

PROPERTY AND CASUALTY COMPANIES—ASSOCIATION EDITION

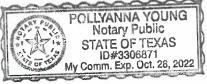
ANNUAL STATEMENT

For the Year Ended December 31, 2021 OF THE CONDITION AND AFFAIRS OF THE

OLD AMERICAN INDEMNITY COMPANY

NAIC Group Code 04	4762	,04762	NAIC Company C	ode1	1665	Employer's	ID Number _	61-0533007
(Curre	ent Period)	(Prior Period)						
Organized under the Laws of		Kentuc	ky	_ , State of Do	micile or F	Port of Entry		Kentucky
Country of Domicile				United Stat	es			
Incorporated/Organized		11/11/1956		Commenced E	usiness		05/30/19	957
Statutory Home Office	2	50 WEST MAIN ST	REET, SUITE 2300	,		LEXINGTO	N, KY, US 40	507-1758
Ctatatory From Come		(Street and				(City or Town,	State, Country and	d Zip Code)
Main Administrative Office	1467	DALLAS PARKW	AY, SUITE 500	DALL	AS, TX, U	S 75254		14-561-1991
_		(Street and Num	per)	(City or Town		try and Zip Code)	•	de) (Telephone Number)
Mail Address	F	P.O. BOX 793747					US 75379-37	
		et and Number or P.O. Box				-	, Country and Zip 0	
Primary Location of Books ar	nd Records	14675 DALLAS I	PARKWAY, SUITE 5	500_	DALLAS,	TX, US 75254 e, Country and Zip	Coda) (Are	214-561-1991 a Code) (Telephone Number)
		(Stree	t and Number)				Code) (Are	a Code) (Telephone Number)
Internet Web Site Address				w.oldamericani	nuemmy.		44 504 4005	.
Statutory Statement Contact		MICHE	LLE STEPHENS				14-561-1965	
			(Name)			(Area Code) (T 214-561-1	elephone Number)	(Extension)
S	tat@oldam. (E-Mail Addre					(Fax Number		
	(E-IVIAII Addre	ss)				(Fax Numbe	п)	
			OFFIC					Т:И -
Name		Title			Name		_	Title
ANDREW JAMES KIRKPAT	TRICK_, _	PRESIDI		MELISSA WA	ADDELL S	AYLORS_,	<u>S</u>	ECRETARY
MARK FRANCIS BANA	<u>.R,</u>	TREASU	RER					
			OTHER OF	FICERS				
			• • • • • • • • • • • • • • • • • • • •				EXECUTIVE	VICE PRESIDENT &
DEBRA JANE ROBER	rs .	CHIEF EXECUTIV	/E OFFICER	BRENT LA	AYNE MC	GILL, _		F ACTUARY
52510,000		EXECUTIVE VICE	PRESIDENT &					CE PRESIDENT &
RONALD JAMES BALLA	.RD,	CHIEF FINANCIA	L OFFICER	MELANIE SI	HAE GARI	<u>RISON</u> , _	CHIEF ACC	OUNTING OFFICER_
		DIE	RECTORS OF	TDIICTE	EC			
				BRENT LA	AVNE MO	GILI		
DEBRA JANE ROBERT		ANDREW JAMES I	IRKPATRICK _	DRENI L	AT NE MICK	GILL _		
State of	TEXAS		ss					
County of	DALLAS		33					
							1.01	
The officers of this reporting entit	y, being duly	sworn, each depose a	nd say that they are the	e described office	ers of said re	eporting entity, a	nd that on the re	sporting period stated
above, all of the herein described that this statement, together with	related exhib	ite echedules and evi	danations therein conta	sined annexed or	referred to	is a full and tru	e statement of a	iii the assets and
at 1 tiers	- secion of the	- anid reporting antitue	or of the reporting perio	nd stated above is	and of its inc	come and deduc	mons mererrom	for the period ended.
and have been completed in see	ardance with	the NAIC Annual State	ment Instructions and	Accounting Pract	ices and Pr	ocedures manu	al except to the (extent that, (1) state law
war and all the same of the sa	or regulation	e require differences it	reporting not related t	n accounting brac	ctices and b	rocedures, acco	oraina to trie bes	t of their information,
knowledge and belief, respective when required, that is an exact co	y. Furthermo	ore, the scope of this a	testation by the descrit	ped officers also i	nciudes the distatement	The electronic	filing may be re	guested by various
regulators in lieu of or in addition	on the englos	ed statement.	es due to electronic illin	g) of the choice	a statement	/1/		
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ANDREW JAMES I		CK	MELISSA WADDI SECRET	ELLOSAYLURS		IV	TREASU	
PRESIDE	EN I		SECKE	IART	a. Is this a	an original filing?		Yes [X] No []
Subscribed and sworn to before	e me		Δ		b. If no:	-		
	ay of 🔀	mary	(2022			he amendment i	ıumber	
	0	0			2. Date fil	ed r of pages attac	hed	
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ASSETS

