T	123	N/A	N/A	14,280	16,274
	HASBRO INC	46	N/A	N/A	3,135	3,734
	HCA HEALTHCARE INC	74	N/A	N/A	29,274	29,893
	HCA HEALTHCARE INC	7	N/A	N/A	2,769	2,828
	HEALTHCARE REALTY TRUST INC	381	N/A	N/A	6,769	6,622
	HEALTHCARE REALTY TRUST INC	96	N/A	N/A	7,638	8,576
	HEALTHPEAK PROPERTIES INC	301	N/A	N/A	6,706	5,400
	HEICO CORP	8	N/A	N/A	2,052	2,496
	HEICO CORP	13	N/A	N/A	2,614	3,185
	HENRY SCHEIN INC	44	N/A	N/A	3,104	3,062
	HERSHEY CO/THE	63	N/A	N/A	12,163	11,576
	HERSHEY CO/THE	3	N/A	N/A	579	551
	HEWLETT PACKARD ENTERPRISE CO	557	N/A	N/A	10,789	12,571
	HEXCEL CORP	89	N/A	N/A	5,633	5,620

NEA MEMBERS INSURANCE PLAN & TRUST

SCHEDULE OF ASSETS (HELD AT END OF YEAR), (CONTINUED)

AUGUST 31, 2025

Form 5500, Part IV, Schedule H, Line 4i

E.I.N. 53-0115260
Plan No. 520

(a)	(b) Identity of issuer, borrower, lessor or similar party	(c) Description			(d) Cost	(e) Current Value
		Face Value/Shares	Maturity Date	Interest Rate		
	HF SINCLAIR CORP	176	N/A	N/A	\$ 8,537	\$ 8,955
	HILTON GRAND VACATIONS INC	64	N/A	N/A	2,469	3,041
	HILTON WORLDWIDE HOLDINGS INC	103	N/A	N/A	22,623	28,434
	HILTON WORLDWIDE HOLDINGS INC	42	N/A	N/A	10,188	11,595
	HIMS & HER'S HEALTH INC	217	N/A	N/A	7,719	9,190
	HOLOGIC INC	90	N/A	N/A	7,312	6,041
	HOME BANCSHARES INC/AR	194	N/A	N/A	5,399	5,773
	HOME DEPOT INC/THE	422	N/A	N/A	155,507	171,657
	HOME DEPOT INC/THE	138	N/A	N/A	50,798	56,134
	HONEYWELL INTERNATIONAL INC	273	N/A	N/A	56,759	59,924
	HORMEL FOODS CORP	124	N/A	N/A	4,036	3,155
	HOST HOTELS & RESORTS INC	302	N/A	N/A	5,345	5,197
	HOULIHAN LOKEY INC	60	N/A	N/A	9,468	11,955
	HOULIHAN LOKEY INC	3	N/A	N/A	522	598
	HOWMET AEROSPACE INC	173	N/A	N/A	16,929	30,119
	HOWMET AEROSPACE INC	72	N/A	N/A	12,963	12,535
	HP INC	389	N/A	N/A	13,954	11,102
	HUBBELL INC	23	N/A	N/A	9,198	9,913
	HUBSPOT INC	9	N/A	N/A	4,644	4,349
	HUMANA INC	51	N/A	N/A	18,078	15,487
	HUNTINGTON BANCSHARES INC/OH	621	N/A	N/A	9,296	11,060
	HUNTINGTON INGALLS INDUSTRIES	17	N/A	N/A	4,807	4,603
	HYATT HOTELS CORP	47	N/A	N/A	7,140	6,781
	IDACORP INC	60	N/A	N/A	6,140	7,506
	IDEX CORP	32	N/A	N/A	6,607	5,264
	IDEXX LABORATORIES INC	35	N/A	N/A	16,847	22,648
	IDEXX LABORATORIES INC	15	N/A	N/A	7,239	9,706
	ILLINOIS TOOL WORKS INC	114	N/A	N/A	28,863	30,170
	ILLINOIS TOOL WORKS INC	17	N/A	N/A	4,304	4,499
	ILLUMINA INC	175	N/A	N/A	22,995	17,493
	INCYTE CORP	68	N/A	N/A	4,465	5,753
	INCYTE CORP	7	N/A	N/A	476	592
	INDEPENDENCE REALTY TRUST INC	254	N/A	N/A	5,270	4,600
	INGERSOLL RAND INC	172	N/A	N/A	15,729	13,662
	INGREDION INC	71	N/A	N/A	9,536	9,197
	INSMED INC	30	N/A	N/A	2,985	4,083
	INSPERITY INC	39	N/A	N/A	3,666	2,154
	INSPIRE MEDICAL SYSTEMS INC	5	N/A	N/A	899	468
	INSULET CORP	30	N/A	N/A	6,083	10,196
	INSULET CORP	13	N/A	N/A	2,746	4,418
	INTEL CORP	1,825	N/A	N/A	40,223	44,439
	INTERACTIVE BROKERS GROUP INC	184	N/A	N/A	11,370	11,452
	INTERCONTINENTAL EXCHANGE INC	245	N/A	N/A	39,580	43,267
	INTERNATIONAL BANCSHARES CORP	59	N/A	N/A	3,728	4,221
	INTERNATIONAL BUSINESS MACHINE	392	N/A	N/A	79,235	95,448
	INTERNATIONAL FLAVORS & FRAGRA	109	N/A	N/A	11,335	7,359
	INTERNATIONAL PAPER CO	215	N/A	N/A	10,814	10,681
	INTERPUBLIC GROUP OF COS INC/T	161	N/A	N/A	5,250	4,321
	INTUIT INC	119	N/A	N/A	75,001	79,373
	INTUIT INC	50	N/A	N/A	31,765	33,350
	INTUITIVE SURGICAL INC	153	N/A	N/A	75,406	72,414
	INTUITIVE SURGICAL INC	65	N/A	N/A	32,144	30,764
	INVESCO LTD	192	N/A	N/A	3,281	4,203
	INVITATION HOMES INC	246	N/A	N/A	9,063	7,697
	IONIS PHARMACEUTICALS INC	25	N/A	N/A	1,192	1,066
	IPG PHOTONICS CORP	29	N/A	N/A	1,983	2,373
	IQVIA HOLDINGS INC	73	N/A	N/A	18,363	13,929
	IRIDIUM COMMUNICATIONS INC	110	N/A	N/A	2,838	2,738
	IRIDIUM COMMUNICATIONS INC	1	N/A	N/A	26	25
	IRON MOUNTAIN INC	125	N/A	N/A	14,158	11,541
	ITT INC	87	N/A	N/A	12,112	14,812
	J M SMUCKER CO/THE	45	N/A	N/A	5,161	4,973
	JABIL INC	48	N/A	N/A	5,245	9,832
	JABIL INC	12	N/A	N/A	2,500	2,458
	JACK HENRY & ASSOCIATES INC	31	N/A	N/A	5,364	5,061
	JACOBS SOLUTIONS INC	53	N/A	N/A	6,281	7,750
	JAMES HARDIE INDUSTRIES PLC	17	N/A	N/A	458	342
	JANUS HENDERSON GROUP PLC	140	N/A	N/A	5,265	6,205
	JAZZ PHARMACEUTICALS PLC	68	N/A	N/A	7,895	8,687
	JB HUNT TRANSPORT SERVICES INC	33	N/A	N/A	5,716	4,785
	JEFFERIES FINANCIAL GROUP INC	180	N/A	N/A	10,828	11,673
	JEFFERIES FINANCIAL GROUP INC	8	N/A	N/A	497	519
	JOHNSON & JOHNSON	1,022	N/A	N/A	169,509	181,068

NEA MEMBERS INSURANCE PLAN & TRUST

SCHEDULE OF ASSETS (HELD AT END OF YEAR), (CONTINUED)

AUGUST 31, 2025

Form 5500, Part IV, Schedule H, Line 4i

E.I.N. 53-0115260
Plan No. 520

(a)	(b) Identity of issuer, borrower, lessor or similar party	(c) Description			(d) Cost	(e) Current Value
		Face Value/Shares	Maturity Date	Interest Rate		
	JOHNSON CONTROLS INTERNATIONAL	274	N/A	N/A	\$ 19,961	\$ 29,288
	JONES LANG LASALLE INC	53	N/A	N/A	13,500	16,195
	JONES LANG LASALLE INC	2	N/A	N/A	525	611
	JPMORGAN CHASE & CO	1,181	N/A	N/A	265,489	355,977
	KB HOME	79	N/A	N/A	6,517	5,020
	KBR INC	143	N/A	N/A	9,918	7,216
	KBR INC	2	N/A	N/A	139	101
	KELLANOVA	112	N/A	N/A	9,028	8,904
	KEMPER CORP	66	N/A	N/A	4,126	3,541
	KENVUE INC	820	N/A	N/A	17,999	16,982
	KEURIG DR PEPPER INC	577	N/A	N/A	20,744	16,785
	KEYCORP	404	N/A	N/A	6,892	7,821
	KEYSIGHT TECHNOLOGIES INC	74	N/A	N/A	11,405	12,094
	KILROY REALTY CORP	117	N/A	N/A	4,244	4,866
	KIMBERLY-CLARK CORP	141	N/A	N/A	20,397	18,209
	KIMBERLY-CLARK CORP	21	N/A	N/A	3,038	2,712
	KIMCO REALTY CORP	286	N/A	N/A	6,652	6,432
	KINDER MORGAN INC	827	N/A	N/A	17,838	22,312
	KINSALE CAPITAL GROUP INC	25	N/A	N/A	12,274	11,436
	KINSALE CAPITAL GROUP INC	4	N/A	N/A	1,948	1,830
	KIRBY CORP	63	N/A	N/A	7,555	6,124
	KITE REALTY GROUP TRUST	242	N/A	N/A	6,241	5,522
	KKR & CO INC	285	N/A	N/A	35,274	39,755
	KKR & CO INC	30	N/A	N/A	3,713	4,185
	KLA CORP	57	N/A	N/A	46,708	49,704
	KLA CORP	24	N/A	N/A	19,666	20,928
	KNIFE RIVER CORP	62	N/A	N/A	4,890	5,022
	KNIGHT-SWIFT TRANSPORTATION HO	179	N/A	N/A	9,376	7,858
	KRAFT HEINZ CO/THE	375	N/A	N/A	13,105	10,489
	KROGER CO/THE	260	N/A	N/A	13,835	17,638
	KYNDRYL HOLDINGS INC	247	N/A	N/A	5,915	7,852
	L3HARRIS TECHNOLOGIES INC	81	N/A	N/A	19,170	22,487
	LABCORP HOLDINGS INC	36	N/A	N/A	8,276	10,008
	LAM RESEARCH CORP	537	N/A	N/A	44,088	53,781
	LAM RESEARCH CORP	232	N/A	N/A	19,138	23,235
	LAMAR ADVERTISING CO	97	N/A	N/A	12,201	12,343
	LAMAR ADVERTISING CO	15	N/A	N/A	1,828	1,909
	LAMB WESTON HOLDINGS INC	51	N/A	N/A	3,158	2,934
	LANDSTAR SYSTEM INC	39	N/A	N/A	7,120	5,161
	LANTHEUS HOLDINGS INC	77	N/A	N/A	8,198	4,227
	LAS VEGAS SANDS CORP	131	N/A	N/A	5,108	7,550
	LAS VEGAS SANDS CORP	61	N/A	N/A	2,426	3,515
	LATTICE SEMICONDUCTOR CORP	152	N/A	N/A	7,219	10,090
	LATTICE SEMICONDUCTOR CORP	20	N/A	N/A	947	1,328
	LAZARD INC	3	N/A	N/A	150	171
	LEAR CORP	59	N/A	N/A	6,882	6,490
	LEIDOS HOLDINGS INC	57	N/A	N/A	9,035	10,312
	LENNAR CORP	102	N/A	N/A	18,570	13,580
	LENNOX INTERNATIONAL INC	14	N/A	N/A	8,796	7,810
	LENNOX INTERNATIONAL INC	6	N/A	N/A	3,541	3,347
	LIBERTY BROADBAND CORP	1	N/A	N/A	61	61
	LIBERTY BROADBAND CORP	4	N/A	N/A	250	243
	LIBERTY MEDIA CORP-LIBERTY FOR	13	N/A	N/A	1,015	1,299
	LIGHT & WONDER INC	93	N/A	N/A	10,213	8,600
	LIGHT & WONDER INC	15	N/A	N/A	1,647	1,387
	LINCOLN ELECTRIC HOLDINGS INC	62	N/A	N/A	11,996	15,043
	LINDE PLC	200	N/A	N/A	95,650	95,658
	LITHIA MOTORS INC	29	N/A	N/A	8,734	9,764
	LITHIA MOTORS INC	1	N/A	N/A	336	337
	LITTELFUSE INC	28	N/A	N/A	7,555	7,275
	LIVANOVA PLC	60	N/A	N/A	2,959	3,382
	LIVE NATION ENTERTAINMENT INC	61	N/A	N/A	5,958	10,156
	LIVE NATION ENTERTAINMENT INC	27	N/A	N/A	2,637	4,495
	LKQ CORP	89	N/A	N/A	3,702	2,903
	LOAR HOLDINGS INC	6	N/A	N/A	437	424
	LOCKHEED MARTIN CORP	89	N/A	N/A	50,561	40,551
	LOCKHEED MARTIN CORP	11	N/A	N/A	6,249	5,012
	LOEWS CORP	77	N/A	N/A	6,309	7,454
	LOUISIANA-PACIFIC CORP	69	N/A	N/A	6,696	6,563
	LOWE'S COS INC	238	N/A	N/A	59,143	61,418
	LPL FINANCIAL HOLDINGS INC	14	N/A	N/A	3,217	5,103
	LULULEMON ATHLETICA INC	48	N/A	N/A	12,455	9,706
	LULULEMON ATHLETICA INC	11	N/A	N/A	2,854	2,224

NEA MEMBERS INSURANCE PLAN & TRUST

SCHEDULE OF ASSETS (HELD AT END OF YEAR), (CONTINUED)

AUGUST 31, 2025

Form 5500, Part IV, Schedule H, Line 4i

E.I.N. 53-0115260
Plan No. 520

(a)	(b) Identity of issuer, borrower, lessor or similar party	(c) Description			(d) Cost	(e) Current Value
		Face Value/Shares	Maturity Date	Interest Rate		
	LUMENTUM HOLDINGS INC	77	N/A	N/A	\$ 4,504	\$ 10,226
	LYFT INC	11	N/A	N/A	128	178
	LYONDELLBASELL INDUSTRIES NV	110	N/A	N/A	10,857	6,199
	M&T BANK CORP	71	N/A	N/A	12,220	14,318
	MACOM TECHNOLOGY SOLUTIONS HOL	66	N/A	N/A	7,180	8,458
	MACOM TECHNOLOGY SOLUTIONS HOL	2	N/A	N/A	284	256
	MACY'S INC	307	N/A	N/A	4,780	4,062
	MANHATTAN ASSOCIATES INC	67	N/A	N/A	17,611	14,434
	MANHATTAN ASSOCIATES INC	10	N/A	N/A	2,644	2,154
	MANPOWERGROUP INC	51	N/A	N/A	3,770	2,162
	MAPLEBEAR INC	182	N/A	N/A	8,100	7,893
	MARATHON PETROLEUM CORP	130	N/A	N/A	23,026	23,362
	MARKEL GROUP INC	1	N/A	N/A	1,601	1,959
	MARKETAXESS HOLDINGS INC	16	N/A	N/A	3,878	2,941
	MARRIOTT INTERNATIONAL INC/MD	97	N/A	N/A	22,765	25,982
	MARRIOTT INTERNATIONAL INC/MD	31	N/A	N/A	8,478	8,304
	MARRIOTT VACATIONS WORLDWIDE C	35	N/A	N/A	2,590	2,735
	MARSH & MCLENNAN COS INC	209	N/A	N/A	47,550	43,014
	MARSH & MCLENNAN COS INC	10	N/A	N/A	2,275	2,058
	MARTIN MARIETTA MATERIALS INC	26	N/A	N/A	13,888	16,026
	MARVELL TECHNOLOGY INC	12	N/A	N/A	915	754
	MARZETTI COMPANY/THE	22	N/A	N/A	3,766	4,017
	MASCO CORP	84	N/A	N/A	6,683	6,165
	MASIMO CORP	50	N/A	N/A	5,948	6,986
	MASIMO CORP	8	N/A	N/A	1,194	1,118
	MASTEC INC	68	N/A	N/A	7,693	12,355
	MASTEC INC	2	N/A	N/A	344	363
	MASTERCARD INC	346	N/A	N/A	167,236	205,970
	MASTERCARD INC	148	N/A	N/A	72,039	88,103
	MATADOR RESOURCES CO	128	N/A	N/A	7,268	6,446
	MATCH GROUP INC	113	N/A	N/A	4,205	4,219
	MATTEL INC	348	N/A	N/A	6,614	6,368
	MAXIMUS INC	62	N/A	N/A	5,720	5,451
	MCCORMICK & CO INC/MD	107	N/A	N/A	8,563	7,530
	MCDONALD'S CORP	305	N/A	N/A	88,041	95,630
	MCDONALD'S CORP	7	N/A	N/A	2,021	2,195
	MCKESSON CORP	53	N/A	N/A	29,737	36,392
	MCKESSON CORP	21	N/A	N/A	13,594	14,419
	MEDPACE HOLDINGS INC	26	N/A	N/A	9,254	12,363
	MEDPACE HOLDINGS INC	4	N/A	N/A	1,421	1,902
	MEDTRONIC PLC	546	N/A	N/A	48,365	50,674
	MERCK & CO INC	1,065	N/A	N/A	126,149	89,588
	META PLATFORMS INC	922	N/A	N/A	480,871	681,081
	META PLATFORMS INC	326	N/A	N/A	170,020	240,816
	METLIFE INC	240	N/A	N/A	18,595	19,526
	METTLER-TOLEDO INTERNATIONAL I	9	N/A	N/A	12,952	11,709
	MGIC INVESTMENT CORP	253	N/A	N/A	6,434	7,041
	MGM RESORTS INTERNATIONAL	73	N/A	N/A	2,744	2,897
	MICROCHIP TECHNOLOGY INC	221	N/A	N/A	18,157	14,365
	MICRON TECHNOLOGY INC	474	N/A	N/A	45,618	56,411
	MICROSOFT CORP	3,155	N/A	N/A	1,316,678	1,598,607
	MICROSOFT CORP	1,347	N/A	N/A	569,895	682,511
	MID-AMERICA APARTMENT COMMUNIT	50	N/A	N/A	8,119	7,291
	MIDDLEBY CORP/THE	59	N/A	N/A	8,297	8,074
	MKS INC	74	N/A	N/A	8,795	7,647
	MODERNA INC	142	N/A	N/A	10,991	3,421
	MOHAWK INDUSTRIES INC	22	N/A	N/A	3,413	2,919
	MOLINA HEALTHCARE INC	25	N/A	N/A	8,745	4,521
	MOLINA HEALTHCARE INC	5	N/A	N/A	1,751	904
	MOLSON COORS BEVERAGE CO	67	N/A	N/A	3,616	3,383
	MONDELEZ INTERNATIONAL INC	549	N/A	N/A	39,424	33,731
	MONGODB INC	1	N/A	N/A	289	316
	MONOLITHIC POWER SYSTEMS INC	21	N/A	N/A	19,628	17,551
	MONOLITHIC POWER SYSTEMS INC	9	N/A	N/A	8,412	7,522
	MONSTER BEVERAGE CORP	297	N/A	N/A	13,998	18,536
	MONSTER BEVERAGE CORP	126	N/A	N/A	6,332	7,864
	MOODY'S CORP	66	N/A	N/A	32,191	33,644
	MOODY'S CORP	28	N/A	N/A	13,657	14,273
	MORGAN STANLEY	527	N/A	N/A	54,602	79,303
	MORNINGSTAR INC	30	N/A	N/A	9,413	7,873
	MORNINGSTAR INC	3	N/A	N/A	945	787
	MOAIC CO/THE	112	N/A	N/A	3,200	3,741
	MOTOROLA SOLUTIONS INC	71	N/A	N/A	31,385	33,545