		0000			
		,	Current Year		Prior Year
		1	2	3	4
				Net Admitted Assets	Net Admitted
		Assets	Nonadmitted Assets	(Cols. 1 - 2)	Assets
1.	Bonds (Schedule D)	28,850,697		28,850,697	21,878,056
2.	Stocks (Schedule D):				
	2.1 Preferred stocks				
	2.2 Common stocks				
3.					
٥.	Mortgage loans on real estate (Schedule B):				
	3.1 First liens				
	3.2 Other than first liens				
4.	Real estate (Schedule A):				
	4.1 Properties occupied by the company (less				
	\$encumbrances)				
	4.2 Properties held for the production of income				
	(less \$encumbrances)				
	4.3 Properties held for sale (less				
	\$ encumbrances)				
_	•				
5.	Cash (\$1,680,272 , Schedule E-Part 1), cash equivalents				
	(\$, Schedule E-Part 2) and short-term				
	investments (\$, Schedule DA)	1,680,272		1,680,272	3 , 107 , 315
6.	Contract loans (including \$premium notes)				
7.	Derivatives (Schedule DB)				
8.	Other invested assets (Schedule BA)				
9.	Receivables for securities				
10.	Securities lending reinvested collateral assets (Schedule DL)	i		i i	i
11.	Aggregate write-ins for invested assets				
12.	Subtotals, cash and invested assets (Lines 1 to 11)				24,900,371
13.	Title plants less \$				
	only)				
14.	Investment income due and accrued	298,497		298,497	145,344
15.	Premiums and considerations:				
	15.1 Uncollected premiums and agents' balances in the course of				
	collection	6.054.451		6,054,451	4.915.130
	15.2 Deferred premiums, agents' balances and installments booked but	, ,		, ,	, ,
	deferred and not yet due (including \$earned				
		10 000 670		10 000 670	12 702 000
	but unbilled premiums).	18,893,078		18,893,678	13,793,099
	15.3 Accrued retrospective premiums (\$) and				
	contracts subject to redetermination (\$)				
16.	Reinsurance:				
	16.1 Amounts recoverable from reinsurers	11,457,973		11,457,973	4,316,807
	16.2 Funds held by or deposited with reinsured companies				
	16.3 Other amounts receivable under reinsurance contracts				
17.	Amounts receivable relating to uninsured plans				
18.1	Current federal and foreign income tax recoverable and interest thereon			1	
i					
18.2	Net deferred tax asset			i i	, i
19.	Guaranty funds receivable or on deposit		i	i i	
20.	Electronic data processing equipment and software				
21.	Furniture and equipment, including health care delivery assets				
	(\$)				
22.	Net adjustment in assets and liabilities due to foreign exchange rates				
23.	Receivables from parent, subsidiaries and affiliates	344,094		344,094	
24.	Health care (\$				
25.	Aggregate write-ins for other-than-invested assets			.427,646	
26.		721,040		721,040	
20.	Total assets excluding Separate Accounts, Segregated Accounts and	60 070 070		60 076 070	40 400 445
	Protected Cell Accounts (Lines 12 to 25)			68,076,972	48,406,415
27.	From Separate Accounts, Segregated Accounts and Protected				
	Cell Accounts		 		
28.	Total (Lines 26 and 27)	68,076,972		68,076,972	48,406,415
DETAIL	S OF WRITE-INS				
1101.					
1102.					
1103.					
1198.	Summary of remaining write-ins for Line 11 from overflow page				
1199.	Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)				
2501.	MGA/Premium Tax Receivable	· · · · · · · · · · · · · · · · · · ·		227 , 646	
2502.	Security Deposit	200,000		200,000	200,000
2503.			ļ		
2598.	Summary of remaining write-ins for Line 25 from overflow page				
2599.	Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	427,646		427,646	202,920
	, , , , , , , , , , , , , , , , , , , ,			.2. ,0.0	_02,020

LIABILITIES, SURPLUS AND OTHER FUNDS

		Current Year	Prior Year
1.	Losses (Part 2A, Line 35, Column 8)	1,758,746	977,086
2.	Reinsurance payable on paid losses and loss adjustment expenses (Schedule F, Part 1, Column 6)		
3.	Loss adjustment expenses (Part 2A, Line 35, Column 9)	289,740	163 , 752
4.	Commissions payable, contingent commissions and other similar charges		
5.	Other expenses (excluding taxes, licenses and fees)	138 , 827	111,262
6.	Taxes, licenses and fees (excluding federal and foreign income taxes)	1,642,985	155,930
7.1	Current federal and foreign income taxes (including \$ on realized capital gains (losses))		
7.2	Net deferred tax liability.		
8.	Borrowed money \$ and interest thereon \$		
9.	Unearned premiums (Part 1A, Line 38, Column 5) (after deducting unearned premiums for ceded reinsurance of		
	\$21,784,269 and including warranty reserves of \$		
	health experience rating refunds including \$ for medical loss ratio rebate per the Public Health	4 440 540	054 540
40	Service Act)		851,549
	Advance premium		
11.	Dividends declared and unpaid:		
	11.1 Stockholders		
10	11.2 Policyholders		
	Ceded reinsurance premiums payable (net of ceding commissions) Funds held by company under reinsurance treaties (Schedule F, Part 3, Column 20)		
13.			
14.	Amounts withheld or retained by company for account of others		
15.			
16.			
18.	Net adjustments in assets and liabilities due to foreign exchange rates Drafts outstanding		
	Payable to parent, subsidiaries and affiliates		
	Derivatives		
	Payable for securities Payable for securities lending		
	Liability for amounts held under uninsured plans		
	Capital notes \$ and interest thereon \$		
	Aggregate write-ins for liabilities		
	Total liabilities excluding protected cell liabilities (Lines 1 through 25)		
	Protected cell liabilities		
	Total liabilities (Lines 26 and 27)		
	Aggregate write-ins for special surplus funds		
	Common capital stock		
	Preferred capital stock		
	Aggregate write-ins for other-than-special surplus funds		
	Surplus notes		
34.	Gross paid in and contributed surplus	9,010,179	8,560,179
	Unassigned funds (surplus)		
	Less treasury stock, at cost:	, ,	
	36.1shares common (value included in Line 30 \$		
	36.2shares preferred (value included in Line 31 \$		
37.	Surplus as regards policyholders (Lines 29 to 35, less 36) (Page 4, Line 39)		11,838,150
	Totals (Page 2, Line 28, Col. 3)	68,076,972	48,406,415
	LS OF WRITE-INS		
2501.	MGA Payable	6,009,059	4 , 177 , 358
2502.	Premium Deficiency Reserves.	60,326	10,914
2503.			
2598.	Summary of remaining write-ins for Line 25 from overflow page		
2599.	Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	6,069,385	4,188,272
2902.			
2903.			
2998.	Summary of remaining write-ins for Line 29 from overflow page		
2999.	Totals (Lines 2901 through 2903 plus 2998) (Line 29 above)		
3201.			
3202.			
3203.			
3298.	Summary of remaining write-ins for Line 32 from overflow page		
3299.	Totals (Lines 3201 through 3203 plus 3298) (Line 32 above)		