NEA MEMBERS INSURANCE PLAN & TRUST

SCHEDULE OF ASSETS (HELD AT END OF YEAR), (CONTINUED)

AUGUST 31, 2025

Form 5500, Part IV, Schedule H, Line 4i

E.I.N. 53-0115260
Plan No. 520

(a)	(b) Identity of issuer, borrower, lessor or similar party	(c) Description			(d) Cost	(e) Current Value
		Face Value/Shares	Maturity Date	Interest Rate		
	MOTOROLA SOLUTIONS INC	13	N/A	N/A	\$ 5,747	\$ 6,142
	MSA SAFETY INC	44	N/A	N/A	8,033	7,506
	MSC INDUSTRIAL DIRECT CO INC	49	N/A	N/A	4,030	4,421
	MSCI INC	33	N/A	N/A	19,159	18,735
	MSCI INC	7	N/A	N/A	4,064	3,974
	MUELLER INDUSTRIES INC	122	N/A	N/A	10,117	11,705
	MURPHY OIL CORP	141	N/A	N/A	5,256	3,505
	MURPHY USA INC	20	N/A	N/A	10,393	7,530
	MURPHY USA INC	3	N/A	N/A	1,559	1,130
	NASDAQ INC	175	N/A	N/A	12,782	16,580
	NATERA INC	23	N/A	N/A	2,956	3,870
	NATIONAL FUEL GAS CO	100	N/A	N/A	5,982	8,674
	NATIONAL STORAGE AFFILIATES TR	77	N/A	N/A	3,599	2,482
	NCINO INC	9	N/A	N/A	313	289
	NETAPP INC	88	N/A	N/A	10,623	9,926
	NETAPP INC	16	N/A	N/A	1,925	1,805
	NETFLIX INC	181	N/A	N/A	126,944	218,693
	NETFLIX INC	77	N/A	N/A	55,243	93,035
	NEUROCRINE BIOSCIENCES INC	110	N/A	N/A	13,990	15,356
	NEUROCRINE BIOSCIENCES INC	15	N/A	N/A	1,906	2,094
	NEW JERSEY RESOURCES CORP	110	N/A	N/A	5,094	5,202
	NEW YORK TIMES CO/THE	180	N/A	N/A	9,887	10,771
	NEWMARKET CORP	9	N/A	N/A	5,142	7,443
	NEWMONT CORP	468	N/A	N/A	24,987	34,819
	NEWS CORP	162	N/A	N/A	4,589	4,764
	NEWS CORP	49	N/A	N/A	1,442	1,660
	NEXSTAR MEDIA GROUP INC	32	N/A	N/A	5,503	6,545
	NEXSTAR MEDIA GROUP INC	2	N/A	N/A	342	409
	NEXTERA ENERGY INC	865	N/A	N/A	69,641	62,323
	NEXTPOWER INC	158	N/A	N/A	6,353	10,627
	NIKE INC	496	N/A	N/A	41,327	38,376
	NISOURCE INC	192	N/A	N/A	6,348	8,116
	NNN REIT INC	207	N/A	N/A	9,655	8,882
	NORDSON CORP	23	N/A	N/A	5,901	5,177
	NORFOLK SOUTHERN CORP	97	N/A	N/A	24,848	27,158
	NORTHERN TRUST CORP	84	N/A	N/A	7,662	11,028
	NORTHROP GRUMMAN CORP	58	N/A	N/A	30,346	34,222
	NORTHWESTERN ENERGY GROUP INC	67	N/A	N/A	3,644	3,853
	NORWEGIAN CRUISE LINE HOLDINGS	183	N/A	N/A	3,274	4,546
	NORWEGIAN CRUISE LINE HOLDINGS	77	N/A	N/A	1,378	1,913
	NOV INC	411	N/A	N/A	7,303	5,462
	NOVANTA INC	40	N/A	N/A	7,331	4,656
	NRG ENERGY INC	83	N/A	N/A	7,056	12,081
	NRG ENERGY INC	35	N/A	N/A	4,606	5,095
	NU HOLDINGS LTD/CAYMAN ISLANDS	572	N/A	N/A	8,563	8,466
	NUCOR CORP	99	N/A	N/A	15,039	14,724
	NUTANIX INC	12	N/A	N/A	758	807
	NVENT ELECTRIC PLC	182	N/A	N/A	12,369	16,451
	NVIDIA CORP	10,353	N/A	N/A	1,235,838	1,803,286
	NVIDIA CORP	4,249	N/A	N/A	519,821	740,091
	NVR INC	2	N/A	N/A	18,345	16,235
	NXP SEMICONDUCTORS NV	108	N/A	N/A	27,687	25,364
	OCCIDENTAL PETROLEUM CORP	285	N/A	N/A	16,239	13,569
	OGE ENERGY CORP	222	N/A	N/A	8,815	9,915
	OKTA INC	185	N/A	N/A	20,700	17,162
	OKTA INC	12	N/A	N/A	945	1,113
	OLD DOMINION FREIGHT LINE INC	76	N/A	N/A	14,653	11,474
	OLD DOMINION FREIGHT LINE INC	1	N/A	N/A	193	151
	OLD NATIONAL BANCORP/IN	350	N/A	N/A	6,953	8,012
	OLD REPUBLIC INTERNATIONAL COR	252	N/A	N/A	9,081	10,072
	OLIN CORP	127	N/A	N/A	5,342	3,005
	OLLIE'S BARGAIN OUTLET HOLDING	68	N/A	N/A	6,090	8,625
	OMEGA HEALTHCARE INVESTORS INC	320	N/A	N/A	12,605	13,622
	OMNICOM GROUP INC	83	N/A	N/A	8,336	6,501
	ON HOLDING AG	39	N/A	N/A	2,047	1,758
	ON SEMICONDUCTOR CORP	174	N/A	N/A	13,549	8,629
	ONE GAS INC	66	N/A	N/A	4,563	5,049
	ONEOK INC	260	N/A	N/A	24,024	19,859
	ONTO INNOVATION INC	54	N/A	N/A	11,514	5,724
	ONTO INNOVATION INC	2	N/A	N/A	400	212
	OPTION CARE HEALTH INC	171	N/A	N/A	5,475	4,904
	ORACLE CORP	689	N/A	N/A	97,447	155,804
	ORACLE CORP	300	N/A	N/A	43,784	67,839

NEA MEMBERS INSURANCE PLAN & TRUST

SCHEDULE OF ASSETS (HELD AT END OF YEAR), (CONTINUED)

AUGUST 31, 2025

Form 5500, Part IV, Schedule H, Line 4i

E.I.N. 53-0115260
Plan No. 520

(a)	(b) Identity of issuer, borrower, lessor or similar party	(c) Description			(d) Cost	(e) Current Value
		Face Value/Shares	Maturity Date	Interest Rate		
	O'REILLY AUTOMOTIVE INC	363	N/A	N/A	\$ 27,345	\$ 37,636
	O'REILLY AUTOMOTIVE INC	142	N/A	N/A	10,829	14,723
	ORMAT TECHNOLOGIES INC	63	N/A	N/A	4,670	5,789
	OSHKOSH CORP	71	N/A	N/A	7,662	9,895
	OTIS WORLDWIDE CORP	170	N/A	N/A	16,097	14,685
	OVINTIV INC	287	N/A	N/A	12,252	12,088
	OWENS CORNING	94	N/A	N/A	15,861	14,116
	PACCAR INC	224	N/A	N/A	21,544	22,396
	PACKAGING CORP OF AMERICA	38	N/A	N/A	7,963	8,282
	PALANTIR TECHNOLOGIES INC	904	N/A	N/A	37,544	141,666
	PALANTIR TECHNOLOGIES INC	396	N/A	N/A	16,894	62,057
	PALO ALTO NETWORKS INC	276	N/A	N/A	50,055	52,584
	PALO ALTO NETWORKS INC	119	N/A	N/A	21,713	22,672
	PARAMOUNT SKYDANCE CORP	132	N/A	N/A	1,386	1,940
	PARK HOTELS & RESORTS INC	218	N/A	N/A	3,331	2,564
	PARKER-HANNIFIN CORP	55	N/A	N/A	33,011	41,764
	PARSONS CORP	51	N/A	N/A	5,095	4,085
	PAYCHEX INC	137	N/A	N/A	17,974	19,105
	PAYCHEX INC	18	N/A	N/A	2,362	2,510
	PAYCOM SOFTWARE INC	20	N/A	N/A	3,256	4,543
	PAYCOM SOFTWARE INC	5	N/A	N/A	814	1,136
	PAYLOCITY HOLDING CORP	48	N/A	N/A	7,761	8,603
	PAYLOCITY HOLDING CORP	7	N/A	N/A	1,130	1,255
	PAYPAL HOLDINGS INC	416	N/A	N/A	30,131	29,199
	PBF ENERGY INC	108	N/A	N/A	3,568	2,951
	PEGASYS INC	98	N/A	N/A	4,871	5,313
	PEGASYS INC	5	N/A	N/A	177	271
	PENSKE AUTOMOTIVE GROUP INC	21	N/A	N/A	3,572	3,873
	PENTAIR PLC	71	N/A	N/A	6,297	7,635
	PENUMBRA INC	43	N/A	N/A	8,700	11,724
	PENUMBRA INC	6	N/A	N/A	1,214	1,636
	PEPSICO INC	583	N/A	N/A	100,789	86,663
	PEPSICO INC	34	N/A	N/A	5,850	5,054
	PERFORMANCE FOOD GROUP CO	172	N/A	N/A	12,858	17,441
	PERFORMANCE FOOD GROUP CO	3	N/A	N/A	224	304
	PERMIAN RESOURCES CORP	697	N/A	N/A	9,857	9,960
	PERRIGO CO PLC	150	N/A	N/A	4,365	3,561
	PFIZER INC	2,414	N/A	N/A	70,030	59,771
	PG&E CORP	916	N/A	N/A	18,045	13,996
	PHILIP MORRIS INTERNATIONAL IN	662	N/A	N/A	81,618	110,640
	PHILLIPS 66	175	N/A	N/A	24,554	23,377
	PHILLIPS 66	5	N/A	N/A	596	668
	PILGRIM'S PRIDE CORP	44	N/A	N/A	2,050	1,956
	PINNACLE FINANCIAL PARTNERS IN	85	N/A	N/A	8,463	8,264
	PINNACLE WEST CAPITAL CORP	48	N/A	N/A	4,201	4,289
	PINTEREST INC	53	N/A	N/A	1,688	1,941
	PLANET FITNESS INC	93	N/A	N/A	7,553	9,746
	PLANET FITNESS INC	15	N/A	N/A	1,411	1,572
	PNC FINANCIAL SERVICES GROUP I	168	N/A	N/A	31,095	34,850
	POLARIS INC	57	N/A	N/A	4,825	3,225
	POOL CORP	16	N/A	N/A	5,626	4,971
	POOL CORP	1	N/A	N/A	349	311
	PORTLAND GENERAL ELECTRIC CO	120	N/A	N/A	5,718	5,134
	POST HOLDINGS INC	50	N/A	N/A	5,789	5,658
	POTLATCHDELTIC CORP	79	N/A	N/A	3,433	3,320
	POWER INTEGRATIONS INC	62	N/A	N/A	4,160	2,796
	PPG INDUSTRIES INC	100	N/A	N/A	12,973	11,123
	PPL CORP	316	N/A	N/A	10,084	11,525
	PRIMERICA INC	37	N/A	N/A	9,746	9,966
	PRINCIPAL FINANCIAL GROUP INC	82	N/A	N/A	6,676	6,602
	PROCORE TECHNOLOGIES INC	18	N/A	N/A	1,167	1,251
	PROCTER & GAMBLE CO/THE	996	N/A	N/A	170,854	156,412
	PROGRESSIVE CORP/THE	249	N/A	N/A	62,798	61,518
	PROGRESSIVE CORP/THE	5	N/A	N/A	1,265	1,235
	PROLOGIS INC	393	N/A	N/A	50,233	44,716
	PROSPERITY BANCSHARES INC	105	N/A	N/A	7,726	7,259
	PRUDENTIAL FINANCIAL INC	153	N/A	N/A	18,537	16,778
	PTC INC	51	N/A	N/A	9,134	10,889
	PTC INC	2	N/A	N/A	358	427
	PUBLIC SERVICE ENTERPRISE GROU	213	N/A	N/A	17,200	17,536
	PUBLIC STORAGE	67	N/A	N/A	23,029	19,738
	PUBLIC STORAGE	4	N/A	N/A	1,375	1,178
	PULTEGROUP INC	88	N/A	N/A	11,585	11,618

NEA MEMBERS INSURANCE PLAN & TRUST

SCHEDULE OF ASSETS (HELD AT END OF YEAR), (CONTINUED)

AUGUST 31, 2025

Form 5500, Part IV, Schedule H, Line 4i

E.I.N. 53-0115260
Plan No. 520

(a)	(b) Identity of issuer, borrower, lessor or similar party	(c) Description			(d) Cost	(e) Current Value
		Face Value/Shares	Maturity Date	Interest Rate		
	PURE STORAGE INC	342	N/A	N/A	\$ 17,604	\$ 26,543
	PURE STORAGE INC	47	N/A	N/A	2,405	3,648
	PVH CORP	53	N/A	N/A	5,231	4,469
	QUALCOMM INC	466	N/A	N/A	81,690	74,900
	QUALCOMM INC	45	N/A	N/A	7,862	7,233
	QUALYS INC	40	N/A	N/A	5,007	5,432
	QUANTA SERVICES INC	63	N/A	N/A	17,333	23,811
	QUANTA SERVICES INC	21	N/A	N/A	7,157	7,937
	QUEST DIAGNOSTICS INC	47	N/A	N/A	7,378	8,537
	RALPH LAUREN CORP	16	N/A	N/A	2,740	4,751
	RALPH LAUREN CORP	1	N/A	N/A	276	297
	RAMBUS INC	117	N/A	N/A	5,232	8,631
	RANGE RESOURCES CORP	256	N/A	N/A	7,649	8,773
	RAYMOND JAMES FINANCIAL INC	77	N/A	N/A	9,207	13,047
	RAYONIER INC	145	N/A	N/A	4,403	3,811
	RB GLOBAL INC	205	N/A	N/A	17,686	23,481
	RBC BEARINGS INC	35	N/A	N/A	10,445	13,649
	RBC BEARINGS INC	1	N/A	N/A	381	390
	REALTY INCOME CORP	384	N/A	N/A	23,747	22,564
	REDDIT INC	21	N/A	N/A	3,003	4,727
	REGAL REXNORD CORP	74	N/A	N/A	12,403	11,050
	REGENCY CENTERS CORP	70	N/A	N/A	5,088	5,075
	REGENERON PHARMACEUTICALS INC	45	N/A	N/A	53,311	26,132
	REGIONS FINANCIAL CORP	392	N/A	N/A	9,181	10,737
	REINSURANCE GROUP OF AMERICA I	73	N/A	N/A	16,097	14,220
	RELIANCE INC	58	N/A	N/A	16,623	17,148
	RENAISSANCE HOLDINGS LTD	54	N/A	N/A	13,759	13,121
	REPLUGEN CORP	58	N/A	N/A	8,754	7,095
	REPLUGEN CORP	1	N/A	N/A	151	122
	REPUBLIC SERVICES INC	86	N/A	N/A	17,906	20,121
	RESMED INC	63	N/A	N/A	15,436	17,294
	RESMED INC	6	N/A	N/A	1,470	1,647
	RESTAURANT BRANDS INTERNATIONA	37	N/A	N/A	2,418	2,343
	REVVITY INC	52	N/A	N/A	6,372	4,686
	REXFORD INDUSTRIAL REALTY INC	261	N/A	N/A	12,872	10,808
	RH	17	N/A	N/A	4,355	3,836
	RH	1	N/A	N/A	254	226
	RINGCENTRAL INC	14	N/A	N/A	467	427
	RLI CORP	92	N/A	N/A	7,088	6,231
	RLI CORP	1	N/A	N/A	77	68
	ROBINHOOD MARKETS INC	17	N/A	N/A	1,412	1,769
	ROBLOX CORP	102	N/A	N/A	5,128	12,708
	ROCKET LAB CORP	71	N/A	N/A	2,512	3,451
	ROCKWELL AUTOMATION INC	49	N/A	N/A	13,329	16,828
	ROCKWELL AUTOMATION INC	2	N/A	N/A	544	687
	ROIVANT SCIENCES LTD	455	N/A	N/A	5,540	5,428
	ROKU INC	3	N/A	N/A	203	290
	ROLLINS INC	110	N/A	N/A	5,520	6,219
	ROLLINS INC	49	N/A	N/A	2,437	2,770
	ROPER TECHNOLOGIES INC	46	N/A	N/A	25,503	24,210
	ROSS STORES INC	141	N/A	N/A	21,236	20,750
	ROSS STORES INC	11	N/A	N/A	1,657	1,619
	ROYAL CARIBBEAN CRUISES LTD	105	N/A	N/A	17,648	38,138
	ROYAL CARIBBEAN CRUISES LTD	46	N/A	N/A	12,234	16,708
	ROYAL GOLD INC	73	N/A	N/A	10,257	13,109
	RPM INTERNATIONAL INC	142	N/A	N/A	16,500	17,794
	RTX CORP	566	N/A	N/A	69,810	89,768
	RUBRIK INC	10	N/A	N/A	874	894
	RYAN SPECIALTY HOLDINGS INC	117	N/A	N/A	7,545	6,614
	RYAN SPECIALTY HOLDINGS INC	18	N/A	N/A	1,163	1,018
	RYDER SYSTEM INC	46	N/A	N/A	6,681	8,626
	S&P GLOBAL INC	134	N/A	N/A	68,774	73,491
	SABRA HEALTH CARE REIT INC	261	N/A	N/A	4,447	4,988
	SAIA INC	30	N/A	N/A	11,373	8,894
	SALESFORCE INC	406	N/A	N/A	102,677	104,038
	SALESFORCE INC	19	N/A	N/A	4,822	4,869
	SAMSARA INC	48	N/A	N/A	1,901	1,735
	SAREPTA THERAPEUTICS INC	16	N/A	N/A	2,172	291
	SBA COMMUNICATIONS CORP	46	N/A	N/A	10,426	9,423
	SCIENCE APPLICATIONS INTERNATI	52	N/A	N/A	6,791	6,120
	SCOTTS MIRACLE-GRO CO/THE	47	N/A	N/A	3,336	2,877
	SEAGATE TECHNOLOGY HOLDINGS PL	83	N/A	N/A	8,263	13,894
	SEI INVESTMENTS CO	106	N/A	N/A	7,169	9,358