STATEMENT OF INCOME

		1 Current Year	2 Prior Year
	UNDERWRITING INCOME		
1.	Premiums earned (Part 1, Line 35, Column 4)	8,854,372	6,463,791
2.	Losses incurred (Part 2, Line 35, Column 7)	3,412,340	1,871,936
3.	Loss adjustment expenses incurred (Part 3, Line 25, Column 1)	502,338	362,596
	Other underwriting expenses incurred (Part 3, Line 25, Column 2)		2,980,073
	Aggregate write-ins for underwriting deductions		5,211,098
1	Net income of protected cells	, ,	, ,
8.	Net underwriting gain (loss) (Line 1 minus Line 6 plus Line 7)	(1,234,322)	1,252,693
	INVESTMENT INCOME		
9.	Net investment income earned (Exhibit of Net Investment Income, Line 17)	473,006	191,966
10.	Net realized capital gains (losses) less capital gains tax of \$(Exhibit of Capital Gains (Losses))	51,542	234
11.	Net investment gain (loss) (Lines 9 + 10)	524 , 548	192,200
	OTHER INCOME		
12.	Net gain (loss) from agents' or premium balances charged off (amount recovered \$ amount		
	charged off \$		
	Finance and service charges not included in premiums.		
i .	Aggregate write-ins for miscellaneous income		
1	Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes		
	(Lines 8 + 11 + 15)	(709,774)	1,444,893
	Dividends to policyholders		
10.	(Line 16 minus Line 17)	(709,774)	1,444,893
19.	Federal and foreign income taxes incurred		
20.	Net income (Line 18 minus Line 19) (to Line 22)	(709,774)	1,444,893
	CAPITAL AND SURPLUS ACCOUNT		
21.	Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2)	11,838,150	10,543,163
22.	Net income (from Line 20)	(709,774)	1,444,893
i	Net transfers (to) from Protected Cell accounts		
i	Change in net unrealized capital gains or (losses) less capital gains tax of \$ Change in net unrealized foreign exchange capital gain (loss)		
	Change in net deferred income tax		
1	Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 28, Col. 3)		
	Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1)		
	Change in surplus notes		
1	Surplus (contributed to) withdrawn from protected cells		
i	Capital changes:		
	32.1 Paid in		
	32.2 Transferred from surplus (Stock Dividend)		
22	32.3 Transferred to surplus		
33.	Surplus adjustments: 33.1 Paid in	450 000	
	33.3 Transferred from capital		
i	Net remittances from or (to) Home Office		
	Dividends to stockholders	` ' '	
i	Aggregate write-ins for gains and losses in surplus		
1	Change in surplus as regards policyholders for the year (Lines 22 through 37)	(987, 854)	1,294,987
	Surplus as regards policyholders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 37)	10,850,296	11,838,150
	LS OF WRITE-INS	40 440	(0.507)
1	Premium Deficiency Reserves Incurred		
1			
	Summary of remaining write-ins for Line 5 from overflow page		
0599.	Totals (Lines 0501 through 0503 plus 0598) (Line 5 above)	49,412	(3,507)
1		i	
i			
1	Summary of remaining write-ins for Line 14 from overflow page		
	Totals (Lines 1401 through 1403 plus 1498) (Line 14 above)		
i			
i			
	Summary of romaining write ine for Line 27 from everflow page		
1	Summary of remaining write-ins for Line 37 from overflow page	-	
0100.	Totale (Lines of the modern of the pide of the file of above)		

CASH FLOW

		1	2
		Current Year	Prior Year
	Cash from Operations	40,004,500	0.045.40
	Premiums collected net of reinsurance		6,015,104
	Net investment income	1 1	203 , 030
	Miscellaneous income		0.070.40
	Total (Lines 1 through 3)		6,278,134
	Benefit and loss related payments		
	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.		3,932,044
	Commissions, expenses paid and aggregate write-ins for deductions		
	Dividends paid to policyholders		
	Federal and foreign income taxes paid (recovered) net of \$		6.761.68
	Total (Lines 5 through 9)	7-1-7-	(483.55
11.	Net cash from operations (Line 4 minus Line 10)	(323,980)	(400,00
10	Cash from Investments		
12.	Proceeds from investments sold, matured or repaid:	5,260,010	5 , 117 , 734
	12.1 Bonds	1 1	
	12.3 Mortgage loans		
	12.4 Real estate		
	12.5 Other invested assets		
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments		12
	12.7 Miscellaneous proceeds		
	12.8 Total investment proceeds (Lines 12.1 to 12.7)		5,117,86
13	Cost of investments acquired (long-term only):	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, , , , , , , , , , , , , , , , ,
	13.1 Bonds	12,243,344	17 468 25
	13.2 Stocks	1 ' ' 1	, 100,20
	13.3 Mortgage loans	1 1	
	13.4 Real estate	I I	
	13.5 Other invested assets	I I	
	13.6 Miscellaneous applications	1	
	13.7 Total investments acquired (Lines 13.1 to 13.6)		17,468,25
14.	Net increase (decrease) in contract loans and premium notes		, ,
	Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14)		(12,350,39
	Cash from Financing and Miscellaneous Sources	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	, , ,
16.	Cash provided (applied):		
	16.1 Surplus notes, capital notes		
	16.2 Capital and paid in surplus, less treasury stock.	1 1	
	16.3 Borrowed funds	I I	
	16.4 Net deposits on deposit-type contracts and other insurance liabilities		
	16.5 Dividends to stockholders	750,000	
	16.6 Other cash provided (applied)	6,830,278	13,262,25
17.	Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)		13,262,25
	RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS		
18.	Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	(1,427,042)	428,30
	Cash, cash equivalents and short-term investments:		
	19.1 Beginning of year	3 , 107 , 315	
	19.2 End of year (Line 18 plus Line 19.1)	1,680,273	3,107,31