NEA MEMBERS INSURANCE PLAN & TRUST

SCHEDULE OF ASSETS (HELD AT END OF YEAR), (CONTINUED)

AUGUST 31, 2025

Form 5500, Part IV, Schedule H, Line 4i

E.I.N. 53-0115260
Plan No. 520

(a)	(b) Identity of issuer, borrower, lessor or similar party	(c) Description			(d) Cost	(e) Current Value
		Face Value/Shares	Maturity Date	Interest Rate		
	SELECTIVE INSURANCE GROUP INC	67	N/A	N/A	\$ 6,096	\$ 5,241
	SEMPRA	277	N/A	N/A	22,634	22,869
	SENSATA TECHNOLOGIES HOLDING P	155	N/A	N/A	5,870	5,044
	SENTINELONE INC	38	N/A	N/A	724	717
	SERVICE CORP INTERNATIONAL/US	159	N/A	N/A	12,445	12,601
	SERVICENOW INC	88	N/A	N/A	75,240	80,736
	SERVICENOW INC	38	N/A	N/A	32,657	34,863
	SHARKNINJA INC	2	N/A	N/A	204	234
	SHERWIN-WILLIAMS CO/THE	99	N/A	N/A	36,568	36,217
	SHERWIN-WILLIAMS CO/THE	38	N/A	N/A	14,036	13,902
	SHIFT4 PAYMENTS INC	76	N/A	N/A	8,163	6,873
	SHIFT4 PAYMENTS INC	10	N/A	N/A	875	904
	SILGAN HOLDINGS INC	89	N/A	N/A	4,652	4,176
	SILICON LABORATORIES INC	36	N/A	N/A	4,261	4,837
	SIMON PROPERTY GROUP INC	130	N/A	N/A	21,756	23,486
	SIMON PROPERTY GROUP INC	14	N/A	N/A	2,341	2,529
	SIMPSON MANUFACTURING CO INC	47	N/A	N/A	8,615	8,983
	SITEONE LANDSCAPE SUPPLY INC	2	N/A	N/A	284	286
	SKECHERS USA INC	145	N/A	N/A	9,930	9,147
	SKYWORKS SOLUTIONS INC	68	N/A	N/A	7,452	5,096
	SLB LTD	574	N/A	N/A	25,250	21,146
	SLM CORP	222	N/A	N/A	4,927	6,944
	SMURFIT WESTROCK PLC	210	N/A	N/A	9,958	9,946
	SNAP-ON INC	22	N/A	N/A	6,242	7,155
	SNOWFLAKE INC	56	N/A	N/A	6,492	13,365
	SOFI TECHNOLOGIES INC	29	N/A	N/A	445	741
	SOLVENTUM CORP	59	N/A	N/A	3,782	4,312
	SOMNIGROUP INTERNATIONAL INC	227	N/A	N/A	12,159	19,057
	SOMNIGROUP INTERNATIONAL INC	36	N/A	N/A	1,948	3,022
	SONOCO PRODUCTS CO	108	N/A	N/A	6,082	5,103
	SOTERA HEALTH CO	169	N/A	N/A	2,647	2,767
	SOUTHERN CO/THE	468	N/A	N/A	40,435	43,196
	SOUTHSTATE CORP	109	N/A	N/A	10,586	11,125
	SOUTHWEST AIRLINES CO	231	N/A	N/A	6,681	7,600
	SOUTHWEST AIRLINES CO	9	N/A	N/A	289	296
	SOUTHWEST GAS HOLDINGS INC	66	N/A	N/A	4,800	5,272
	SPIRE INC	64	N/A	N/A	4,222	4,902
	SPIRIT AEROSYSTEMS HOLDINGS IN	2	N/A	N/A	70	83
	SPOTIFY TECHNOLOGY SA	28	N/A	N/A	10,539	19,093
	SPROUTS FARMERS MARKET INC	108	N/A	N/A	11,273	15,178
	SPROUTS FARMERS MARKET INC	17	N/A	N/A	2,756	2,389
	STAG INDUSTRIAL INC	206	N/A	N/A	8,248	7,591
	STANLEY BLACK & DECKER INC	65	N/A	N/A	6,653	4,829
	STARBUCKS CORP	482	N/A	N/A	45,583	42,508
	STARBUCKS CORP	27	N/A	N/A	2,553	2,381
	STARWOOD PROPERTY TRUST INC	374	N/A	N/A	7,769	7,581
	STATE STREET CORP	124	N/A	N/A	10,800	14,256
	STEEL DYNAMICS INC	60	N/A	N/A	7,171	7,855
	STEEL DYNAMICS INC	2	N/A	N/A	262	262
	STERIS PLC	42	N/A	N/A	10,126	10,293
	STIFEL FINANCIAL CORP	114	N/A	N/A	10,076	13,143
	STRATEGY INC	2	N/A	N/A	398	669
	STRYKER CORP	145	N/A	N/A	52,261	56,754
	STRYKER CORP	16	N/A	N/A	5,767	6,263
	SUMMIT THERAPEUTICS INC	21	N/A	N/A	433	498
	SUN COMMUNITIES INC	4	N/A	N/A	507	507
	SUPER MICRO COMPUTER INC	220	N/A	N/A	9,629	9,139
	SUPER MICRO COMPUTER INC	42	N/A	N/A	1,838	1,745
	SYNAPTICS INC	43	N/A	N/A	3,501	3,004
	SYNCHRONY FINANCIAL	155	N/A	N/A	7,790	11,833
	SYNOPSIS INC	77	N/A	N/A	40,864	46,471
	SYNOPSIS INC	25	N/A	N/A	12,990	15,088
	SYNOVUS FINANCIAL CORP	154	N/A	N/A	7,162	7,948
	SYSCO CORP	209	N/A	N/A	16,296	16,818
	SYSCO CORP	47	N/A	N/A	3,665	3,782
	T ROWE PRICE GROUP INC	95	N/A	N/A	10,074	10,224
	TAKE-TWO INTERACTIVE SOFTWARE	68	N/A	N/A	10,996	15,862
	TAKE-TWO INTERACTIVE SOFTWARE	11	N/A	N/A	2,656	2,566
	TALEN ENERGY CORP	51	N/A	N/A	19,457	19,325
	TAPESTRY INC	88	N/A	N/A	3,605	8,960
	TAPESTRY INC	34	N/A	N/A	2,962	3,462
	TARGA RESOURCES CORP	93	N/A	N/A	13,662	15,602

NEA MEMBERS INSURANCE PLAN & TRUST

SCHEDULE OF ASSETS (HELD AT END OF YEAR), (CONTINUED)

AUGUST 31, 2025

Form 5500, Part IV, Schedule H, Line 4i

E.I.N. 53-0115260
Plan No. 520

(a)	(b) Identity of issuer, borrower, lessor or similar party	(c) Description			(d) Cost	(e) Current Value
		Face Value/Shares	Maturity Date	Interest Rate		
	TARGA RESOURCES CORP	38	N/A	N/A	\$ 5,642	\$ 6,375
	TARGET CORP	195	N/A	N/A	29,956	18,716
	TAYLOR MORRISON HOME CORP	111	N/A	N/A	7,474	7,478
	TD SYNEX CORP	83	N/A	N/A	10,078	12,290
	TE CONNECTIVITY PLC	129	N/A	N/A	19,814	26,639
	TELEDYNE TECHNOLOGIES INC	20	N/A	N/A	8,656	10,763
	TEMPUS AI INC	14	N/A	N/A	931	1,062
	TENET HEALTHCARE CORP	103	N/A	N/A	17,098	18,986
	TERADATA CORP	3	N/A	N/A	85	63
	TERADYNE INC	66	N/A	N/A	9,024	7,804
	TEREX CORP	73	N/A	N/A	4,144	3,646
	TESLA INC	1,192	N/A	N/A	257,107	397,973
	TESLA INC	511	N/A	N/A	112,362	170,608
	TETRA TECH INC	286	N/A	N/A	13,489	10,416
	TETRA TECH INC	10	N/A	N/A	475	364
	TEXAS CAPITAL BANCSHARES INC	51	N/A	N/A	3,428	4,415
	TEXAS INSTRUMENTS INC	387	N/A	N/A	82,950	78,360
	TEXAS INSTRUMENTS INC	67	N/A	N/A	14,012	13,566
	TEXAS PACIFIC LAND CORP	8	N/A	N/A	11,469	7,468
	TEXAS PACIFIC LAND CORP	4	N/A	N/A	3,745	3,734
	TEXAS ROADHOUSE INC	74	N/A	N/A	12,490	12,769
	TEXAS ROADHOUSE INC	11	N/A	N/A	1,856	1,898
	TEXTRON INC	71	N/A	N/A	6,475	5,691
	THERMO FISHER SCIENTIFIC INC	161	N/A	N/A	99,026	79,328
	THOR INDUSTRIES INC	59	N/A	N/A	6,328	6,466
	TIMKEN CO/THE	70	N/A	N/A	5,917	5,406
	TJX COS INC/THE	477	N/A	N/A	55,938	65,163
	TJX COS INC/THE	101	N/A	N/A	11,844	13,798
	TKO GROUP HOLDINGS INC	28	N/A	N/A	4,197	5,308
	TKO GROUP HOLDINGS INC	5	N/A	N/A	836	948
	T-MOBILE US INC	204	N/A	N/A	40,539	51,406
	TOAST INC	81	N/A	N/A	2,065	3,653
	TOLL BROTHERS INC	110	N/A	N/A	15,848	15,290
	TOPBUILD CORP	32	N/A	N/A	12,521	13,464
	TOPBUILD CORP	1	N/A	N/A	393	421
	TORO CO/THE	111	N/A	N/A	10,279	8,998
	TPG INC	22	N/A	N/A	1,157	1,328
	TRACTOR SUPPLY CO	220	N/A	N/A	11,772	13,587
	TRACTOR SUPPLY CO	94	N/A	N/A	5,034	5,805
	TRADE DESK INC/THE	192	N/A	N/A	15,639	10,495
	TRADE DESK INC/THE	78	N/A	N/A	8,177	4,263
	TRADEWEB MARKETS INC	1	N/A	N/A	122	123
	TRANE TECHNOLOGIES PLC	96	N/A	N/A	34,719	39,898
	TRANE TECHNOLOGIES PLC	40	N/A	N/A	16,303	16,624
	TRANSDIGM GROUP INC	24	N/A	N/A	32,957	33,573
	TRANSDIGM GROUP INC	2	N/A	N/A	2,746	2,798
	TRAVEL + LEISURE CO	75	N/A	N/A	3,320	4,741
	TRAVELERS COS INC/THE	96	N/A	N/A	21,895	26,065
	TREX CO INC	118	N/A	N/A	7,521	7,272
	TRIMBLE INC	104	N/A	N/A	5,896	8,405
	TRUIST FINANCIAL CORP	548	N/A	N/A	24,364	25,657
	TRUMP MEDIA & TECHNOLOGY GROUP	8	N/A	N/A	278	140
	TWILIO INC	169	N/A	N/A	17,753	17,848
	TWILIO INC	5	N/A	N/A	314	528
	TXNM ENERGY INC	102	N/A	N/A	4,245	5,777
	TYLER TECHNOLOGIES INC	18	N/A	N/A	10,582	10,132
	TYLER TECHNOLOGIES INC	7	N/A	N/A	4,115	3,940
	TYSON FOODS INC	112	N/A	N/A	7,203	6,359
	UBER TECHNOLOGIES INC	885	N/A	N/A	64,720	82,969
	UBER TECHNOLOGIES INC	365	N/A	N/A	26,805	34,219
	UBIQUITI INC	1	N/A	N/A	194	528
	UDR INC	129	N/A	N/A	5,742	5,105
	UFP INDUSTRIES INC	67	N/A	N/A	8,152	6,765
	UGI CORP	227	N/A	N/A	5,714	7,863
	U-HAUL HOLDING CO	1	N/A	N/A	71	58
	U-HAUL HOLDING CO	7	N/A	N/A	478	366
	ULTA BEAUTY INC	20	N/A	N/A	7,057	9,855
	ULTA BEAUTY INC	2	N/A	N/A	706	985
	ULTRAGENYX PHARMACEUTICAL INC	15	N/A	N/A	852	449

NEA MEMBERS INSURANCE PLAN & TRUST

SCHEDULE OF ASSETS (HELD AT END OF YEAR), (CONTINUED)

AUGUST 31, 2025

Form 5500, Part IV, Schedule H, Line 4i

E.I.N. 53-0115260
Plan No. 520

(a)	(b) Identity of issuer, borrower, lessor or similar party	(c) Description			(d) Cost	(e) Current Value
		Face Value/Shares	Maturity Date	Interest Rate		
	UMB FINANCIAL CORP	79	N/A	N/A	\$ 8,539	\$ 9,630
	UNDER ARMOUR INC	208	N/A	N/A	1,600	1,040
	UNDER ARMOUR INC	141	N/A	N/A	1,052	694
	UNION PACIFIC CORP	256	N/A	N/A	65,559	57,234
	UNION PACIFIC CORP	8	N/A	N/A	2,049	1,789
	UNITED AIRLINES HOLDINGS INC	140	N/A	N/A	6,166	14,700
	UNITED BANKSHARES INC/WV	157	N/A	N/A	6,050	6,019
	UNITED PARCEL SERVICE INC	312	N/A	N/A	40,108	27,281
	UNITED RENTALS INC	28	N/A	N/A	20,755	26,778
	UNITED THERAPEUTICS CORP	50	N/A	N/A	18,149	15,238
	UNITEDHEALTH GROUP INC	386	N/A	N/A	227,817	119,610
	UNITY SOFTWARE INC	3	N/A	N/A	49	118
	UNIVERSAL DISPLAY CORP	49	N/A	N/A	9,492	6,791
	UNIVERSAL HEALTH SERVICES INC	25	N/A	N/A	5,949	4,540
	UNUM GROUP	178	N/A	N/A	9,877	12,435
	US BANCORP	644	N/A	N/A	30,416	31,447
	US FOODS HOLDING CORP	256	N/A	N/A	15,233	19,866
	UWM HOLDINGS CORP	8	N/A	N/A	75	46
	VAIL RESORTS INC	42	N/A	N/A	7,606	6,880
	VAIL RESORTS INC	5	N/A	N/A	909	819
	VALARIS LTD	72	N/A	N/A	4,396	3,576
	VALERO ENERGY CORP	136	N/A	N/A	19,955	20,673
	VALLEY NATIONAL BANCORP	525	N/A	N/A	4,632	5,492
	VALMONT INDUSTRIES INC	23	N/A	N/A	6,693	8,444
	VALVOLINE INC	140	N/A	N/A	5,908	5,429
	VALVOLINE INC	22	N/A	N/A	928	853
	VEEVA SYSTEMS INC	21	N/A	N/A	4,543	5,653
	VENTAS INC	191	N/A	N/A	11,869	13,003
	VERALTO CORP	105	N/A	N/A	11,715	11,150
	VERALTO CORP	19	N/A	N/A	2,136	2,018
	VERISIGN INC	35	N/A	N/A	6,437	9,568
	VERISK ANALYTICS INC	61	N/A	N/A	16,642	16,355
	VERISK ANALYTICS INC	15	N/A	N/A	4,092	4,022
	VERIZON COMMUNICATIONS INC	1,793	N/A	N/A	74,912	79,304
	VERTEX PHARMACEUTICALS INC	109	N/A	N/A	54,052	42,621
	VERTEX PHARMACEUTICALS INC	47	N/A	N/A	22,006	18,378
	VERTIV HOLDINGS CO	69	N/A	N/A	5,994	8,801
	VF CORP	356	N/A	N/A	5,830	5,386
	VIATRIS INC	510	N/A	N/A	6,161	5,381
	VICI PROPERTIES INC	447	N/A	N/A	14,966	15,100
	VIKING HOLDINGS LTD	36	N/A	N/A	1,898	2,290
	VIKING THERAPEUTICS INC	1	N/A	N/A	64	27
	VIPER ENERGY INC	185	N/A	N/A	8,031	7,371
	VISA INC	728	N/A	N/A	202,480	256,096
	VISA INC	309	N/A	N/A	87,860	108,700
	VISTEON CORP	30	N/A	N/A	3,037	3,719
	VISTRA CORP	140	N/A	N/A	11,960	26,475
	VISTRA CORP	61	N/A	N/A	5,430	11,536
	VONTIER CORP	164	N/A	N/A	5,737	7,037
	VORNADO REALTY TRUST	183	N/A	N/A	6,317	6,959
	VOYA FINANCIAL INC	106	N/A	N/A	7,508	7,960
	VULCAN MATERIALS CO	57	N/A	N/A	13,977	16,596
	W R BERKLEY CORP	119	N/A	N/A	7,104	8,531
	WALMART INC	1,835	N/A	N/A	141,926	177,958
	WALMART INC	78	N/A	N/A	7,587	7,564
	WALT DISNEY CO/THE	763	N/A	N/A	68,960	90,324
	WARNER BROS DISCOVERY INC	956	N/A	N/A	7,495	11,128
	WARNER MUSIC GROUP CORP	160	N/A	N/A	4,601	5,336
	WASTE MANAGEMENT INC	156	N/A	N/A	33,078	35,317
	WASTE MANAGEMENT INC	67	N/A	N/A	14,207	15,168
	WATERS CORP	25	N/A	N/A	8,659	7,545
	WATERS CORP	6	N/A	N/A	2,078	1,811
	WATSCO INC	39	N/A	N/A	18,642	15,693
	WATTS WATER TECHNOLOGIES INC	31	N/A	N/A	6,098	8,584
	WEATHERFORD INTERNATIONAL PLC	80	N/A	N/A	8,395	5,096
	WEBSTER FINANCIAL CORP	186	N/A	N/A	8,822	11,573
	WEC ENERGY GROUP INC	135	N/A	N/A	12,559	14,379
	WELLS FARGO & CO	1,380	N/A	N/A	80,689	113,408
	WELLTOWER INC	259	N/A	N/A	31,592	43,585

NEA MEMBERS INSURANCE PLAN & TRUST

SCHEDULE OF ASSETS (HELD AT END OF YEAR), (CONTINUED)