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1 - PREMIUMS EARNED

	PARI I - P	REMIUMS EARN			4
		1 Net Premiums	Unearned Premiums Dec. 31 Prior Year -	3 Unearned Premiums Dec. 31 Current	4 Premiums Earned
	Line of Business	Written per Column 6, Part 1B	per Col. 3, Last Year's Part 1		During Year (Cols. 1 + 2 - 3)
		,		Talt IA	(0013. 1 1 2 - 3)
1.	Fire				
2.	Allied lines				
3.	Farmowners multiple peril				
4.	Homeowners multiple peril				
5.	Commercial multiple peril				
6.	Mortgage guaranty				
8.	Ocean marine				
9.	Inland marine				
10.	Financial guaranty				
11.1	Medical professional liability-occurrence				
11.2	Medical professional liability-claims-made				
12.	Earthquake				
13.	Group accident and health				
14.	Credit accident and health (group and individual)				
15.	Other accident and health	17 ,900	7 ,821	3,678	22,044
16.	Workers' compensation				
17.1	Other liability-occurrence				
17.2	Other liability-claims-made				
17.3	Excess workers' compensation				
18.1	Products liability-occurrence				
18.2	Products liability-claims-made				
19.1,19	.2 Private passenger auto liability	3,279,798	652,104	860,219	3,071,684
	4 Commercial auto liability				
21.	Auto physical damage		191,624	282,644	946,036
22.	Aircraft (all perils)			, ,	
23.					
	Fidelity				
24.	Surety				
26.	Burglary and theft				
27.	Boiler and machinery				
28.	Credit				
29.	International				
30.	Warranty				
31.	Reinsurance-nonproportional assumed property				
32.	Reinsurance-nonproportional assumed liability				
33.	Reinsurance-nonproportional assumed financial lines				
34.	Aggregate write-ins for other lines of business	4,814,609			4,814,609
35.	TOTALS	9,149,364	851,549	1,146,540	8,854,372
	OF WRITE-INS	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		, , , , , , ,	.,,,
3401.	Policy fees	4,814,609			4,814,609
3402.		, ,			, , , , , , , , ,
3403.					
3498.	Sum. of remaining write-ins for Line 34 from overflow page				
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)	4,814,609			4,814,609

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1A - RECAPITULATION OF ALL PREMIUMS

		1	2	3	4	5
		Amount Unearned (Running One Year or Less from Date of Policy)	Amount Unearned (Running More Than One Year from Date of Policy)	Earned but	Reserve for Rate Credits and Retrospective Adjustments Based	Total Reserve for Unearned Premiums
	Line of Business	(a)	(a)	Unbilled Premium	on Experience	Cols. 1 + 2 + 3 + 4
1.	Fire					
2.	Allied lines					
3.	Farmowners multiple peril					
4.	Homeowners multiple peril					
5.	Commercial multiple peril					
6.	Mortgage guaranty					
8.	Ocean marine					
9.	Inland marine					
10.	Financial guaranty					
11.1	Medical professional liability-occurrence					
11.2	Medical professional liability-claims-made					
12.	Earthquake					
13.	Group accident and health					
14.	Credit accident and health (group and individual)					<u></u>
15.	Other accident and health	3,678				3,678
16.	Workers' compensation					
17.1	Other liability-occurrence					
17.2	Other liability-claims-made					
17.3	Excess workers' compensation					
18.1	Products liability-occurrence					
18.2	Products liability-claims-made					
19.1,19.	2 Private passenger auto liability	860,219				860 , 219
19.3,19.	4 Commercial auto liability					
21.	Auto physical damage	282,644				282,644
22.	Aircraft (all perils)					
23.	Fidelity					
24.	Surety					
26.	Burglary and theft					
27.	Boiler and machinery					
28.	Credit					
29.	International					
30.	Warranty					
31.	Reinsurance-nonproportional assumed property					
32.	Reinsurance-nonproportional assumed liability					
33.	Reinsurance-nonproportional assumed financial lines					
34.	Aggregate write-ins for other lines of business					
35.	TOTALS	1,146,540				1,146,540
36.	Accrued retrospective premiums based on experier	nce				
37.	Earned but unbilled premiums					
38.	Balance (Sum of Lines 35 through 37)					1,146,540
DETAILS	OF WRITE-INS					
3401.						
3402.						
3403.						
3498.	Sum. of remaining write-ins for Line 34 from overflow page					
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)					

(a) State here basis of computation used in each case.

The Company uses the daily pro rata method to calculate unearned premium. Policy fees are fully earned at policy issuance.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1B - PREMIUMS WRITTEN

		1		nce Assumed	Reinsuranc		6	
		Direct Business	2 From	3 From	4 To	5 To	Net Premiums Written Cols.	
	Line of Business	(a)	Affiliates	Non-Affiliates	Affiliates	Non-Affiliates	1+2+3-4-5	
1.	Fire							
2.	Allied lines							
3.	Farmowners multiple peril							
4.	Homeowners multiple peril							
5.	Commercial multiple peril							
6.	Mortgage guaranty							
8.	Ocean marine							
9.	Inland marine							
10.	Financial guaranty							
11.1	Medical professional liability-occurrence							
11.2	Medical professional liability-claims-made							
12.	Earthquake							
13.	Group accident and health							
14.	Credit accident and health (group and individual)							
15.	Other accident and health				17,900	322,205	17,900	
16.	Workers' compensation							
17.1	Other liability-occurrence			i	i			
17.2								
17.3	Excess workers'							
18.1				İ				
18.2	Products liability-claims- made							
19.1,19	2 Private passenger auto				3,348,798	60,347,343	3,279,798	
19.3,19	4 Commercial auto liability			1				
21.	Auto physical damage				1.082.056	19.522.012	1.037.056	
22.	Aircraft (all perils)	I						
23.	Fidelity							
24.	Surety							
26.	Burglary and theft	I						
27.	Boiler and machinery	i		i i				
28.								
	Credit							
29.	International							
30. 31.	Warranty Reinsurance- nonproportional assumed							
	property	xxx						
32.	Reinsurance- nonproportional assumed	, , , , , , , , , , , , , , , , , , ,						
33.	Reinsurance- nonproportional assumed							
34.	financial lines Aggregate write-ins for other lines of business	4,814,609					4,814,609	
35.	TOTALS	93,789,679			4,448,755	80,191,561	9,149,364	
		55,105,018			4,440,730	00,101,001	3,148,504	
3401.	OF WRITE-INS Policy Fees	4,814,609					4,814,609	
3402.								
3403.								
3498.	Sum. of remaining write- ins for Line 34 from overflow page							
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)	4,814,609					4,814,609	

(a) Does the company's direct premiums written include premiums recorded on an installment basis?	Yes [] No [X]	
If yes: 1. The amount of such installment premiums \$		
2. Amount at which such installment premiums would have been reported had they been rec	corded on an annualized basis \$	

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2 - LOSSES PAID AND INCURRED

			- LOSSES PAID AN	DINCURRED		Т		
			Less Salvage		5	6	7	8
Line of Business	1 Direct Business	2 Reinsurance Assumed	3 Reinsurance Recovered	4 Net Payments (Cols. 1 + 2 - 3)	Net Losses Unpaid Current Year (Part 2A, Col. 8)	Net Losses Unpaid Prior Year	Losses Incurred Current Year (Cols. 4 + 5 - 6)	Percentage of Losses Incurred (Col. 7, Part 2) to Premiums Earned (Col. 4, Part 1)
1. Fire								
2. Allied lines								
3. Farmowners multiple peril								
Homeowners multiple peril								
Commercial multiple peril								
6. Mortgage guaranty								
8. Ocean marine								
9. Inland marine								
10. Financial guaranty								
11.1 Medical professional liability-occurrence								
11.2 Medical professional liability-claims-made								
12. Earthquake								
13. Group accident and health								
14. Credit accident and health (group and individual)								
15. Other accident and health	10,372		9,853	519	2,000	1,936	583	2.6
16. Workers' compensation					· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		
17.1 Other liability-occurrence								
17.2 Other liability-claims-made								
17.3 Excess workers' compensation								
18.1 Products liability-occurrence								
18.2 Products liability-claims-made								
19.1,19.2 Private passenger auto liability				1.925.711	1.668.040	930.792	2.662.960	
19.3,19.4 Commercial auto liability			, , , , , , , , , , , , , , , , , , , ,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, , , , , , , , , , , , , , , , , ,			-
21. Auto physical damage	14,075,871			704,451		44.359		79.2
22. Aircraft (all perils)								
23. Fidelity								
24. Surety								
26. Burglary and theft								
27. Boiler and machinery								
28. Credit								
29. International								
30. Warranty								
31. Reinsurance-nonproportional assumed property	XXX							
32. Reinsurance-nonproportional assumed liability	XXX							
Reinsurance-nonproportional assumed financial lines	XXX							
34. Aggregate write-ins for other lines of business								
35. TOTALS	53.248.976		50.618.296	2.630.681	1.758.746	977.086	3.412.340	38.5
DETAILS OF WRITE-INS	33,240,970		50,010,290	2,000,001	1,730,740	917,000	5,412,340	30.3
3401.								
3402. 3403.								
3498. Sum. of remaining write-ins for Line 34 from overflow page								
3499. Totals (Lines 3401 through 3403 + 3498) (Line 34 above)								

UNDERWRITING AND INVESTMENT EXHIBIT

		PART 2A	 UNPAID LOS 	SES AND LOSS	ADJUSTMENT	EXPENSES				
			Reporte	ed Losses		In	curred But Not Reporte	d	8	9
		1	2	3	4 Net Losses Excl.	5	6	7		
	Line of Business	Direct	Reinsurance Assumed	Deduct Reinsurance Recoverable	Incurred But Not Reported (Cols. 1 + 2 - 3)	Direct	Reinsurance Assumed	Reinsurance Ceded	Net Losses Unpaid (Cols. 4 +5 + 6 - 7)	Net Unpaid Loss Adjustment Expenses
1. Fire					(-				,	'
Allied lin	nes			1						
	vners multiple peril									
	wners multiple peril									
	ercial multiple peril									
	ge guaranty									
	marine									
	marine									
	al quaranty									
	I professional liability-occurrence									
	I professional liability-occurrence									
12. Earthqu										
	uakeaccident and health								(a)	
									(a)	
14. Credit a	accident and health (group and individual)					40.000		20 000	(a)2,000	364
	accident and health					40,000			(a)2,000	
	s' compensation									
	ability-occurrence									
	ability-claims-made									
	workers' compensation									
18.1 Products	ts liability-occurrence									
	ts liability-claims-made									
19.1,19.2 Private	passenger auto liability	12,746,690			632,870	20,856,907		19,821,737	1,668,040	268,905
19.3,19.4 Comme	ercial auto liability									
21. Auto ph	nysical damage	1.359.359		1,291,391	67,968	415,438		394,701	88 ,705	20,470
22. Aircraft	(all perils)									
23. Fidelity	` ' '									
24. Surety				1						
	y and theft									
	and machinery									
28. Credit										
29. Internati	tional									
30. Warrant										
31. Reinsur	rance-nonproportional assumed property	xxx				XXX				
32. Reinsur	rance-nonproportional assumed property	T XXX				XXX				
	rance-nonproportional assumed financial lines					XXX				
	ate write-ins for other lines of business									
35. Aggrega		14.106.049		13,405,210	700,838	21,312,345		20,254,438	1,758,746	289.740
DETAILS OF WRIT		14,100,043		10,400,210	700,000	21,012,040		20,204,400	1,730,740	200,140
				+						
				+						
3403				+		····				
3498. Sum. of	f remaining write-ins for Line 34 from overflow page									
3499. Totals (I	(Lines 3401 through 3403 + 3498) (Line 34 above)									