AUGUST 31, 2025

Form 5500, Part IV, Schedule H, Line 4i

E.I.N. 53-0115260
Plan No. 520

(a)	(b) Identity of issuer, borrower, lessor or similar party	(c) Description			(d) Cost	(e) Current Value
		Face Value/Shares	Maturity Date	Interest Rate		
	WENDY'S CO/THE	169	N/A	N/A	\$ 2,862	\$ 1,793
	WENDY'S CO/THE	14	N/A	N/A	237	149
	WESCO INTERNATIONAL INC	49	N/A	N/A	8,104	10,772
	WEST PHARMACEUTICAL SERVICES I	31	N/A	N/A	9,723	7,655
	WESTERN ALLIANCE BANCORP	120	N/A	N/A	10,523	10,746
	WESTERN ALLIANCE BANCORP	4	N/A	N/A	310	358
	WESTERN DIGITAL CORP	139	N/A	N/A	6,858	11,167
	WESTERN UNION CO/THE	363	N/A	N/A	4,429	3,147
	WESTINGHOUSE AIR BRAKE TECHNOL	73	N/A	N/A	12,379	14,126
	WESTLAKE CORP	37	N/A	N/A	5,381	3,249
	WEX INC	38	N/A	N/A	7,259	6,511
	WEX INC	1	N/A	N/A	191	171
	WEYERHAEUSER CO	312	N/A	N/A	9,513	8,071
	WHIRLPOOL CORP	61	N/A	N/A	6,118	5,682
	WILLIAMS COS INC/THE	512	N/A	N/A	23,434	29,635
	WILLIAMS COS INC/THE	11	N/A	N/A	689	637
	WILLIAMS-SONOMA INC	52	N/A	N/A	8,510	9,786
	WILLIAMS-SONOMA INC	3	N/A	N/A	403	565
	WILLIS TOWERS WATSON PLC	43	N/A	N/A	12,561	14,052
	WILLSCOT HOLDINGS CORP	9	N/A	N/A	347	218
	WINGSTOP INC	31	N/A	N/A	11,811	10,172
	WINGSTOP INC	5	N/A	N/A	1,931	1,641
	WINTRUST FINANCIAL CORP	74	N/A	N/A	8,049	10,159
	WOODWARD INC	66	N/A	N/A	10,999	16,290
	WORKDAY INC	90	N/A	N/A	24,574	20,774
	WORKDAY INC	39	N/A	N/A	10,213	9,002
	WP CAREY INC	242	N/A	N/A	14,525	16,238
	WW GRAINGER INC	19	N/A	N/A	18,713	19,257
	WW GRAINGER INC	7	N/A	N/A	6,887	7,095
	WYNDHAM HOTELS & RESORTS INC	86	N/A	N/A	6,768	7,448
	WYNDHAM HOTELS & RESORTS INC	12	N/A	N/A	979	1,039
	WYNN RESORTS LTD	40	N/A	N/A	3,075	5,070
	XCEL ENERGY INC	238	N/A	N/A	14,573	17,229
	XP INC	6	N/A	N/A	110	109
	XPO INC	130	N/A	N/A	14,890	16,861
	XPO INC	4	N/A	N/A	458	519
	XYLEM INC/NY	103	N/A	N/A	14,166	14,581
	YETI HOLDINGS INC	83	N/A	N/A	3,347	2,918
	YUM! BRANDS INC	120	N/A	N/A	16,190	17,636
	YUM! BRANDS INC	17	N/A	N/A	2,294	2,498
	ZEBRA TECHNOLOGIES CORP	22	N/A	N/A	7,598	6,976
	ZIMMER BIOMET HOLDINGS INC	84	N/A	N/A	9,699	8,912
	ZIONS BANCORP NA	163	N/A	N/A	8,078	9,456
	ZOETIS INC	191	N/A	N/A	35,047	29,872
	ZOETIS INC	65	N/A	N/A	11,927	10,166
	ZOOMINFO TECHNOLOGIES INC	280	N/A	N/A	2,750	3,052
	ZSCALER INC	18	N/A	N/A	3,814	4,971
	TOTAL CORPORATE STOCK-COMMON				<u>28,173,171</u>	<u>32,233,428</u>
	REGISTERED INVESTMENT COMPANIES					
	CCM COMMUNITY IMPCT BND-INST	191,590	N/A	N/A	1,992,533	1,831,598
	ISHARES RUSSELL 1000 GROWTH	70	N/A	N/A	28,390	31,191
	JPMORGAN HEDGED EQUITY-R6	111,095	N/A	N/A	3,018,498	3,803,905
	T ROWE PR INST SM CAP STK	97,815	N/A	N/A	1,997,457	2,565,678
	VANGUARD INTL GROWTH-ADM	39,538	N/A	N/A	5,203,282	4,688,856
	TOTAL REGISTERED INVESTMENT COMPANIES				<u>12,240,160</u>	<u>12,921,228</u>
	EXCHANGE-TRADED FUNDS					
	IPATH BLOOMBERG COMMODITY IN	69,857	N/A	N/A	2,115,457	2,412,162
	VANGUARD REAL ESTATE ETF	25,081	N/A	N/A	1,608,270	2,313,471
	TOTAL EXCHANGE-TRADED FUNDS				<u>3,723,727</u>	<u>4,725,633</u>
	PARTNERSHIP/JOINT VENTURE INTEREST					
	ARTEMIS RE PTNRS FUND III LP	4,077,205	N/A	N/A	3,898,068	4,077,205
	HATTERAS CORE ALTERNATIVES TEI	4,905	N/A	N/A	4,512	1,913
	STEPSTONE DIVERSITY I	4,374,188	N/A	N/A	4,724,940	4,374,188
	STEPSTONE DIVERSITY II	1,179,665	N/A	N/A	1,683,152	1,179,665
	TOTAL PARTNERSHIP/JOINT VENTURE INTEREST				<u>10,310,672</u>	<u>9,632,971</u>

NEA MEMBERS INSURANCE PLAN & TRUST

SCHEDULE OF ASSETS (HELD AT END OF YEAR), (CONTINUED)

AUGUST 31, 2025

Form 5500, Part IV, Schedule H, Line 4i

E.I.N. 53-0115260
Plan No. 520

(a)	(b) Identity of issuer, borrower, lessor or similar party	(c) Description			(d) Cost	(e) Current Value
		Face Value/Shares	Maturity Date	Interest Rate		
	POOLED INVESTMENT FUND					
	ARIEL INTERNATIONAL DM/EM LLC	7,730,642	N/A	N/A	\$ 5,080,203	\$ 7,730,642
	TOTAL POOLED INVESTMENT FUND				<u>5,080,203</u>	<u>7,730,642</u>
	TOTAL ASSETS (HELD AT END OF YEAR)				<u>\$ 79,876,441</u>	<u>\$ 87,555,666</u>

NEA MEMBERS INSURANCE PLAN & TRUST

SCHEDULE OF REPORTABLE TRANSACTIONS

YEAR ENDED AUGUST 31, 2025

Form 5500, Part IV, Schedule H, Line 4j

E.I.N. 53-0115260
Plan No. 520

	Identity of Party Involved	Description of Asset	Purchase Price	Selling Price	Cost of Asset	Current Value	Net Gain or (Loss) on Sales
I. Single transaction purchased in excess of 5%	NONE						
II. Single transaction sold in excess of 5%	NONE						
III. Series of transactions purchased/sold with respect to securities of the same issue in excess of 5%	Dreyfus Treasury Securities Dreyfus Treasury Securities	Interest-Bearing Cash Interest-Bearing Cash	\$ 11,106,059 N/A	N/A \$ 11,252,597	\$ 11,106,059 11,252,597	\$ 11,106,059 11,252,597	N/A \$ -
IV. Single transaction with respect to securities with a person if prior or subsequent single transaction within the plan year with that person in excess of 5%	NONE						

10 Year Term Product
\$250,000 Face
Unisex - After Conversion Charge

Issue Age#	Non - Smoker						Smoker					
	Preferred		Standard		Monthly		Semi-Annual		Quarterly		Monthly	
	Annual	Semi-Annual	Quarterly	Monthly	Annual	Semi-Annual	Quarterly	Monthly	Annual	Semi-Annual	Quarterly	Monthly
30 & Under	\$114.00	\$59.28	\$30.78	\$10.26	\$168.00	\$87.36	\$45.36	\$15.12	\$282.00	\$146.64	\$76.14	\$25.38
31	118.00	61.36	31.86	10.62	174.00	90.48	46.98	15.66	292.00	151.84	78.84	26.28
32	122.00	63.44	32.94	10.98	181.00	94.12	48.87	16.29	305.00	158.60	82.35	27.45
33	131.00	68.12	35.37	11.79	194.00	100.88	52.38	17.46	329.00	171.08	88.83	29.61
34	139.00	72.28	37.53	12.51	208.00	108.16	56.16	18.72	354.00	184.08	95.58	31.86
35	149.00	77.48	40.23	13.41	224.00	116.48	60.48	20.16	383.00	199.16	103.41	34.47
36	160.00	83.20	43.20	14.40	240.00	124.80	64.80	21.60	413.00	214.76	111.51	37.17
37	172.00	89.44	46.44	15.48	260.00	135.20	70.20	23.40	449.00	233.48	121.23	40.41
38	186.00	96.72	50.22	16.74	281.00	146.12	75.87	25.29	487.00	253.24	131.49	43.83
39	201.00	104.52	54.27	18.09	304.00	158.08	82.08	27.36	529.00	275.08	142.83	47.61
40	218.00	113.36	58.86	19.62	332.00	172.64	89.64	29.88	579.00	301.08	156.33	52.11
41	237.00	123.24	63.99	21.33	363.00	188.76	98.01	32.67	635.00	330.20	171.45	57.15
42	258.00	134.16	69.66	23.22	396.00	205.92	106.92	35.64	696.00	361.92	187.92	62.64
43	283.00	147.16	76.41	25.47	435.00	226.20	117.45	39.15	767.00	398.84	207.09	69.03
44	309.00	160.68	83.43	27.81	478.00	248.56	129.06	43.02	844.00	438.88	227.88	75.96
45	338.00	175.76	91.26	30.42	525.00	273.00	141.75	47.25	928.00	482.56	250.56	83.52
46	368.00	191.36	99.36	33.12	575.00	299.00	155.25	51.75	1,018.00	529.36	274.86	91.62
47	401.00	208.52	108.27	36.09	628.00	326.56	169.56	56.52	1,113.00	578.76	300.51	100.17
48	429.00	223.08	115.83	38.61	673.00	349.96	181.71	60.57	1,196.00	621.92	322.92	107.64
49	462.00	240.24	124.74	41.58	723.00	375.96	195.21	65.07	1,287.00	669.24	347.49	115.83
50	504.00	262.08	136.08	45.36	787.00	409.24	212.49	70.83	1,405.00	730.60	379.35	126.45
51	547.00	284.44	147.69	49.23	851.00	442.52	229.77	76.59	1,516.00	788.32	409.32	136.44
52	586.00	304.72	158.22	52.74	913.00	474.76	246.51	82.17	1,628.00	846.56	439.56	146.52
53	634.00	329.68	171.18	57.06	987.00	513.24	266.49	88.83	1,763.00	916.76	476.01	158.67
54	685.00	356.20	184.95	61.65	1,065.00	553.80	287.55	95.85	1,905.00	990.60	514.35	171.45
55	739.00	384.28	199.53	66.51	1,150.00	598.00	310.50	103.50	2,058.00	1,070.16	555.66	185.22
56	795.00	413.40	214.65	71.55	1,236.00	642.72	333.72	111.24	2,213.00	1,150.76	597.51	199.17
57	853.00	443.56	230.31	76.77	1,326.00	689.52	358.02	119.34	2,376.00	1,235.52	641.52	213.84
58	913.00	474.76	246.51	82.17	1,424.00	740.48	384.48	128.16	2,551.00	1,326.52	688.77	229.59
59	972.00	505.44	262.44	87.48	1,523.00	791.96	411.21	137.07	2,728.00	1,418.56	736.56	245.52
60	1,039.00	540.28	280.53	93.51	1,631.00	848.12	440.37	146.79	2,923.00	1,519.96	789.21	263.07

Age last birthday

15 Year Term Product
\$100,000 Face
Unisex - After Conversion Charge
Revised

Issue Age#	Non - Smoker						Smoker					
	Preferred			Standard			Semi-Annual			Quarterly		
	Annual	Semi-Annual	Quarterly	Monthly	Annual	Semi-Annual	Quarterly	Monthly	Annual	Semi-Annual	Quarterly	Monthly
30 & Under	\$70.00	\$36.40	\$18.90	\$6.30	\$89.00	\$46.28	\$24.03	\$8.01	\$146.00	\$75.92	\$39.42	\$13.14
31	74.00	38.48	19.98	6.66	93.00	48.36	25.11	8.37	154.00	80.08	41.58	13.86
32	78.00	40.56	21.06	7.02	98.00	50.96	26.46	8.82	164.00	85.28	44.28	14.76
33	84.00	43.68	22.68	7.56	105.00	54.60	28.35	9.45	178.00	92.56	48.06	16.02
34	90.00	46.80	24.30	8.10	113.00	58.76	30.51	10.17	193.00	100.36	52.11	17.37
35	96.00	49.92	25.92	8.64	122.00	63.44	32.94	10.98	209.00	108.68	56.43	18.81
36	103.00	53.56	27.81	9.27	131.00	68.12	35.37	11.79	227.00	118.04	61.29	20.43
37	112.00	58.24	30.24	10.08	142.00	73.84	38.34	12.78	247.00	128.44	66.69	22.23
38	121.00	62.92	32.67	10.89	154.00	80.08	41.58	13.86	270.00	140.40	72.90	24.30
39	131.00	68.12	35.37	11.79	168.00	87.36	45.36	15.12	295.00	153.40	79.65	26.55
40	144.00	74.88	38.88	12.96	183.00	95.16	49.41	16.47	325.00	169.00	87.75	29.25
41	157.00	81.64	42.39	14.13	200.00	104.00	54.00	18.00	357.00	185.64	96.39	32.13
42	171.00	88.92	46.17	15.39	219.00	113.88	59.13	19.71	391.00	203.32	105.57	35.19
43	187.00	97.24	50.49	16.83	240.00	124.80	64.80	21.60	431.00	224.12	116.37	38.79
44	203.00	105.56	54.81	18.27	262.00	136.24	70.74	23.58	472.00	245.44	127.44	42.48
45	221.00	114.92	59.67	19.89	286.00	148.72	77.22	25.74	516.00	268.32	139.32	46.44
46	240.00	124.80	64.80	21.60	312.00	162.24	84.24	28.08	563.00	292.76	152.01	50.67
47	260.00	135.20	70.20	23.40	339.00	176.28	91.53	30.51	614.00	319.28	165.78	55.26
48	278.00	144.56	75.06	25.02	364.00	189.28	98.28	32.76	659.00	342.68	177.93	59.31
49	298.00	154.96	80.46	26.82	390.00	202.80	105.30	35.10	708.00	368.16	191.16	63.72
50	322.00	167.44	86.94	28.98	421.00	218.92	113.67	37.89	768.00	399.36	207.36	69.12
51	345.00	179.40	93.15	31.05	451.00	234.52	121.77	40.59	823.00	427.96	222.21	74.07
52	369.00	191.88	99.63	33.21	482.00	250.64	130.14	43.38	881.00	458.12	237.87	79.29
53	399.00	207.48	107.73	35.91	521.00	270.92	140.67	46.89	953.00	495.56	257.31	85.77
54	431.00	224.12	116.37	38.79	564.00	293.28	152.28	50.76	1,032.00	536.64	278.64	92.88
55	468.00	243.36	126.36	42.12	610.00	317.20	164.70	54.90	1,118.00	581.36	301.86	100.62

Age last birthday

15 Year Term Product
 \$250,000 Face
 Unisex - After Conversion Charge
 Revised

Issue Age#	Non - Smoker						Smoker					
	Preferred			Standard			Annual			Semi-Annual		
	Annual	Semi-Annual	Quarterly	Monthly	Annual	Semi-Annual	Quarterly	Monthly	Annual	Semi-Annual	Quarterly	Monthly
30 & under	\$143.00	\$74.36	\$38.61	\$12.87	\$189.00	\$98.28	\$51.03	\$17.01	\$333.00	\$173.16	\$89.91	\$29.97
31	152.00	79.04	41.04	13.68	200.00	104.00	54.00	18.00	353.00	183.56	95.31	31.77
32	163.00	84.76	44.01	14.67	213.00	110.76	57.51	19.17	378.00	196.56	102.06	34.02
33	176.00	91.52	47.52	15.84	231.00	120.12	62.37	20.79	412.00	214.24	111.24	37.08
34	191.00	99.32	51.57	17.19	250.00	130.00	67.50	22.50	449.00	233.48	121.23	40.41
35	208.00	108.16	56.16	18.72	272.00	141.44	73.44	24.48	490.00	254.80	132.30	44.10
36	226.00	117.52	61.02	20.34	296.00	153.92	79.92	26.64	534.00	277.68	144.18	48.06
37	247.00	128.44	66.69	22.23	323.00	167.96	87.21	29.07	585.00	304.20	157.95	52.65
38	270.00	140.40	72.90	24.30	353.00	183.56	95.31	31.77	641.00	333.32	173.07	57.69
39	296.00	153.92	79.92	26.64	387.00	201.24	104.49	34.83	705.00	366.60	190.35	63.45
40	327.00	170.04	88.29	29.43	426.00	221.52	115.02	38.34	779.00	405.08	210.33	70.11
41	360.00	187.20	97.20	32.40	469.00	243.88	126.63	42.21	859.00	446.68	231.93	77.31
42	395.00	205.40	106.65	35.55	515.00	267.80	139.05	46.35	946.00	491.92	255.42	85.14
43	435.00	226.20	117.45	39.15	568.00	295.36	153.36	51.12	1,045.00	543.40	282.15	94.05
44	476.00	247.52	128.52	42.84	624.00	324.48	168.48	56.16	1,147.00	596.44	309.69	103.23
45	520.00	270.40	140.40	46.80	683.00	355.16	184.41	61.47	1,257.00	653.64	339.39	113.13
46	567.00	294.84	153.09	51.03	747.00	388.44	201.69	67.23	1,376.00	715.52	371.52	123.84
47	617.00	320.84	166.59	55.53	816.00	424.32	220.32	73.44	1,503.00	781.56	405.81	135.27
48	663.00	344.76	179.01	59.67	877.00	456.04	236.79	78.93	1,617.00	840.84	436.59	145.53
49	712.00	370.24	192.24	64.08	943.00	490.36	254.61	84.87	1,738.00	903.76	469.26	156.42
50	776.00	403.52	209.52	69.84	1,022.00	531.44	275.94	91.98	1,888.00	981.76	509.76	169.92
51	836.00	434.72	225.72	75.24	1,100.00	572.00	297.00	99.00	2,030.00	1,055.60	548.10	182.70
52	895.00	465.40	241.65	80.55	1,179.00	613.08	318.33	106.11	2,175.00	1,131.00	587.25	195.75
53	970.00	504.40	261.90	87.30	1,276.00	663.52	344.52	114.84	2,356.00	1,225.12	636.12	212.04
54	1,052.00	547.04	284.04	94.68	1,382.00	718.64	373.14	124.38	2,553.00	1,327.56	689.31	229.77
55	1,142.00	593.84	308.34	102.78	1,499.00	779.48	404.73	134.91	2,768.00	1,439.36	747.36	249.12