(a) Including \$ ______for present value of life indemnity claims.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 3 - EXPENSES

	PARI 3	- EXPENSES				
		Loss Adjustment Expenses	2 Other Underwriting Expenses	3 Investment Expenses		4 Total
1.	Claim adjustment services:					
	1.1 Direct	9,899,142				9,899,142
	1.2 Reinsurance assumed					
	1.3 Reinsurance ceded	9,396,804				9,396,804
	1.4 Net claim adjustment services (1.1 + 1.2 - 1.3)	502,338				502,338
2.	Commission and brokerage:					
	2.1 Direct, excluding contingent		10,362,184			10,362,184
	2.2 Reinsurance assumed, excluding contingent					
	2.3 Reinsurance ceded, excluding contingent					
	2.4 Contingent-direct					
	2.5 Contingent-reinsurance assumed					
	2.6 Contingent-reinsurance ceded					
	2.7 Policy and membership fees		4,574,290			4,574,290
	2.8 Net commission and brokerage (2.1 + 2.2 - 2.3 + 2.4 + 2.5 - 2.6 + 2.7)					
3	Allowances to manager and agents					
	Advertising					
	Boards, bureaus and associations					
	Surveys and underwriting reports					
	Audit of assureds' records					
			100,709			100,709
8.	Salary and related items:		006 064			006 064
	8.1 Salaries					
	8.2 Payroll taxes				i	
	Employee relations and welfare					
	Insurance					
	Directors' fees		′		i	,
	Travel and travel items					
	Rent and rent items					
	Equipment					
	Cost or depreciation of EDP equipment and software					
	Printing and stationery					
	Postage, telephone and telegraph, exchange and express					
	Legal and auditing		290,215	73,473		363,689
19.	Totals (Lines 3 to 18)		1,799,268	73,473		1,872,742
20.	Taxes, licenses and fees:					
	20.1 State and local insurance taxes deducting guaranty association					
	credits of \$		1,249,339			1,249,339
	20.2 Insurance department licenses and fees		1,255,891			1,255,891
	20.3 Gross guaranty association assessments					
	20.4 All other (excluding federal and foreign income and real estate)		734,463			734,463
	20.5 Total taxes, licenses and fees (20.1 + 20.2 + 20.3 + 20.4)		3,239,693			3,239,693
21.	Real estate expenses					
22.	Real estate taxes					
23.	Reimbursements by uninsured plans					
24.	Aggregate write-ins for miscellaneous expenses		210,413			210,413
	Total expenses incurred			73 473	(2)	6 700 415
	Less unpaid expenses-current year		1,762,295		I	2,071,551
	Add unpaid expenses-prior year				ı	430,945
	Amounts receivable relating to uninsured plans, prior year					430 , 940
					1	
	Amounts receivable relating to uninsured plans, current year		4 607 007	70.054		E 0E0 000
	TOTAL EXPENSES PAID (Lines 25 - 26 + 27 - 28 + 29)	376,350	4,607,207	76,251		5,059,808
	S OF WRITE-INS					
	Professional fees				i	
	Charitable contributions.					
	Summary of remaining write-ins for Line 24 from overflow page					
	Totals (Lines 2401 through 2403 plus 2498) (Line 24 above)		210,413			210,413

(a) Includes management fees of \$1,779,501 to affiliates and \$to non-affiliates.

EXHIBIT OF NET INVESTMENT INCOME

			1		2
			Collected	Ea	rned
			During Year	Durir	g Year
1.	U.S. Government bonds	(a)	46,638		38 , 263
1.1	Bonds exempt from U.S. tax	(a)	24,835		166,363
1.2	Other bonds (unaffiliated)	(a)	322,116		342,116
1.3		(a)			
2.1		(b)			
2.11	Preferred stocks of affiliates	(b)			
2.2	Common stocks (unaffiliated)	l ` ′			
2.21					
3.	Mortgage loans	(c)			
4.	Real estate	(d)			
5.	Contract loans				
6.	Cash, cash equivalents and short-term investments				(262)
7.	Derivative instruments				,
8.	Other invested assets	/			
9.	Aggregate write-ins for investment income			1	
10.	Total gross investment income		393,326		546,479
11.	Investment expenses			(a)	73,473
12.	Investment taxes, licenses and fees, excluding federal income taxes			(g)	
13.	Interest expense				
14.	Depreciation on real estate and other invested assets				
15.	Aggregate write-ins for deductions from investment income				
16.	Total deductions (Lines 11 through 15)				73.473
17.	Net investment income (Line 10 minus Line 16)				473,006
DETAI	LS OF WRITE-INS				-,
0901.					
0902.		ı			
0902.		1			
	Summary of remaining write-ins for Line 9 from overflow page				
	Sufficially of remaining write-ins for Line 9 from overflow page				
	T-t-1- (1 in 0004 th				
	Totals (Lines 0901 through 0903 plus 0998) (Line 9 above)				
1501.		<u> </u>			
1501. 1502.					
1501. 1502. 1503.					
1501. 1502. 1503. 1598.	Summary of remaining write-ins for Line 15 from overflow page				
1501. 1502. 1503.					
1501. 1502. 1503. 1598. 1599.	Summary of remaining write-ins for Line 15 from overflow page				
1501. 1502. 1503. 1598. 1599.	Summary of remaining write-ins for Line 15 from overflow page	22,4	13 paid for accrue	d interest on p	urchases.
1501. 1502. 1503. 1598. 1599. (a) Incl (b) Incl	Summary of remaining write-ins for Line 15 from overflow page Totals (Lines 1501 through 1503 plus 1598) (Line 15 above) udes \$	22,4	13 paid for accrue	d interest on p	urchases.
1501. 1502. 1503. 1598. 1599. (a) Incl (b) Incl (c) Incl	Summary of remaining write-ins for Line 15 from overflow page Totals (Lines 1501 through 1503 plus 1598) (Line 15 above) udes \$	22 ,4	13 paid for accrued pai	d interest on p	urchases.
1501. 1502. 1503. 1598. 1599. (a) Incl (b) Incl (c) Incl (d) Incl	Summary of remaining write-ins for Line 15 from overflow page	22,4	13 paid for accruedpaid for accruedpaid for accrued umbrances.	d interest on p	urchases. n purchases. urchases.
1501. 1502. 1503. 1598. 1599. (a) Incl (b) Incl (c) Incl (d) Incl (e) Incl	Summary of remaining write-ins for Line 15 from overflow page	22,4	13 paid for accruedpaid for accruedpaid for accrued umbrances.	d interest on p	urchases. n purchases. urchases.
1501. 1502. 1503. 1598. 1599. (a) Incl (b) Incl (c) Incl (d) Incl (e) Incl (f) Incl	Summary of remaining write-ins for Line 15 from overflow page	22,4	13 paid for accruedpaid for accruedpaid for accrued umbrancespaid for accrued	d interest on p d dividends or d interest on p	urchases. n purchases. urchases. urchases.
1501. 1502. 1503. 1598. 1599. (a) Incl (b) Incl (c) Incl (d) Incl (e) Incl (f) Incl (g) Incl	Summary of remaining write-ins for Line 15 from overflow page Totals (Lines 1501 through 1503 plus 1598) (Line 15 above) udes \$	22,4	13 paid for accruedpaid for accruedpaid for accrued umbrancespaid for accrued	d interest on p d dividends or d interest on p	urchases. n purchases. urchases. urchases.
1501. 1502. 1503. 1598. 1599. (a) Incl (b) Incl (c) Incl (d) Incl (e) Incl (g) Incl seg	Summary of remaining write-ins for Line 15 from overflow page	22,4	13 paid for accruedpaid for accruedpaid for accrued umbrancespaid for accrued	d interest on p d dividends or d interest on p	urchases. n purchases. urchases. urchases.

EXHIBIT OF CAPITAL GAINS (LOSSES)

	EXHIBIT	OF CAPIT	AL GAIN	9 (FO22E	5)	
		1	2	3	4	5
		Realized Gain (Loss) On Sales or Maturity	Other Realized Adjustments	Total Realized Capital Gain (Loss) (Columns 1 + 2)	Change in Unrealized Capital Gain (Loss)	Change in Unrealized Foreign Exchange Capital Gain (Loss)
1.	U.S. Government bonds	9,903		9,903		
1.1	Bonds exempt from U.S. tax					
1.2	Other bonds (unaffiliated)	11,530		11,530		
1.3	Bonds of affiliates					
2.1	Preferred stocks (unaffiliated)					
2.11	Preferred stocks of affiliates					
2.2	Common stocks (unaffiliated)					
2.21	Common stocks of affiliates					
3.	Mortgage loans					
4.	Real estate					
5.	Contract loans					
6.	Cash, cash equivalents and short-term investments					
7.	Derivative instruments					
8.	Other invested assets					
9.	Aggregate write-ins for capital gains (losses)					
10.	Total capital gains (losses)	51,542		51,542		
DETAI	LS OF WRITE-INS					
0901.						
0902.						
0903.						
0998.	Summary of remaining write-ins for Line 9 from overflow page					
0999.	Totals (Lines 0901 through 0903 plus 0998) (Line 9					