Age last birthday

20 Year Term Product
\$100,000 Face
Unisex - After Conversion Charge
Revised

Issue Age#	Non - Smoker										Smoker			
	Preferred					Standard					Semi-Annual			
	Annual	Semi-Annual	Quarterly	Monthly	Annual	Semi-Annual	Quarterly	Monthly	Annual	Semi-Annual	Quarterly	Monthly		
30 & Under	\$85.00	\$44.20	\$22.95	\$7.65	\$100.00	\$52.00	\$27.00	\$9.00	\$173.00	\$89.96	\$46.71	\$15.57		
31	91.00	47.32	24.57	8.19	106.00	55.12	28.62	9.54	186.00	96.72	50.22	16.74		
32	97.00	50.44	26.19	8.73	114.00	59.28	30.78	10.26	199.00	103.48	53.73	17.91		
33	105.00	54.60	28.35	9.45	123.00	63.96	33.21	11.07	217.00	112.84	58.59	19.53		
34	113.00	58.76	30.51	10.17	133.00	69.16	35.91	11.97	236.00	122.72	63.72	21.24		
35	123.00	63.96	33.21	11.07	144.00	74.88	38.88	12.96	257.00	133.64	69.39	23.13		
36	133.00	69.16	35.91	11.97	156.00	81.12	42.12	14.04	281.00	146.12	75.87	25.29		
37	145.00	75.40	39.15	13.05	171.00	88.92	46.17	15.39	308.00	160.16	83.16	27.72		
38	158.00	82.16	42.66	14.22	186.00	96.72	50.22	16.74	337.00	175.24	90.99	30.33		
39	173.00	89.96	46.71	15.57	203.00	105.56	54.81	18.27	370.00	192.40	99.90	33.30		
40	193.00	100.36	52.11	17.37	225.00	117.00	60.75	20.25	413.00	214.76	111.51	37.17		
41	210.00	109.20	56.70	18.90	247.00	128.44	66.69	22.23	453.00	235.56	122.31	40.77		
42	229.00	119.08	61.83	20.61	269.00	139.88	72.63	24.21	495.00	257.40	133.65	44.55		
43	249.00	129.48	67.23	22.41	293.00	152.36	79.11	26.37	541.00	281.32	146.07	48.69		
44	270.00	140.40	72.90	24.30	319.00	165.88	86.13	28.71	589.00	306.28	159.03	53.01		
45	292.00	151.84	78.84	26.28	346.00	179.92	93.42	31.14	640.00	332.80	172.80	57.60		
46	315.00	163.80	85.05	28.35	375.00	195.00	101.25	33.75	694.00	360.88	187.38	62.46		
47	341.00	177.32	92.07	30.69	406.00	211.12	109.62	36.54	752.00	391.04	203.04	67.68		
48	366.00	190.32	98.82	32.94	437.00	227.24	117.99	39.33	809.00	420.68	218.43	72.81		
49	394.00	204.88	106.38	35.46	470.00	244.40	126.90	42.30	872.00	453.44	235.44	78.48		
50	435.00	226.20	117.45	39.15	516.00	268.32	139.32	46.44	959.00	498.68	258.93	86.31		

Age last birthday

20 Year Term Product
\$250,000 Face
Unisex - After Conversion Charge
Revised

Issue Age#	Non - Smoker						Smoker					
	Preferred			Standard			Semi-Annual			Quarterly		
	Annual	Semi-Annual	Quarterly	Monthly	Annual	Semi-Annual	Quarterly	Monthly	Annual	Semi-Annual	Quarterly	Monthly
30 & under	\$184.00	\$95.68	\$49.68	\$16.56	\$222.00	\$115.44	\$59.94	\$19.98	\$405.00	\$210.60	\$109.35	\$36.45
31	198.00	102.96	53.46	17.82	238.00	123.76	64.26	21.42	435.00	226.20	117.45	39.15
32	214.00	111.28	57.78	19.26	255.00	132.60	68.85	22.95	470.00	244.40	126.90	42.30
33	233.00	121.16	62.91	20.97	278.00	144.56	75.06	25.02	513.00	266.76	138.51	46.17
34	254.00	132.08	68.58	22.86	303.00	157.56	81.81	27.27	561.00	291.72	151.47	50.49
35	278.00	144.56	75.06	25.02	331.00	172.12	89.37	29.79	615.00	319.80	166.05	55.35
36	304.00	158.08	82.08	27.36	362.00	188.24	97.74	32.58	673.00	349.96	181.71	60.57
37	334.00	173.68	90.18	30.06	398.00	206.96	107.46	35.82	741.00	385.32	200.07	66.69
38	368.00	191.36	99.36	33.12	436.00	226.72	117.72	39.24	815.00	423.80	220.05	73.35
39	404.00	210.08	109.08	36.36	480.00	249.60	129.60	43.20	897.00	466.44	242.19	80.73
40	454.00	236.08	122.58	40.86	536.00	278.72	144.72	48.24	1,005.00	522.60	271.35	90.45
41	498.00	258.96	134.46	44.82	588.00	305.76	158.76	52.92	1,105.00	574.60	298.35	99.45
42	545.00	283.40	147.15	49.05	644.00	334.88	173.88	57.96	1,210.00	629.20	326.70	108.90
43	595.00	309.40	160.65	53.55	705.00	366.60	190.35	63.45	1,325.00	689.00	357.75	119.25
44	647.00	336.44	174.69	58.23	768.00	399.36	207.36	69.12	1,444.00	750.88	389.88	129.96
45	702.00	365.04	189.54	63.18	836.00	434.72	225.72	75.24	1,571.00	816.92	424.17	141.39
46	760.00	395.20	205.20	68.40	909.00	472.68	245.43	81.81	1,707.00	887.64	460.89	153.63
47	823.00	427.96	222.21	74.07	987.00	513.24	266.49	88.83	1,853.00	963.56	500.31	166.77
48	886.00	460.72	239.22	79.74	1,063.00	552.76	287.01	95.67	1,995.00	1,037.40	538.65	179.55
49	957.00	497.64	258.39	86.13	1,147.00	596.44	309.69	103.23	2,152.00	1,119.04	581.04	193.68
50	1,060.00	551.20	286.20	95.40	1,262.00	656.24	340.74	113.58	2,371.00	1,232.92	640.17	213.39

Age last birthday

Exhibit 1A1
GTL Contribution Rates
Annual Rates for Members -- Extended Benefits Schedule

Smoking Status	Attained Age	\$ 25,000	\$ 50,000	\$ 75,000	\$ 100,000	\$ 125,000	\$ 150,000	\$ 175,000	\$ 200,000	\$ 225,000	\$ 250,000	\$ 275,000	\$ 300,000	\$ 400,000	\$ 500,000
Non-Smoker	under 25	\$21.00	\$28.00	\$39.00	\$51.00	\$64.00	\$77.00	\$90.00	\$103.00	\$116.00	\$129.00	\$141.00	\$154.00	\$196.00	\$245.00
	25-29	\$17.00	\$23.00	\$31.00	\$42.00	\$52.00	\$63.00	\$73.00	\$84.00	\$94.00	\$105.00	\$115.00	\$126.00	\$160.00	\$200.00
	30-34	\$18.00	\$24.00	\$33.00	\$44.00	\$55.00	\$66.00	\$76.00	\$87.00	\$98.00	\$109.00	\$120.00	\$131.00	\$166.00	\$208.00
	35-39	\$22.00	\$29.00	\$40.00	\$53.00	\$66.00	\$79.00	\$93.00	\$106.00	\$119.00	\$132.00	\$146.00	\$159.00	\$202.00	\$253.00
	40-44	\$31.00	\$40.00	\$56.00	\$74.00	\$93.00	\$111.00	\$130.00	\$149.00	\$167.00	\$186.00	\$204.00	\$223.00	\$283.00	\$354.00
	45-49	\$47.00	\$61.00	\$85.00	\$113.00	\$141.00	\$169.00	\$198.00	\$226.00	\$254.00	\$282.00	\$311.00	\$339.00	\$431.00	\$538.00
	50-54	\$72.00	\$94.00	\$130.00	\$174.00	\$217.00	\$261.00	\$304.00	\$348.00	\$391.00	\$435.00	\$478.00	\$522.00	\$663.00	\$829.00
	55-59	\$110.00	\$145.00	\$200.00	\$267.00	\$333.00	\$400.00	\$467.00	\$533.00	\$600.00	\$666.00	\$733.00	\$800.00	\$1,017.00	\$1,271.00
	60-64	\$178.00	\$233.00	\$322.00	\$429.00	\$536.00	\$644.00	\$751.00	\$858.00	\$965.00	\$1,073.00	\$1,180.00	\$1,287.00	\$1,636.00	\$2,046.00
	65-69	\$298.00	\$390.00	\$540.00	\$720.00	\$900.00	\$1,080.00	\$1,260.00	\$1,440.00	\$1,620.00	\$1,800.00	\$1,980.00	\$2,160.00	\$2,746.00	\$3,432.00
	70-74 *	\$264.00	\$345.00	\$478.00	\$637.00	\$796.00	\$956.00	\$1,115.00	\$1,274.00	\$1,433.00	\$1,593.00	\$1,752.00	\$1,911.00	\$2,429.00	\$3,037.00
	75-79 **	\$95.00	\$124.00	\$172.00	\$229.00	\$287.00	\$344.00	\$401.00	\$459.00	\$516.00	\$573.00	\$631.00	\$688.00	\$874.00	\$1,093.00
Smoker	under 25	\$168.00	\$220.00	\$305.00	\$406.00	\$508.00	\$609.00	\$711.00	\$812.00	\$914.00	\$1,016.00	\$1,117.00	\$1,219.00	\$1,549.00	\$1,937.00
	25-29	\$565.00	\$741.00	\$1,025.00	\$1,366.00	\$1,708.00	\$2,050.00	\$2,391.00	\$2,733.00	\$3,074.00	\$3,416.00	\$3,758.00	\$4,099.00	\$5,211.00	\$6,513.00
	30-34	\$28.00	\$37.00	\$51.00	\$69.00	\$86.00	\$103.00	\$120.00	\$137.00	\$154.00	\$172.00	\$189.00	\$206.00	\$262.00	\$327.00
	35-39	\$26.00	\$34.00	\$47.00	\$63.00	\$79.00	\$95.00	\$111.00	\$126.00	\$142.00	\$158.00	\$174.00	\$190.00	\$241.00	\$301.00
	40-44	\$33.00	\$43.00	\$59.00	\$79.00	\$99.00	\$119.00	\$138.00	\$158.00	\$178.00	\$198.00	\$218.00	\$237.00	\$302.00	\$377.00
	45-49	\$45.00	\$59.00	\$81.00	\$108.00	\$135.00	\$162.00	\$190.00	\$217.00	\$244.00	\$271.00	\$298.00	\$325.00	\$413.00	\$516.00
	50-54	\$70.00	\$91.00	\$126.00	\$169.00	\$211.00	\$253.00	\$295.00	\$337.00	\$379.00	\$421.00	\$463.00	\$506.00	\$643.00	\$803.00
	55-59	\$118.00	\$155.00	\$214.00	\$285.00	\$357.00	\$428.00	\$499.00	\$571.00	\$642.00	\$714.00	\$785.00	\$856.00	\$1,088.00	\$1,361.00
	60-64	\$201.00	\$263.00	\$364.00	\$486.00	\$607.00	\$729.00	\$850.00	\$971.00	\$1,093.00	\$1,214.00	\$1,336.00	\$1,457.00	\$1,852.00	\$2,315.00
	65-69	\$333.00	\$436.00	\$604.00	\$805.00	\$1,006.00	\$1,208.00	\$1,409.00	\$1,610.00	\$1,811.00	\$2,013.00	\$2,214.00	\$2,415.00	\$3,070.00	\$3,838.00
	70-74 *	\$548.00	\$718.00	\$993.00	\$1,324.00	\$1,655.00	\$1,986.00	\$2,317.00	\$2,648.00	\$2,979.00	\$3,310.00	\$3,641.00	\$3,972.00	\$5,050.00	\$6,312.00
	75-79 **	\$872.00	\$1,143.00	\$1,582.00	\$2,109.00	\$2,636.00	\$3,163.00	\$3,690.00	\$4,218.00	\$4,745.00	\$5,272.00	\$5,799.00	\$6,326.00	\$8,042.00	\$10,052.00
	80-84 **	\$674.00	\$882.00	\$1,221.00	\$1,628.00	\$2,035.00	\$2,442.00	\$2,849.00	\$3,256.00	\$3,663.00	\$4,070.00	\$4,477.00	\$4,884.00	\$6,208.00	\$7,760.00
	85+ **	\$201.00	\$263.00	\$364.00	\$486.00	\$607.00	\$729.00	\$850.00	\$972.00	\$1,093.00	\$1,215.00	\$1,336.00	\$1,458.00	\$1,853.00	\$2,316.00
		\$299.00	\$392.00	\$543.00	\$724.00	\$905.00	\$1,086.00	\$1,267.00	\$1,447.00	\$1,628.00	\$1,809.00	\$1,990.00	\$2,171.00	\$2,760.00	\$3,450.00
		\$809.00	\$1,060.00	\$1,467.00	\$1,956.00	\$2,445.00	\$2,934.00	\$3,423.00	\$3,912.00	\$4,401.00	\$4,890.00	\$5,379.00	\$5,868.00	\$7,459.00	\$9,324.00

* 50% of rate
** 100% of rate

Exhibit 1B1
GTL Contribution Rates
Annual Rates for Spouse & Children -- Extended Benefits Schedule

Smoking Status	Attained Age	\$ 25,000	\$ 50,000	\$ 75,000	\$ 100,000	\$ 125,000	\$ 150,000	\$ 175,000	\$ 200,000	\$ 225,000	\$ 250,000	\$ 275,000	\$ 300,000	\$ 400,000	\$ 500,000
Non-Smoker	Under 25	\$23.00	\$30.00	\$42.00	\$56.00	\$70.00	\$84.00	\$98.00	\$112.00	\$126.00	\$140.00	\$154.00	\$168.00	\$213.00	\$267.00
	25-29	\$17.00	\$23.00	\$31.00	\$42.00	\$52.00	\$63.00	\$73.00	\$84.00	\$94.00	\$105.00	\$115.00	\$126.00	\$160.00	\$200.00
	30-34	\$16.00	\$21.00	\$29.00	\$39.00	\$49.00	\$59.00	\$69.00	\$78.00	\$88.00	\$98.00	\$108.00	\$118.00	\$150.00	\$187.00
	35-39	\$19.00	\$25.00	\$35.00	\$47.00	\$58.00	\$70.00	\$82.00	\$93.00	\$105.00	\$116.00	\$128.00	\$140.00	\$178.00	\$222.00
	40-44	\$27.00	\$35.00	\$49.00	\$65.00	\$81.00	\$97.00	\$114.00	\$130.00	\$146.00	\$162.00	\$178.00	\$195.00	\$247.00	\$309.00
	45-49	\$41.00	\$54.00	\$74.00	\$99.00	\$124.00	\$149.00	\$174.00	\$198.00	\$223.00	\$248.00	\$273.00	\$297.00	\$378.00	\$473.00
	50-54	\$63.00	\$83.00	\$114.00	\$152.00	\$190.00	\$228.00	\$266.00	\$304.00	\$343.00	\$381.00	\$419.00	\$457.00	\$581.00	\$726.00
	55-59	\$96.00	\$126.00	\$175.00	\$233.00	\$291.00	\$350.00	\$408.00	\$466.00	\$524.00	\$583.00	\$641.00	\$699.00	\$889.00	\$1,111.00
	60-64	\$132.00	\$199.00	\$275.00	\$367.00	\$459.00	\$551.00	\$642.00	\$734.00	\$826.00	\$918.00	\$1,009.00	\$1,101.00	\$1,400.00	\$1,750.00
	65-69	\$259.00	\$339.00	\$469.00	\$626.00	\$782.00	\$938.00	\$1,095.00	\$1,251.00	\$1,407.00	\$1,564.00	\$1,720.00	\$1,877.00	\$2,385.00	\$2,982.00
	70-74 *	\$229.00	\$301.00	\$416.00	\$555.00	\$693.00	\$832.00	\$970.00	\$1,109.00	\$1,248.00	\$1,386.00	\$1,525.00	\$1,664.00	\$2,115.00	\$2,644.00
	75-79 **	\$82.00	\$108.00	\$149.00	\$199.00	\$249.00	\$298.00	\$348.00	\$398.00	\$448.00	\$497.00	\$547.00	\$597.00	\$759.00	\$949.00
	80-84 **	\$145.00	\$190.00	\$264.00	\$351.00	\$439.00	\$527.00	\$615.00	\$703.00	\$791.00	\$878.00	\$966.00	\$1,054.00	\$1,340.00	\$1,675.00
	85+ **	\$479.00	\$627.00	\$868.00	\$1,157.00	\$1,446.00	\$1,736.00	\$2,025.00	\$2,314.00	\$2,603.00	\$2,893.00	\$3,182.00	\$3,471.00	\$4,413.00	\$5,516.00
Smoker	Under 25	\$28.00	\$37.00	\$51.00	\$68.00	\$85.00	\$102.00	\$120.00	\$137.00	\$154.00	\$171.00	\$188.00	\$205.00	\$260.00	\$326.00
	25-29	\$25.00	\$33.00	\$46.00	\$61.00	\$77.00	\$92.00	\$107.00	\$122.00	\$138.00	\$153.00	\$168.00	\$184.00	\$233.00	\$292.00
	30-34	\$29.00	\$38.00	\$53.00	\$71.00	\$88.00	\$106.00	\$124.00	\$141.00	\$159.00	\$177.00	\$194.00	\$212.00	\$270.00	\$337.00
	35-39	\$40.00	\$52.00	\$72.00	\$96.00	\$120.00	\$144.00	\$169.00	\$193.00	\$217.00	\$241.00	\$265.00	\$289.00	\$367.00	\$459.00
	40-44	\$62.00	\$81.00	\$112.00	\$149.00	\$186.00	\$224.00	\$261.00	\$298.00	\$336.00	\$373.00	\$410.00	\$447.00	\$569.00	\$711.00
	45-49	\$104.00	\$137.00	\$189.00	\$252.00	\$315.00	\$378.00	\$441.00	\$505.00	\$568.00	\$631.00	\$694.00	\$757.00	\$962.00	\$1,203.00
	50-54	\$175.00	\$229.00	\$317.00	\$422.00	\$528.00	\$633.00	\$739.00	\$844.00	\$950.00	\$1,055.00	\$1,161.00	\$1,267.00	\$1,610.00	\$2,013.00
	55-59	\$284.00	\$372.00	\$515.00	\$686.00	\$858.00	\$1,029.00	\$1,201.00	\$1,373.00	\$1,544.00	\$1,716.00	\$1,887.00	\$2,059.00	\$2,617.00	\$3,272.00
	60-64	\$455.00	\$596.00	\$824.00	\$1,099.00	\$1,374.00	\$1,649.00	\$1,924.00	\$2,198.00	\$2,473.00	\$2,748.00	\$3,023.00	\$3,297.00	\$4,192.00	\$5,240.00
	65-69	\$733.00	\$961.00	\$1,329.00	\$1,772.00	\$2,215.00	\$2,658.00	\$3,102.00	\$3,545.00	\$3,988.00	\$4,431.00	\$4,874.00	\$5,317.00	\$6,759.00	\$8,448.00
	70-74 *	\$574.00	\$752.00	\$1,041.00	\$1,388.00	\$1,735.00	\$2,082.00	\$2,429.00	\$2,776.00	\$3,123.00	\$3,470.00	\$3,817.00	\$4,164.00	\$5,293.00	\$6,616.00
	75-79 **	\$174.00	\$228.00	\$315.00	\$420.00	\$525.00	\$630.00	\$735.00	\$840.00	\$945.00	\$1,050.00	\$1,155.00	\$1,260.00	\$1,602.00	\$2,002.00
	80-84 **	\$260.00	\$341.00	\$471.00	\$629.00	\$786.00	\$943.00	\$1,100.00	\$1,257.00	\$1,414.00	\$1,571.00	\$1,729.00	\$1,886.00	\$2,397.00	\$2,996.00
	85+ **	\$686.00	\$898.00	\$1,243.00	\$1,657.00	\$2,071.00	\$2,486.00	\$2,900.00	\$3,314.00	\$3,728.00	\$4,143.00	\$4,557.00	\$4,971.00	\$6,319.00	\$7,899.00
Children #		11.00	11.00	11.00	11.00	11.00	11.00	11.00	11.00	11.00	11.00	11.00	11.00	11.00	11.00

* 50% off rate

** 10% off rate

Flat \$10.000

NEA ACCIDENTAL DEATH & DISMEMBERMENT INSURANCE PLAN

Coverage Issued by The Prudential Insurance Company of America

[PRINT DATE]

Annual Premium Based on Member's Age

Member's Age	Benefit Amount			
	\$130,000/\$30,000	\$260,000/\$60,000	\$390,000/\$90,000	\$520,000/\$120,000
Under 59	\$19	\$38	\$57	\$76
60 to 70	\$24	\$48	\$72	\$96
80 +	\$48	\$96	\$144	\$192

Rates effective April 2003. Rates will change as members reach age 60 and 80. Rates may also change if plan experience requires a change for all insureds. Rate is the same for all covered person selections (member only, member & spouse, member & child or member & family).

NEA Accidental Death & Dismemberment is issued by The Prudential Insurance Company of America, 751 Broad Street, Newark, NJ 07102. Please refer to the Booklet-Certificate, which is made a part of the Group Contract, for all plan details, including any exclusions, limitations and restrictions which may apply. If there is a discrepancy between this document and the Booklet-Certificate/Group Contract issued by Prudential, the terms of the Group Contract will govern. Contract Series: 83500.

NEA ACCIDENTAL DEATH & DISMEMBERMENT PLUS INSURANCE PLAN

Coverage Issued by The Prudential Insurance Company of America

[PRINT DATE]

Annual Premium Based on Member's Age

Member's Age	Benefit Amount			
	\$130,000/\$30,000	\$260,000/\$60,000	\$390,000/\$90,000	\$520,000/\$120,000
Under 59	\$23	\$46	\$69	\$92
60 to 70	\$28	\$56	\$84	\$112
80 +	\$52	\$104	\$156	\$208

Rates effective April 2003. Rates will change as members reach age 60 and 80. Rates may also change if plan experience requires a change for all insureds. Rate is the same for all covered person selections (member only, member & spouse, member & child or member & family).

NEA Accidental Death & Dismemberment Plus is issued by The Prudential Insurance Company of America, 751 Broad Street, Newark, NJ 07102. Please refer to the Booklet-Certificate, which is made a part of the Group Contract, for all plan details, including any exclusions, limitations and restrictions which may apply. If there is a discrepancy between this document and the Booklet-Certificate/Group Contract issued by Prudential, the terms of the Group Contract will govern. Contract Series: 83500.

NEA Accidental Death & Dismemberment Advantage Insurance Plan

Issued by The Prudential Insurance Company of America
751 Broad Street, Newark, NJ 07102. Contract Series 83500

Age	Face Amount	Member Only (Annual Rate)	Member and Children (Annual Rate)	Member and Family (Annual Rate)
Under 65	\$ 250,000	\$96	\$111	\$141
	\$ 500,000	\$156	\$186	\$246
	\$ 750,000	\$216	\$261	\$351
	\$1,000,000	\$276	\$336	\$457
65-69	\$125,000	\$66	\$73	\$88
	\$250,000	\$96	\$111	\$141
	\$375,000	\$126	\$149	\$194
	\$500,000	\$156	\$186	\$246
70-74	\$100,000	\$60	\$66	\$78
	\$200,000	\$84	\$96	\$120
	\$300,000	\$108	\$126	\$162
	\$400,000	\$132	\$156	\$204
75-79	\$ 62,500	\$51	\$55	\$62
	\$125,000	\$66	\$73	\$88
	\$187,500	\$81	\$92	\$115
	\$250,000	\$96	\$111	\$141
80+	\$ 37,500	\$45	\$47	\$52
	\$ 75,000	\$54	\$58	\$67
	\$112,000	\$63	\$70	\$83
	\$150,000	\$72	\$81	\$99

Rates as of January 1, 2012

Rates will change as members reach age 65, 70, 75 and age 80.
Rates may change if plan experience requires a change for all insureds.

This policy provides ACCIDENT insurance only. It does NOT provide basic hospital, basic medical or major medical insurance as defined by the New York State Department of Financial Services.

IMPORTANT NOTICE: THIS POLICY DOES NOT PROVIDE COVERAGE FOR SICKNESS.

For other rate options, call 1-800-637-4636. Mon. – Fri., 8 a.m. to 8 p.m. (or Saturday 9 a.m. to 1 p.m.) ET

0219463-00001-00

GTL Contribution Rates
\$150,000 Coverage for Members

Attained Age	Monthly		Quarterly		Semi-annually		Annually	
	Smoker	Non-Smoker	Smoker	Non-Smoker	Smoker	Non-Smoker	Smoker	Non-Smoker
Under 25	\$ 9.04	\$ 6.81	\$ 27.23	\$ 20.58	\$ 52.87	\$ 39.67	\$ 103.00	\$ 77.00
25-29	8.35	5.61	25.18	17.00	48.81	32.57	95.00	63.00
30-34	10.41	5.78	31.32	17.52	60.99	33.58	119.00	65.00
35-39	14.09	6.98	42.31	21.09	82.81	40.69	162.00	79.00
40-44	21.88	9.72	65.58	29.28	128.99	56.93	253.00	111.00
45-49	36.87	14.69	110.31	44.10	217.80	86.36	428.00	169.00
50-54	62.65	22.57	187.26	67.62	370.55	133.05	729.00	261.00
55-59	103.67	34.47	309.71	103.15	613.63	203.59	1,208.00	400.00
60-64	170.29	55.37	508.60	165.53	1,008.45	327.41	1,986.00	644.00
65-69	271.09	92.71	809.48	276.99	1,605.76	548.67	3,163.00	1,080.00
70-74 *	209.35	82.09	625.17	245.29	1,239.86	485.75	2,442.00	956.00
75-79 **	62.65	29.68	187.26	88.84	370.55	175.17	729.00	344.00
80-84 **	93.22	52.37	278.52	156.58	551.72	309.65	1,086.00	609.00
85+ **	251.48	175.78	750.94	524.96	1,489.54	1,040.93	2,934.00	2,050.00

* 50% of Face

** 10% of Face

United American Insurance Company
Med Supp Rates - Attained Age Members (Medical excluding Drug)
Effective 8/28/14 through Current
Age 65

STATE	Plan A	Plan B	Plan C	Plan D	Plan E*	Plan F	Plan G	Plan H*	Plan I*	Plan J*	Plan K	Plan L	Plan M	Plan N
Alabama	87	107	123	114	114	123	116	129	130	145	58	82	103	84
Alaska	74	102	113	104	104	114	105	102	103	122	52	74	96	79
Arizona	74	109	123	114	115	125	116	123	127	142	53	77	105	86
Arkansas	84	119	137	128	128	138	129	139	140	142	65	94	116	95
California - Area 1	93	150	174	160	161	174	163	170	171	178	75	106	146	120
California - Area 2	81	131	152	141	141	153	142	149	150	156	66	93	128	105
California - Area 3	75	121	139	129	129	140	131	134	134	141	60	85	118	96
California - Area 4	68	106	121	112	112	121	116	117	117	124	54	76	102	83
Colorado - Area 1	92	121	146	135	136	147	136	136	138	156	67	98	123	101
Colorado - Area 2	85	114	138	127	128	138	128	128	129	146	62	92	116	96
Colorado - Area 3	81	107	130	121	121	131	121	122	124	139	59	87	110	90
Colorado - Area 4	76	101	121	113	113	122	113	113	114	129	55	81	102	84
Connecticut	87	118	142	132	132	143	133	123	126	136	65	91	120	99
Delaware	78	107	128	119	119	129	120	111	112	127	58	83	108	89
Dist. of Columbia	75	105	122	112	113	123	113	114	116	123	51	73	103	84
Florida - Area 1 (Issue Age)	163	223	254	237	233	262	241	226	242	262	119	175	218	179
Florida - Area 2 (Issue Age)	114	155	179	165	163	182	170	158	170	182	84	124	153	126
Florida - Area 3 (Issue Age)	103	148	169	155	153	174	161	149	162	174	79	117	144	118
Georgia	87	109	128	118	117	129	118	123	124	131	56	82	108	89
Guam - GU	75	105	122	112	113	124	113	114	116	123	51	73	103	84
Hawaii	69	94	108	100	100	109	100	102	104	119	44	66	92	75
Idaho	64	98	119	110	110	120	112	126	127	130	48	69	101	83
Illinois	76	115	146	136	137	147	137	133	134	150	63	88	123	101
Indiana	75	108	135	126	126	135	126	130	131	146	59	86	113	94
Iowa	69	104	122	113	113	122	114	116	119	133	53	73	102	84
Kansas	97	120	141	130	130	141	131	124	126	148	69	99	119	98
Kentucky	74	111	134	125	125	134	125	121	122	144	54	81	112	93
Louisiana- Area 1	134	142	156	149	149	156	150	151	152	170	75	107	131	108
Louisiana- Area 2	113	121	132	126	126	132	126	128	129	144	63	90	111	92
Maine	70	100	116	108	108	117	109	102	103	140	50	71	98	81
Maryland	89	128	147	138	138	148	138	146	146	151	66	94	124	102
Massachusetts	100	134	145	146	145	160	150	153	156	223	71	102	135	111
Michigan	76	108	127	118	119	128	119	121	122	135	56	79	107	88
Minnesota	82	101	128	117	118	129	119	106	107	119	58	83	108	89
Mississippi	76	106	128	119	119	128	119	121	122	130	57	81	107	88
Missouri (Issue Age)	106	143	174	153	152	175	165	144	171	184	84	121	147	120
Montana	65	99	118	108	109	119	109	109	110	117	51	73	100	82
Nebraska - Area 1	102	144	176	164	164	178	165	164	166	198	80	112	150	123
Nebraska - Area 2	81	114	139	131	131	141	131	130	132	158	64	88	119	98
Nevada - Area 1	101	134	153	142	142	154	144	146	146	158	64	88	129	106
Nevada - Area 2	82	108	123	115	115	125	116	118	118	128	52	72	105	86
New Hampshire	76	115	140	130	131	141	131	118	119	134	59	83	119	97
New Jersey	81	132	153	142	151	183	177	135	167	198	71	103	154	126
New Mexico	57	96	112	103	103	113	103	96	96	113	45	67	96	78
New York - Area 1	109	149	171	160	160	172	161	183	185	204	77	107	145	118
New York - Area 2	88	119	137	129	129	138	130	147	148	164	62	87	116	95
New York - Area 3	76	103	118	111	111	119	111	127	128	141	53	74	100	82
North Carolina	107	108	129	119	119	130	120	123	125	146	60	89	109	89
North Dakota	74	111	134	125	126	135	126	127	128	136	57	81	113	94
Ohio	78	109	134	125	125	134	125	123	123	141	59	84	112	93
Oklahoma	112	101	120	110	110	121	111	124	125	132	55	80	101	83
Oregon	60	97	111	102	103	112	103	112	113	132	46	66	95	78
Pennsylvania-Area 1	104	135	161	148	148	161	150	132	133	171	68	101	136	111
Pennsylvania-Area 2	93	120	143	132	132	145	134	118	119	153	60	90	121	99
Pennsylvania-Area 3	75	96	116	104	104	116	107	94	95	123	49	73	97	79
Puerto Rico	77	84	95	86	86	96	86	84	86	97	43	62	80	66
Rhode Island	73	102	121	111	112	122	112	127	128	137	49	71	102	84
S. Carolina-Area 1	90	108	129	119	120	130	120	138	139	151	59	85	109	89
S. Carolina-Area 2	86	102	122	112	113	123	113	131	131	142	56	81	103	84
S. Carolina-Area 3	78	94	111	102	103	112	103	120	120	130	52	74	95	78
South Dakota	44	89	115	106	106	116	107	116	119	131	43	59	98	80
Tennessee	75	104	130	121	121	131	122	121	122	141	58	83	110	90
Texas Area 1 and Area 2	143	126	152	142	142	153	142	133	136	150	71	102	129	106
Utah	53	95	116	106	106	116	106	110	110	127	46	67	98	80
Vermont	66	99	117	108	109	103	95	104	98	116	56	80	87	71
Virgin Islands	40	72	88	75	74	90	78	69	75	93	36	55	75	62
Virginia	60	95	116	106	106	116	107	103	104	119	50	72	98	80
Washington	69	100	117	108	109	117	108	112	113	132	49	69	98	81
West Virginia	69	102	124	113	114	124	114	112	113	130	52	75	104	85
Wisconsin - Area 1	105	137	165	147	152	167	154	156	159	179	74	106	140	115
Wisconsin - Area 2	85	111	134	119	123	135	126	127	130	146	60	86	114	93
Wisconsin - Area 3	78	101	122	109	113	123	115	116	118	133	55	79	103	85
Wyoming	63	95	112	103	103	113	104	114	115	121	49	71	96	78

*Plans E,H,I & J will not be offered to members joining the Program after 6/1/2010
Note: U.S. territories other than Guam, Puerto Rico and the Virgin Islands receive the Washington D. C. rate

United American Insurance Company
Med Supp Rates - Attained Age Members (Medical excluding Drug)
Effective 8/28/14 through Current
Age 66

STATE	Plan A	Plan B	Plan C	Plan D	Plan E*	Plan F	Plan G	Plan H*	Plan I*	Plan J*	Plan K	Plan L	Plan M	Plan N
Alabama	90	110	126	118	118	126	120	133	134	149	60	85	106	87
Alaska	76	105	117	107	107	118	108	105	106	125	54	76	99	81
Arizona	76	112	127	118	118	129	119	126	131	147	55	79	108	89
Arkansas	87	123	141	131	131	142	133	143	145	147	67	97	120	98
California - Area 1	95	154	179	165	166	179	168	175	176	183	77	109	150	123
California - Area 2	84	135	156	146	146	157	147	153	154	161	67	95	132	108
California - Area 3	77	124	144	133	133	144	135	138	138	146	62	88	121	99
California - Area 4	70	109	125	115	115	125	119	121	121	128	56	78	105	86
Colorado - Area 1	94	124	150	139	140	151	140	140	142	161	69	101	126	104
Colorado - Area 2	88	118	142	131	132	142	132	132	133	150	64	94	120	99
Colorado - Area 3	84	110	134	124	124	135	124	125	127	144	61	90	114	93
Colorado - Area 4	78	104	124	117	117	125	117	117	118	133	57	84	105	87
Connecticut	89	122	147	136	136	148	137	127	129	140	67	93	124	102
Delaware	80	110	132	122	122	133	123	114	115	131	60	86	111	92
Dist. of Columbia	77	108	125	116	117	126	117	118	120	126	52	75	106	87
Florida - Area 1 (Issue Age)	166	240	274	254	251	282	263	247	258	277	129	189	236	194
Florida - Area 2 (Issue Age)	116	170	194	179	177	198	184	171	181	195	91	134	166	136
Florida - Area 3 (Issue Age)	112	159	182	169	164	187	175	159	173	184	86	126	157	129
Georgia	89	112	131	122	121	133	122	127	128	135	58	85	111	91
Guam - GU	77	108	125	116	117	128	117	118	120	126	52	76	106	87
Hawaii	71	96	111	103	103	112	103	105	107	122	45	67	94	77
Idaho	66	101	123	113	113	124	115	130	131	134	49	71	104	86
Illinois	78	119	150	140	141	151	141	137	138	154	65	91	126	104
Indiana	77	111	139	130	130	139	130	134	135	150	61	89	117	96
Iowa	71	107	125	117	117	125	118	120	122	137	55	75	105	87
Kansas	100	123	146	134	134	146	135	128	129	152	71	102	122	101
Kentucky	76	115	138	129	129	138	129	124	125	148	56	84	116	95
Louisiana- Area 1	138	147	161	153	153	161	154	155	156	175	77	110	135	111
Louisiana- Area 2	117	124	136	130	130	136	130	132	133	148	65	93	115	94
Maine	72	103	120	111	111	121	112	105	106	145	51	73	101	84
Maryland	91	131	151	142	142	152	142	150	150	155	68	97	128	105
Massachusetts	103	138	149	150	149	165	154	158	161	229	73	105	139	114
Michigan	78	111	131	121	122	132	122	124	125	139	58	81	110	91
Minnesota	85	104	131	121	122	133	123	109	110	123	60	86	111	91
Mississippi	78	109	132	122	122	132	122	124	125	133	59	84	110	91
Missouri (Issue Age)	106	143	174	153	152	175	165	144	171	184	91	126	147	120
Montana	67	102	121	111	112	122	112	112	114	121	52	75	103	85
Nebraska - Area 1	105	148	181	169	169	183	170	169	171	204	82	116	154	126
Nebraska - Area 2	84	118	144	135	135	146	135	134	136	163	66	91	122	101
Nevada - Area 1	104	138	157	147	147	159	148	150	150	163	66	91	133	109
Nevada - Area 2	85	111	126	119	119	129	120	121	121	132	54	74	108	89
New Hampshire	78	118	145	134	135	146	135	122	123	138	61	86	123	100
New Jersey	84	136	157	147	155	189	182	139	172	204	73	106	159	130
New Mexico	59	99	116	106	106	117	106	99	99	117	46	69	99	80
New York - Area 1	112	153	176	165	165	177	166	188	190	210	79	110	149	122
New York - Area 2	90	123	141	133	133	142	134	151	152	168	64	89	120	98
New York - Area 3	78	106	122	114	114	123	114	130	131	146	54	76	103	85
North Carolina	110	111	133	122	122	134	123	126	129	150	62	92	112	92
North Dakota	76	115	138	129	130	139	130	131	132	140	59	84	117	96
Ohio	80	112	138	129	129	138	129	126	126	146	61	87	116	95
Oklahoma	116	104	123	114	114	124	115	127	129	136	57	82	104	86
Oregon	62	100	115	105	106	116	106	116	117	136	47	67	97	80
Pennsylvania-Area 1	107	139	166	152	152	166	154	136	137	176	70	104	140	114
Pennsylvania-Area 2	95	124	148	136	136	149	138	122	123	158	62	93	125	102
Pennsylvania-Area 3	77	99	119	108	108	120	110	97	98	126	50	75	100	82
Puerto Rico	79	87	97	89	89	99	89	87	88	100	44	64	82	67
Rhode Island	75	105	124	115	116	125	116	131	132	141	50	73	105	87
S. Carolina-Area 1	93	111	133	122	123	134	123	142	144	155	61	88	112	92
S. Carolina-Area 2	89	105	125	116	117	126	117	135	135	147	58	84	106	87
S. Carolina-Area 3	80	96	115	105	106	116	106	123	123	134	54	76	97	80
South Dakota	46	92	119	109	109	120	110	120	122	135	44	61	101	82
Tennessee	77	107	134	124	124	135	125	124	125	146	60	86	114	93
Texas Area 1 and Area 2	148	129	156	147	147	158	147	137	140	154	73	105	133	109
Utah	55	97	120	109	109	120	109	114	114	131	47	69	101	82
Vermont	68	102	121	111	112	106	98	108	101	120	58	83	89	73
Virgin Islands	41	74	90	77	76	92	80	71	77	96	37	57	77	64
Virginia	62	97	120	109	109	120	110	106	108	122	51	74	101	82
Washington	71	103	121	111	112	121	111	115	116	136	50	71	101	84
West Virginia	71	105	127	117	118	127	118	116	117	134	54	77	107	88
Wisconsin - Area 1	108	141	170	151	156	172	159	161	164	185	76	109	145	118
Wisconsin - Area 2	88	114	138	123	127	139	129	130	134	150	62	89	117	96
Wisconsin - Area 3	80	104	126	112	116	127	118	120	122	137	57	81	106	88
Wyoming	65	97	116	106	106	117	107	118	119	124	50	73	99	80

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STATE	Plan A	Plan B	Plan C	Plan D	Plan E*	Plan F	Plan G	Plan H*	Plan I*	Plan J*	Plan K	Plan L	Plan M	Plan N
Alabama	93	114	130	121	121	130	124	137	138	153	62	87	109	89
Alaska	78	108	120	110	110	121	111	109	110	129	55	78	102	84
Arizona	78	115	131	121	122	133	123	130	135	151	56	82	111	92
Arkansas	90	126	146	135	135	147	137	148	149	151	69	100	123	101
California - Area 1	98	159	184	170	171	184	173	180	181	189	79	113	154	127
California - Area 2	86	139	161	150	150	162	151	158	159	166	70	98	136	111
California - Area 3	79	128	148	137	137	148	139	142	143	150	64	90	125	102
California - Area 4	72	112	129	119	119	129	123	124	124	132	57	81	109	88
Colorado - Area 1	97	128	154	143	145	156	145	145	147	166	71	104	130	107
Colorado - Area 2	90	121	147	135	136	147	136	136	137	154	66	97	124	102
Colorado - Area 3	86	114	138	128	128	139	128	129	131	148	63	93	117	96
Colorado - Area 4	81	107	128	120	120	129	120	120	121	137	58	86	108	89
Connecticut	92	125	151	140	140	152	141	131	133	144	69	96	128	105
Delaware	83	114	136	126	126	137	127	118	119	135	62	88	115	95
Dist. of Columbia	79	111	129	119	120	130	120	121	124	130	54	77	109	89
Florida - Area 1 (Issue Age)	166	240	274	254	251	282	263	247	258	277	129	189	236	194
Florida - Area 2 (Issue Age)	116	170	194	179	177	198	184	171	181	195	91	134	166	136
Florida - Area 3 (Issue Age)	112	159	182	169	164	187	175	159	173	184	86	126	157	129
Georgia	92	115	135	125	124	137	125	131	132	139	59	87	114	94
Guam - GU	79	111	129	119	120	132	120	121	124	130	54	78	109	89
Hawaii	73	99	115	106	106	116	106	108	110	126	46	70	97	79
Idaho	68	104	126	116	116	128	119	134	135	138	51	73	107	88
Illinois	81	122	154	145	146	156	146	141	142	159	67	94	130	107
Indiana	79	115	143	134	134	143	134	138	139	154	63	92	120	99
Iowa	73	110	129	120	120	129	121	124	126	141	56	77	108	89
Kansas	103	127	150	138	138	150	139	132	133	157	73	105	126	104
Kentucky	78	118	142	132	132	142	132	128	129	152	57	86	119	98
Louisiana- Area 1	142	151	166	158	158	166	159	160	161	180	79	114	139	115
Louisiana- Area 2	120	128	140	134	134	140	134	136	137	152	67	96	118	97
Maine	74	106	123	114	114	124	115	109	110	149	53	75	104	86
Maryland	94	135	156	147	147	157	147	154	154	160	71	100	132	109
Massachusetts	106	142	153	154	153	170	159	162	166	236	76	109	143	118
Michigan	81	115	135	125	126	136	126	128	129	143	60	84	114	94
Minnesota	87	107	135	124	125	137	126	112	113	126	62	88	114	94
Mississippi	81	113	136	126	126	136	126	128	129	137	61	86	114	94
Missouri (Issue Age)	106	143	174	153	152	175	165	144	171	184	91	126	147	120
Montana	69	105	125	115	116	126	116	116	117	124	54	77	106	87
Nebraska - Area 1	108	152	186	174	174	189	175	174	177	210	85	119	159	130
Nebraska - Area 2	86	121	148	139	139	150	139	138	140	168	68	94	126	104
Nevada - Area 1	107	142	162	151	151	163	152	154	154	168	68	94	137	113
Nevada - Area 2	87	115	130	122	122	132	124	125	125	136	55	76	111	92
New Hampshire	81	122	149	138	139	150	139	125	126	142	63	88	126	103
New Jersey	86	140	162	151	160	194	188	143	178	210	75	109	163	134
New Mexico	61	102	119	109	109	120	109	102	102	120	47	71	102	83
New York - Area 1	115	158	181	170	170	182	171	194	196	216	82	113	153	125
New York - Area 2	93	126	146	137	137	147	138	156	157	173	66	92	123	101
New York - Area 3	81	110	125	118	118	126	118	134	135	150	56	78	106	87
North Carolina	114	115	137	126	126	138	127	130	132	154	64	95	116	95
North Dakota	78	118	142	132	134	143	134	135	136	145	61	86	120	99
Ohio	83	116	142	132	132	142	132	130	130	150	63	89	119	98
Oklahoma	119	107	127	117	117	128	118	131	132	140	58	85	107	88
Oregon	64	103	118	108	109	119	109	119	120	140	49	70	100	83
Pennsylvania-Area 1	110	143	171	157	157	171	159	140	141	181	72	108	144	118
Pennsylvania-Area 2	98	127	152	140	140	153	142	125	126	162	64	96	129	105
Pennsylvania-Area 3	79	102	123	111	111	123	113	100	101	130	51	77	103	84
Puerto Rico	82	89	100	92	92	102	92	90	91	103	45	66	85	70
Rhode Island	77	108	128	118	119	129	119	135	136	146	52	75	108	89
S. Carolina-Area 1	96	115	137	126	127	138	127	147	148	160	63	90	116	95
S. Carolina-Area 2	92	108	129	119	120	130	120	139	139	151	60	86	109	89
S. Carolina-Area 3	83	99	118	108	109	119	109	127	127	138	55	78	100	83
South Dakota	47	95	122	113	113	124	114	124	126	139	45	63	104	85
Tennessee	79	110	138	128	128	139	129	128	129	150	62	88	117	96
Texas Area 1 and Area 2	152	133	161	151	151	162	151	141	144	159	75	109	137	112
Utah	56	100	124	113	113	124	113	117	117	135	49	71	104	85
Vermont	71	105	124	114	115	110	101	111	104	123	59	85	92	75
Virgin Islands	43	76	93	79	78	95	83	73	79	98	38	58	79	66
Virginia	64	100	124	113	113	124	114	110	111	126	53	76	104	85
Washington	73	106	124	114	115	124	114	119	120	140	51	73	104	86
West Virginia	73	108	131	120	121	131	121	119	120	138	55	79	110	90
Wisconsin - Area 1	111	146	175	156	161	177	163	166	169	190	78	113	149	122
Wisconsin - Area 2	90	118	142	126	131	143	133	134	138	154	64	92	121	98
Wisconsin - Area 3	83	107	130	115	120	131	122	123	125	141	58	84	110	91
Wyoming	67	100	119	109	109	120	110	121	122	128	52	75	102	83

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STATE	Plan A	Plan B	Plan C	Plan D	Plan E*	Plan F	Plan G	Plan H*	Plan I*	Plan J*	Plan K	Plan L	Plan M	Plan N
Alabama	95	117	134	125	125	134	127	141	142	158	64	90	113	92
Alaska	81	111	124	114	114	125	115	112	113	133	57	81	105	86
Arizona	81	119	135	125	125	137	126	134	139	156	58	84	115	94
Arkansas	92	130	150	139	139	151	141	152	153	156	71	103	127	104
California - Area 1	101	164	190	175	176	190	178	185	186	194	82	116	159	131
California - Area 2	89	143	166	155	155	167	156	163	164	170	72	101	140	115
California - Area 3	82	132	152	141	141	153	143	147	147	155	66	93	128	105
California - Area 4	74	115	133	122	122	133	127	128	128	136	59	83	112	91
Colorado - Area 1	100	132	159	148	149	160	149	149	151	170	73	107	134	110
Colorado - Area 2	93	125	151	139	140	151	140	140	141	159	68	100	127	105
Colorado - Area 3	89	117	142	132	132	143	132	133	135	152	65	95	120	99
Colorado - Area 4	83	110	132	124	124	133	124	124	125	141	60	89	111	92
Connecticut	95	129	156	144	144	157	145	135	137	149	71	99	131	108
Delaware	85	117	140	130	130	141	131	121	122	139	64	91	118	98
Dist. of Columbia	82	115	133	123	124	134	124	125	127	134	56	80	113	92
Florida Area 1 (Issue Age)	166	240	274	254	251	282	263	247	258	277	129	189	236	194
Florida Area 2 (Issue Age)	116	170	194	179	177	198	184	171	181	195	91	134	166	136
Florida Area 3 (Issue Age)	112	159	182	169	164	187	175	159	173	184	86	126	157	129
Georgia	95	119	139	129	128	141	129	135	136	143	61	90	118	97
Guam	82	115	133	123	124	136	124	125	127	134	56	80	113	92
Hawaii	75	102	118	109	109	119	109	111	114	130	48	72	100	82
Idaho	70	107	130	120	120	131	122	138	139	142	52	75	111	91
Illinois	83	126	159	149	150	160	150	145	147	164	69	97	134	110
Indiana	82	118	148	138	138	148	138	142	143	159	65	94	124	102
Iowa	75	114	133	124	124	133	125	127	130	145	58	80	111	92
Kansas	106	131	155	142	142	155	143	136	137	161	75	108	130	107
Kentucky	81	122	147	136	136	147	136	132	133	157	59	89	123	101
Louisiana- Area 1	147	156	170	163	163	170	164	165	166	185	82	117	143	118
Louisiana- Area 2	124	132	144	138	138	144	138	140	141	157	69	99	122	100
Maine	76	110	127	118	118	128	119	112	113	153	54	77	107	89
Maryland	97	139	160	151	151	161	151	159	159	165	73	103	136	112
Massachusetts	110	146	158	159	158	175	164	167	171	243	78	112	148	121
Michigan	83	118	139	128	130	140	130	132	133	148	61	86	117	97
Minnesota	90	111	139	128	129	141	130	115	116	130	63	91	118	97
Mississippi	83	116	140	130	130	140	130	132	133	142	63	89	117	97
Missouri (Issue Age)	106	143	174	153	152	175	165	144	171	184	91	126	147	120
Montana	71	108	128	118	119	130	119	119	121	128	56	80	109	90
Nebraska - Area 1	111	157	192	180	180	194	181	180	182	216	88	123	164	134
Nebraska - Area 2	89	125	152	143	143	155	143	142	144	173	70	97	130	107
Nevada - Area 1	110	147	167	156	156	168	157	159	159	173	70	97	141	116
Nevada - Area 2	90	118	134	126	126	136	127	128	128	140	57	78	115	94
New Hampshire	83	126	153	142	143	154	143	129	130	146	65	91	130	106
New Jersey	89	144	167	156	165	200	193	148	183	216	77	113	168	138
New Mexico	63	105	123	113	113	124	113	105	105	124	49	73	105	85
New York - Area 1	119	163	187	175	175	188	176	199	202	222	84	116	158	129
New York - Area 2	96	130	150	141	141	151	142	160	161	179	68	95	127	104
New York - Area 3	83	113	129	121	121	130	121	138	139	154	58	81	110	90
North Carolina	117	118	141	130	130	142	131	134	136	159	66	98	119	98
North Dakota	81	122	147	136	138	148	138	139	140	149	63	89	124	102
Ohio	85	119	147	136	136	147	136	134	134	155	65	92	123	101
Oklahoma	123	110	131	120	120	132	122	135	136	144	60	88	110	91
Oregon	66	106	122	111	113	123	113	123	124	144	50	72	103	85
Pennsylvania-Area 1	114	147	176	161	161	176	164	144	145	187	74	111	149	121
Pennsylvania-Area 2	101	131	157	144	144	158	146	129	130	167	66	99	133	108
Pennsylvania-Area 3	82	105	126	114	114	127	116	103	104	134	53	79	106	87
Puerto Rico	84	92	103	94	94	105	94	92	94	106	47	68	88	72
Rhode Island	80	111	132	122	123	133	123	139	140	150	53	77	111	92
S. Carolina-Area 1	99	118	141	130	131	142	131	151	152	165	65	93	119	98
S. Carolina-Area 2	94	111	133	123	124	134	124	143	143	156	61	89	113	92
S. Carolina-Area 3	85	102	122	111	113	123	113	131	131	142	57	81	103	85
South Dakota	48	98	126	116	116	127	117	127	130	143	47	65	107	88
Tennessee	82	114	142	132	132	143	133	132	133	155	64	91	120	99
Texas Area 1 and Area 2	157	137	166	156	156	167	156	145	149	164	77	112	141	115
Utah	58	103	127	116	116	127	116	120	120	139	50	73	107	88
Vermont	73	108	128	118	119	113	104	114	107	127	61	88	95	78
Virgin Islands	44	78	96	82	81	98	85	75	82	101	39	60	82	68
Virginia	66	103	127	116	116	127	117	113	114	130	55	78	107	88
Washington	75	110	128	118	119	128	118	122	123	144	53	75	107	89
West Virginia	75	111	135	124	125	135	125	123	124	142	57	82	114	93
Wisconsin - Area 1	115	150	180	160	166	182	168	171	174	196	81	116	153	126
Wisconsin - Area 2	93	121	146	130	135	148	137	138	142	159	66	94	125	101
Wisconsin - Area 3	85	111	134	119	123	135	126	127	129	145	60	86	113	93
Wyoming	69	103	123	113	113	124	114	125	126	132	53	77	105	85

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STATE	Plan A	Plan B	Plan C	Plan D	Plan E*	Plan F	Plan G	Plan H*	Plan I*	Plan J*	Plan K	Plan L	Plan M	Plan N
Alabama	98	121	138	129	129	138	131	145	146	163	66	92	116	95
Alaska	83	115	128	117	117	129	118	115	116	137	59	83	108	89
Arizona	83	122	139	129	129	141	130	138	143	160	60	87	118	97
Arkansas	95	134	154	144	144	156	145	157	158	160	74	106	131	107
California - Area 1	104	169	195	180	181	195	184	191	192	200	84	119	164	135
California - Area 2	91	147	171	159	159	172	160	167	169	176	74	104	144	118
California - Area 3	84	136	157	145	145	157	147	151	151	159	68	96	132	108
California - Area 4	76	119	137	126	126	137	130	132	132	140	61	85	115	94
Colorado - Area 1	103	136	164	152	153	165	153	153	156	176	75	110	138	114
Colorado - Area 2	96	129	156	143	144	156	144	144	145	164	70	103	131	108
Colorado - Area 3	91	121	146	136	136	147	136	137	139	157	67	98	124	102
Colorado - Area 4	85	114	136	128	128	137	128	128	129	145	62	91	115	95
Connecticut	97	133	160	148	148	161	150	139	141	153	74	102	135	112
Delaware	88	121	144	133	133	145	135	125	126	143	66	94	122	101
Dist. of Columbia	84	118	137	126	128	138	128	129	131	138	57	82	116	95
Florida - Area 1 (Issue Age)	166	240	274	254	251	282	263	247	258	277	129	189	236	194
Florida - Area 2 (Issue Age)	116	170	194	179	177	198	184	171	181	195	91	134	166	136
Florida - Area 3 (Issue Age)	112	159	182	169	164	187	175	159	173	184	86	126	157	129
Georgia	97	122	144	133	132	145	133	139	140	147	63	93	121	100
Guam - GU	84	118	137	126	128	140	128	129	131	138	57	83	116	95
Hawaii	77	105	122	112	112	123	112	115	117	133	49	74	103	84
Idaho	72	110	134	123	123	135	126	142	143	146	54	77	114	94
Illinois	85	130	164	153	155	165	155	150	151	169	71	99	138	114
Indiana	84	122	152	142	142	152	142	146	147	164	67	97	128	105
Iowa	77	117	137	128	128	137	129	131	133	150	60	82	115	95
Kansas	109	135	159	146	146	159	147	140	141	166	77	111	133	110
Kentucky	83	125	151	140	140	151	140	136	137	162	61	91	126	104
Louisiana- Area 1	151	160	176	167	167	176	169	170	171	191	84	121	147	122
Louisiana- Area 2	128	136	149	142	142	149	142	144	145	162	71	102	125	103
Maine	78	113	131	121	121	132	122	115	116	158	56	80	110	91
Maryland	100	144	165	156	156	166	156	164	164	170	75	106	140	115
Massachusetts	113	151	163	164	163	180	169	172	176	250	80	115	152	125
Michigan	85	122	143	132	133	144	133	136	137	152	63	89	121	99
Minnesota	93	114	144	132	133	145	134	119	120	134	65	94	121	100
Mississippi	85	119	144	133	133	144	133	136	137	146	64	91	121	99
Missouri (Issue Age)	106	143	174	153	152	175	165	144	171	184	91	126	147	120
Montana	74	111	132	122	123	133	123	123	124	132	57	82	112	92
Nebraska - Area 1	115	162	198	185	185	200	186	185	187	222	90	126	169	138
Nebraska - Area 2	91	129	157	147	147	159	147	146	149	178	73	99	133	110
Nevada - Area 1	114	151	172	160	160	173	162	164	164	178	73	99	145	119
Nevada - Area 2	92	122	138	130	130	140	131	132	132	144	59	81	118	97
New Hampshire	85	129	158	146	147	159	147	133	134	151	66	94	134	109
New Jersey	91	149	172	160	170	206	199	152	188	222	80	116	173	142
New Mexico	64	108	126	116	116	128	116	108	108	128	50	75	108	88
New York - Area 1	122	167	192	180	180	194	182	205	208	229	87	120	163	133
New York - Area 2	99	134	154	145	145	156	146	165	166	184	70	97	131	107
New York - Area 3	85	116	133	125	125	134	125	142	144	159	59	83	113	93
North Carolina	121	122	145	133	133	146	135	138	140	164	68	101	123	101
North Dakota	83	125	151	140	142	152	142	143	144	153	64	91	128	105
Ohio	88	123	151	140	140	151	140	138	138	159	67	95	126	104
Oklahoma	126	114	135	124	124	136	125	139	140	149	62	90	114	94
Oregon	68	109	125	115	116	126	116	126	128	149	52	74	107	88
Pennsylvania-Area 1	117	151	182	166	166	182	169	148	150	192	76	114	153	125
Pennsylvania-Area 2	104	135	161	148	148	163	151	133	134	172	68	102	137	111
Pennsylvania-Area 3	84	108	130	118	118	131	120	106	107	138	55	82	109	89
Puerto Rico	87	95	107	97	97	108	97	95	97	109	48	70	90	74
Rhode Island	82	115	136	125	126	137	126	143	144	155	55	80	115	95
S. Carolina-Area 1	102	122	145	133	135	146	135	156	157	170	67	96	123	101
S. Carolina-Area 2	97	115	137	126	128	138	128	147	147	160	63	91	116	95
S. Carolina-Area 3	88	105	125	115	116	126	116	135	135	146	59	83	107	88
South Dakota	50	101	130	119	119	131	121	131	133	147	48	67	110	90
Tennessee	84	117	146	136	136	147	137	136	137	159	66	94	124	102
Texas Area 1 and Area 2	161	141	171	160	160	172	160	150	153	169	80	115	145	119
Utah	60	107	131	119	119	131	119	124	124	143	52	75	110	90
Vermont	75	112	132	121	122	116	107	118	110	131	63	90	97	80
Virgin Islands	45	81	99	84	83	101	88	77	84	104	40	62	84	70
Virginia	68	107	131	119	119	131	121	116	118	133	56	81	110	90
Washington	77	113	132	121	122	132	121	126	127	148	55	77	110	91
West Virginia	77	115	139	128	129	139	129	126	128	146	59	84	117	96
Wisconsin - Area 1	118	154	185	165	171	188	173	176	179	202	83	119	158	129
Wisconsin - Area 2	96	125	151	134	139	152	141	142	146	164	68	97	128	104
Wisconsin - Area 3	88	114	138	122	127	139	129	131	133	150	62	89	116	96
Wyoming	71	107	126	116	116	128	117	129	130	136	55	80	108	88

*Plans E,H,I & J will not be offered to members joining the Program after 6/1/2010
Note: U.S. territories other than Guam, Puerto Rico and the Virgin Islands receive the Washington D. C. rate

United American Insurance Company
Med Supp Rates - Attained Age Members (Medical excluding Drug)
Effective 8/28/14 through Current
Age 70+

STATE	Plan A	Plan B	Plan C	Plan D	Plan E*	Plan F	Plan G	Plan H*	Plan I*	Plan J*	Plan K	Plan L	Plan M	Plan N
Alabama	121	148	170	158	158	170	161	179	180	200	81	114	143	117
Alaska	102	141	157	144	144	158	145	142	143	168	72	102	132	109
Arizona	102	150	171	158	159	173	160	170	176	197	73	107	145	119
Arkansas	117	165	190	177	177	191	178	193	194	197	91	130	161	131
California - Area 1	128	207	240	222	223	240	226	235	236	246	104	147	202	166
California - Area 2	112	181	210	196	196	212	197	206	207	216	91	128	177	145
California - Area 3	104	167	193	179	179	194	181	186	186	196	84	118	163	133
California - Area 4	94	146	168	155	155	168	161	162	162	172	75	105	142	115
Colorado - Area 1	127	167	202	187	189	203	189	189	191	216	92	135	170	140
Colorado - Area 2	118	158	191	176	177	191	177	177	179	202	86	127	161	132
Colorado - Area 3	112	148	180	167	167	181	167	168	171	193	82	121	153	125
Colorado - Area 4	105	140	167	157	157	168	157	157	158	179	76	112	141	117
Connecticut	120	164	197	183	183	199	184	171	174	188	91	126	166	137
Delaware	108	148	177	164	164	179	166	153	155	176	81	115	150	124
Dist. of Columbia	104	145	168	155	157	170	157	158	161	170	71	101	143	117
Florida - Area 1 (Issue Age)	**	**	**	**	**	**	**	**	**	**	**	**	**	**
Florida - Area 2 (Issue Age)	**	**	**	**	**	**	**	**	**	**	**	**	**	**
Florida - Area 3 (Issue Age)	**	**	**	**	**	**	**	**	**	**	**	**	**	**
Georgia	120	150	177	164	162	178	164	171	172	181	77	114	149	123
Guam - GU	104	145	168	155	157	172	157	158	161	170	71	102	143	117
Hawaii	95	130	150	138	138	151	138	141	144	164	60	91	127	104
Idaho	89	136	165	152	152	166	155	174	176	180	66	95	140	115
Illinois	105	160	202	189	190	203	190	184	186	207	88	122	170	140
Indiana	104	150	187	174	174	187	174	180	181	202	82	119	157	130
Iowa	95	144	168	157	157	168	158	161	164	184	73	101	141	117
Kansas	134	166	196	180	180	196	181	172	174	204	95	137	164	135
Kentucky	102	154	186	173	173	186	173	167	168	199	75	112	155	128
Louisiana- Area 1	186	197	216	206	206	216	207	209	210	235	104	148	181	150
Louisiana- Area 2	157	167	183	174	174	183	174	177	179	199	88	125	154	127
Maine	96	139	161	149	149	162	150	142	143	194	69	98	136	112
Maryland	123	177	203	191	191	204	191	202	202	209	92	130	172	142
Massachusetts	139	185	200	202	200	222	207	212	216	308	99	142	187	153
Michigan	105	150	176	163	164	177	164	167	168	187	78	109	148	122
Minnesota	114	140	177	162	164	178	165	146	148	165	80	115	149	123
Mississippi	105	147	177	164	164	177	164	167	168	179	79	112	148	122
Missouri (Issue Age)	**	**	**	**	**	**	**	**	**	**	**	**	**	**
Montana	91	137	163	150	151	164	151	151	153	162	71	101	138	114
Nebraska - Area 1	141	199	243	227	227	246	229	227	230	274	111	155	207	170
Nebraska - Area 2	112	158	193	181	181	196	181	180	183	219	89	122	164	135
Nevada - Area 1	140	186	212	197	197	213	199	202	202	219	89	122	179	147
Nevada - Area 2	114	150	170	160	160	173	161	163	163	177	72	99	145	119
New Hampshire	105	159	194	180	181	196	181	164	165	185	82	115	165	134
New Jersey	112	183	212	197	209	253	245	187	232	274	98	143	213	174
New Mexico	79	132	155	143	143	157	143	133	133	157	62	92	132	108
New York - Area 1	150	206	237	222	222	238	223	253	256	282	107	148	200	164
New York - Area 2	121	165	190	178	178	191	180	203	204	226	86	120	161	131
New York - Area 3	105	143	164	153	153	165	153	175	177	196	73	102	139	114
North Carolina	148	150	179	164	164	180	166	170	173	202	84	124	151	124
North Dakota	102	154	186	173	174	187	174	176	177	189	79	112	157	130
Ohio	108	151	186	173	173	186	173	170	170	196	82	117	155	128
Oklahoma	155	140	166	153	153	167	154	171	173	183	76	111	140	115
Oregon	84	134	154	141	143	155	143	155	157	183	63	91	131	108
Pennsylvania-Area 1	144	186	223	204	204	223	207	183	184	237	93	140	188	153
Pennsylvania-Area 2	128	166	199	183	183	200	185	164	165	212	83	125	168	137
Pennsylvania-Area 3	104	133	160	145	145	161	148	130	131	170	67	101	134	110
Puerto Rico	107	117	131	119	119	132	119	117	119	134	59	86	111	91
Rhode Island	101	141	167	154	155	168	155	176	177	190	68	98	141	117
S. Carolina-Area 1	125	150	179	164	166	180	166	191	193	209	82	118	151	124
S. Carolina-Area 2	119	141	168	155	157	170	157	181	181	197	78	112	143	117
S. Carolina-Area 3	108	130	154	141	143	155	143	166	166	180	72	102	131	108
South Dakota	61	124	160	147	147	161	148	161	164	181	59	82	135	111
Tennessee	104	144	180	167	167	181	168	167	168	196	81	115	153	125
Texas Area 1 and Area 2	199	174	210	197	197	212	197	184	188	207	98	142	178	146
Utah	73	131	161	147	147	161	147	153	153	176	63	92	135	111
Vermont	92	137	162	149	150	143	131	145	136	161	77	111	120	98
Virgin Islands	55	99	121	104	102	124	108	95	104	129	50	76	104	86
Virginia	84	131	161	147	147	161	148	143	145	164	69	99	135	111
Washington	95	139	162	149	150	162	149	155	156	183	67	95	136	112
West Virginia	95	141	171	157	158	171	158	155	157	180	72	104	144	118
Wisconsin - Area 1	145	190	228	203	210	231	213	216	221	248	102	147	194	159
Wisconsin - Area 2	118	153	185	165	171	187	174	175	180	202	84	119	158	129
Wisconsin - Area 3	108	140	169	150	156	171	159	161	164	184	76	109	143	118
Wyoming	88	131	155	143	143	157	144	158	160	167	68	98	132	108

*Plans E,H,I & J will not be offered to members joining the Program after 6/1/2010
Note: U.S. territories other than Guam, Puerto Rico and the Virgin Islands receive the Washington D. C. rate

United American Insurance Company
Med Supp Rates - Attained Age Members (Medical excluding Drug)
Effective 8/28/14 through Current
Age 70+

STATE	Plan A	Plan B	Plan C	Plan D	Plan E*	Plan F	Plan G	Plan H*	Plan I*	Plan J*	Plan K	Plan L	Plan M	Plan N
** Issue Age Rates for Florida and Missouri														
Florida Area 1	Plan A	Plan B	Plan C	Plan D	Plan E*	Plan F	Plan G	Plan H*	Plan I*	Plan J*	Plan K	Plan L	Plan M	Plan N
Issue Age 70-74	183	268	307	283	278	307	292	273	284	305	143	211	258	211
Issue Age 75-79	197	292	333	309	303	333	317	297	310	332	155	229	280	230
Issue Age 80 +	211	318	363	337	333	365	347	327	338	362	171	251	307	252
Florida - Area 2														
Issue Age 70-74	130	189	216	199	197	221	205	192	199	215	101	149	185	152
Issue Age 75-79	138	205	235	218	214	240	224	209	218	233	109	162	201	165
Issue Age 80 +	151	225	256	237	235	256	244	227	238	255	120	177	215	177
Florida - Area 3														
Issue Age 70-74	124	178	203	188	184	208	194	179	188	202	94	139	175	143
Issue Age 75-79	130	194	222	204	200	227	211	196	205	221	104	152	189	156
Issue Age 80 +	139	213	241	224	221	242	231	214	224	241	113	168	203	168
Missouri														
Issue Age 70-74	125	173	202	179	178	207	196	173	199	218	103	149	174	142
Issue Age 75-79	138	187	224	199	196	226	220	192	223	240	113	164	189	156
Issue Age 80 +	146	202	241	215	211	243	235	207	238	255	121	175	204	168

United American Insurance Company
Community Rated Members - Closed Block (GF Rates)
Effective 8/28/14 through Current

STATE								With Rx			Without Drug			Plan K	Plan L
	Plan A	Plan B	Plan C	Plan D	Plan E	Plan F	Plan G	Plan H	Plan I	Plan J	Plan H	Plan I	Plan J		
Alabama	\$ 154	\$ 180	\$ 198	\$ 184	\$ 184	\$ 199	\$ 188	\$ 292	\$ 295	\$ 374	\$ 192	\$ 205	\$ 221	\$ 97	\$ 138
Alaska	128	132	152	138	139	153	140	205	205	250	135	144	164	86	117
American Samoa - AS	154	173	175	173	173	177	173	225	230	279	166	177	187	93	133
Arizona	140	159	184	161	165	191	174	244	254	302	161	178	199	90	126
Arkansas	132	168	196	177	178	198	179	275	264	343	173	183	209	106	149
Armed Forces Europe - AE	154	173	175	173	173	177	173	225	230	279	166	177	187	93	133
Armed Forces Pacific - AP	154	173	175	173	173	177	173	225	230	279	166	177	187	93	133
California - Area 1	202	256	287	268	270	291	281	343	346	426	266	284	302	136	187
California - Area 2	178	224	254	225	237	255	243	299	304	374	231	249	267	118	164
California - Area 3	152	198	222	199	199	223	213	259	268	343	195	218	235	104	143
California - Area 4	129	175	187	173	174	192	184	225	226	279	168	188	200	90	124
Colorado - Area 1	129	165	191	174	174	208	191	275	279	335	168	195	220	104	143
Colorado - Area 2	120	154	178	161	161	195	168	256	262	313	155	173	207	98	135
Colorado - Area 3	114	149	173	153	153	185	161	247	249	295	149	165	197	93	128
Colorado - Area 4	106	138	155	142	142	164	149	226	230	273	137	153	175	87	118
Connecticut	139	153	179	175	168	192	183	257	258	292	163	187	200	102	139
Delaware	146	155	168	161	161	173	163	204	209	257	155	168	182	98	135
Dist. of Columbia	154	173	175	173	173	177	173	225	230	279	166	177	187	93	133
Fed Sls of Micronesia - FM	154	173	175	173	173	177	173	225	230	279	166	177	187	93	133
Florida - Area 1															
Age 65	163	223	254	237	233	262	241	373	358	439	226	242	262	119	175
Age 66-69	166	240	274	254	251	282	263	398	383	467	247	258	277	129	189
Age 70-74	183	268	307	283	278	307	292	434	419	513	273	284	305	143	211
Age 75-79	197	292	333	309	303	333	317	465	453	553	297	310	332	155	229
Age 80 +	211	318	363	337	333	365	347	501	491	600	327	338	362	171	251
Florida - Area 2															
Age 65	114	155	179	165	163	182	170	262	253	310	158	170	182	84	124
Age 66-69	116	170	194	179	177	198	184	280	269	329	171	181	195	91	134
Age 70-74	130	189	216	199	197	221	205	306	294	361	192	199	215	101	149
Age 75-79	138	205	235	218	214	240	224	327	318	389	209	218	233	109	162
Age 80 +	151	225	256	237	235	256	244	352	347	422	227	238	255	120	177
Florida - Area 3															
Age 65	103	148	169	155	153	174	161	248	239	292	149	162	174	79	117
Age 66-69	112	159	182	169	164	187	175	263	254	311	159	173	184	86	126
Age 70-74	124	178	203	188	184	208	194	289	277	338	179	188	202	94	139
Age 75-79	130	194	222	204	200	227	211	309	300	368	196	205	221	104	152
Age 80 +	139	213	241	224	221	242	231	332	327	399	214	224	241	113	168
Georgia	155	163	191	165	165	195	174	274	278	338	161	178	207	101	138
Guam - GU	154	173	175	173	173	177	173	225	230	279	166	177	187	93	133
Hawaii	112	142	132	140	146	163	146	211	217	232	142	152	174	79	109
Idaho	89	120	159	138	132	184	152	249	253	319	128	154	196	83	112
Illinois	120	163	196	175	177	205	187	274	276	345	171	192	215	107	146
Indiana	95	142	173	143	142	174	168	252	231	310	137	173	183	87	118
Iowa	94	129	149	132	132	165	143	221	222	285	128	149	178	83	112
Kansas	168	183	208	191	198	215	192	288	290	372	194	196	225	109	159
Kentucky	106	152	177	159	155	184	161	251	253	339	151	165	196	95	130
Louisiana - Area 1	220	236	240	237	237	242	238	355	358	440	231	242	254	137	195
Louisiana - Area 2	198	211	220	213	213	221	215	326	328	423	208	220	231	116	165
Maine	97	132	159	146	140	161	149	253	246	312	136	153	173	83	116
Marshall Islands - MH	154	173	175	173	173	177	173	225	230	279	166	177	187	93	133
Maryland	107	163	175	165	165	179	168	239	242	295	161	173	191	102	138
Massachusetts	107	191	207	185	179	225	202	275	269	339	175	208	237	108	150
Michigan	117	168	202	184	174	205	202	252	258	335	168	207	215	98	137
Minnesota	97	129	195	178	177	207	194	241	244	294	171	187	200	106	146
Mississippi	125	176	207	192	187	208	194	277	281	341	183	205	218	102	143
Missouri pre 4/1/02 members															
Age 65	106	143	174	153	152	175	165	242	252	332	144	171	184	84	121
Age 66 - 69	106	143	174	153	152	175	165	251	262	332	144	171	184	91	126
Age 70 - 74	116	163	195	179	178	202	194	262	269	335	173	199	218	103	149
Age 75 - 79	116	163	195	179	178	202	194	263	273	336	192	223	240	113	164
Age 80+	116	163	195	179	178	202	194	265	274	338	207	238	255	121	175
Missouri post 4/1/02 members															
Age 65	106	143	174	153	152	175	165	242	252	332	144	171	184	84	121
Age 66 - 69	106	143	174	153	152	175	165	251	262	332	144	171	184	91	126
Age 70 - 74	125	173	202	179	178	207	196	262	269	335	173	199	218	103	149
Age 75 - 79	138	187	224	199	196	226	220	263	273	336	192	223	240	113	164
Age 80+	146	202	241	215	211	243	235	265	274	338	207	238	255	121	175
Montana	73	125	142	132	131	153	137	201	204	257	126	140	164	83	109
Nebraska - Area 1	125	173	202	177	185	225	211	282	289	418	180	215	237	113	154
Nebraska - Area 2	101	137	161	140	149	179	161	221	225	320	143	165	191	92	125
Nevada - Area 1	149	202	215	207	196	222	211	301	308	341	192	215	233	118	163
Nevada - Area 2	121	163	174	163	159	179	173	244	253	276	153	177	191	95	132
New Hampshire	94	140	168	149	153	173	161	230	231	258	149	165	182	93	128
New Jersey	93	152	175	159	161	202	192	235	250	316	155	196	214	98	135
New Mexico	126	142	173	143	163	179	163	218	220	275	157	168	191	83	120
New York - Area 1	129	210	213	211	192	225	223	380	392	403	185	226	237	116	159
New York - Area 2	104	168	195	178	154	200	179	307	315	365	150	183	213	94	129
New York - Area 3	93	149	168	161	138	174	163	266	275	311	132	168	183	85	116
North Carolina	137	153	161	143	149	163	153	222	223	275	143	155	174	92	125
North Dakota	84	139	163	153	146	164	155	217	223	287	142	161	175	90	124
Nrthm Mariana Islands - MP	154	173	175	173	173	177	173	225	230	279	166	177	187	93	133
Ohio	121	154	184	164	173	187	183	256	258	328	166	187	198	104	142
Oklahoma	161	168	199	177	165	200	178	278	284	326	161	182	213	97	138
Oregon	121	137	163	129	138	164	149	238	229	297	132	153	175	84	116
Palau - PW	154	173	175	173	173	177	173	225	230	279	166	177	187	93	133
Pennsylvania-Area 1	207	247	266	241	241	267	250	304	312	421	235	236	278	124	185
Pennsylvania-Area 2	184	221	243	213	213	256	231	272	271	380	208	210	268	108	165
Pennsylvania-Area 3	146	177	196	174	174	210	192	226	225	303	168	169	221	89	133
Puerto Rico	102	102	108	104	104	125	104	146	164	195	98	108	136	66	87
Rhode Island	121	165	185	173	173	199	178	272	278	330	166	182	210	89	120
S. Carolina-Area 1	164	175	196	178	179	199	183	287	288	363	175	187	210	106	150
S. Carolina-Area 2	154	165													

NEA MEMBERS INSURANCE PLAN

FORM 5500

ATTACHMENT RE: SCHEDULE H, Lines 4i and 4j

Schedule of Assets (Held at End of Year) and **Schedule of Reportable Transactions** are both included in the Accountant's audit report attachment ("Accountant's Opinion")

NEA MEMBERS INSURANCE PLAN

FORM 5500

ATTACHMENT RE: SCHEDULE H, Lines 4i and 4j

Schedule of Assets (Held at End of Year) and **Schedule of Reportable Transactions** are both included in the Accountant's audit report attachment ("Accountant's Opinion")

NEA MEMBERS INSURANCE PLAN

FORM 5500

ATTACHMENT RE: SCHEDULE H, Lines 4i and 4j

Schedule of Assets (Held at End of Year) and **Schedule of Reportable Transactions** are both included in the Accountant's audit report attachment ("Accountant's Opinion")