EXHIBIT OF NONADMITTED ASSETS

	EXHIBIT OF NONAL		2	3
		Current Year Total Nonadmitted Assets	Prior Year Total Nonadmitted Assets	Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1	Bonds (Schedule D)	Nonadilitied / 133013	140Hadifilted 7155ct5	(001. 2 = 001. 1)
	Stocks (Schedule D):			
	2.1 Preferred stocks			
	2.2 Common stocks			
3	Mortgage loans on real estate (Schedule B):			
0.	3.1 First liens			
	3.2 Other than first liens			
4	Real estate (Schedule A):			
٦.	4.1 Properties occupied by the company			
	4.2 Properties held for the production of income			
5	4.3 Properties held for sale			
3.	Cash (Schedule E-Part 1), cash equivalents (Schedule E-Part 2) and			
	short-term investments (Schedule DA)			
1	Contract loans			
i	Derivatives (Schedule DB).			
	Other invested assets (Schedule BA)			
İ	Receivables for securities			
	Securities lending reinvested collateral assets (Schedule DL)			
	Aggregate write-ins for invested assets		i	i
l	Subtotals, cash and invested assets (Lines 1 to 11)			
1	Title plants (for Title insurers only)			
14.	Investment income due and accrued		1	1
15.	Premiums and considerations:			
	15.1 Uncollected premiums and agents' balances in the course of collection.			
	Deferred premiums, agents' balances and installments cooker but eren d and not yet due	NE		
	15.3 Accrued retrospective premiums and contracts subject to red erm ation			
16.	Reinsurance:			
	16.1 Amounts recoverable from reinsurers			
	16.2 Funds held by or deposited with reinsured companies			
	16.3 Other amounts receivable under reinsurance contracts			
İ	Amounts receivable relating to uninsured plans			
İ	Current federal and foreign income tax recoverable and interest thereon		1	<u> </u>
1	Net deferred tax asset			
19.	Guaranty funds receivable or on deposit			
20.	Electronic data processing equipment and software			
21.	Furniture and equipment, including health care delivery assets			
22.	Net adjustment in assets and liabilities due to foreign exchange rates			
23.	Receivables from parent, subsidiaries and affiliates			
24.	Health care and other amounts receivable			
25.	Aggregate write-ins for other-than-invested assets			
26.	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)			
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts			
	Total (Lines 26 and 27)			
	LS OF WRITE-INS			
1101.				
i				
1				
	Summary of remaining write-ins for Line 11 from overflow page			
	Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)			
	Totals (Ellies TTOT tillough TTOO plus TTOO) (Ellie TT above)			
i		i	i	
	Summary of remaining write-ins for Line 25 from overflow page			
		•	+	<u>+</u>
2000.	Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	l	I	

NOTES TO FINANCIAL STATEMENTS

1. Summary of Significant Accounting Policies and Going Concern:

A. Description of Business

Old American Indemnity Company (the "Company") was formed as a corporation under the laws of the State of Kentucky on November 11, 1956. The Company, formerly known as Citizens Insurance Company, received its license from the State of Kentucky on May 30, 1957. The Company subsequently changed its name to Viceroy Insurance Company. On June 5, 2012, the Kentucky Department of Insurance approved the change of the Company's name to Old American Indemnity Company.

The Company prepares its statutory financial statements in conformity with accounting practices prescribed or permitted by the State of Kentucky. The State of Kentucky requires that insurance companies domiciled in Kentucky prepare their statutory basis financial statements in accordance with the National Association of Insurance Commissioners (NAIC) Accounting Practices and Procedures Manual, subject to any deviations prescribed or permitted by the Kentucky Insurance Commissioner. The impact of any permitted accounting practices on statutory surplus was not material.

A reconciliation of the Company's net income and capital and surplus between NAIC SAP and practices prescribed and permitted by the State of Kentucky is shown below:

NET INCOME	SSAP #	F/S Page	F/S Line #		December 31, 2021	December 31, 2020
(1) Old American Indemnity Company state basis (Page 4, Line 20, Columns 1 & 3)	XXX	XXX	XXX	\$	(709,774) \$	1,444,893
(2) State Prescribed Practices that increase/(decrease) NAIC SAP:	-	-	-		-	-
(3) State Permitted Practices that increase/(decrease) NAIC SAP:	-	-	-		-	-
(4) NAIC SAP (1-2-3=4)	XXX	XXX	XXX	\$	(709,774) \$	1,444,893
SURPLUS						
(5) Company state basis (Page 3, Line 37, Columns 1 & 2)	XXX	XXX	XXX	\$	10,850,296 \$	11,838,150
(6) State Prescribed Practices that increase/(decrease) NAIC SAP:	-	-	-		-	-
(7) State Permitted Practices that increase/(decrease) NAIC SAP:	-	-	-		-	-
(8) NAIC SAP (5-6-7=8)	XXX	XXX	XXX	\$_	10,850,296 \$	11,838,150

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

The Company prepares its statutory financial statements in conformity with the NAIC *Annual Statement Instructions*. The preparation of financial statements requires management to make estimates and assumptions that affect the reported amounts of certain assets and liabilities and disclosure of contingent liabilities at the date of the financial statements and the reported amounts of revenue and losses and expenses during the reporting period. Actual results could differ from those estimates.

Unpaid losses and loss adjustment expenses include an amount determined from individual case estimates, based on reports received from ceding companies for reinsurance, and an amount for losses incurred but not reported. Such liabilities are necessarily based on assumptions and estimates and while management believes the amount is adequate, the ultimate liability may be in excess of or less than the amount provided. The methods for making such estimates and for establishing the resulting liability is continually reviewed and adjustments are reflected in the period determined.

C. Accounting Policy

Premiums are earned over the terms of the related insurance policies and reinsurance contracts. Unearned premium reserves are established to cover the unexpired portion of premiums written. Such reserves are computed by pro rata methods and are based on reports received from ceding companies for reinsurance. Certain assets designated as non-admitted are excluded from the statutory balance sheet and changes in such amounts are charged or credited directly to unassigned surplus. Expenses incurred in connection with acquiring new insurance business, including such acquisition costs as commissions, are charged to operations as incurred. Expenses incurred are reduced for ceding allowances received or receivable.

Invested assets are valued according to statutory requirements and the basis of valuation adopted by the NAIC.

- (1) Short term investments are stated at amortized cost.
- (2) Bonds not backed by other loans are stated at amortized cost using the interest method.
- (3) (5) Not applicable.
- (6) Loan-backed securities are stated at either amortized cost or the lower of amortized cost or fair value. The retrospective adjustment method is used to value all securities except for interest only securities, securities where the yield had become negative, or EITF 99-20 eligible securities which are valued using the prospective method.
- (7) (9) Not applicable
- (10) The Company anticipates investment income as a factor in the premium deficiency calculation, in accordance with SSAP No. 53, Property-Casualty Contracts Premiums.
- (11) Unpaid losses and loss adjustment expenses include an amount determined from individual case estimates, based on reports received from ceding companies for reinsurance, and an amount for losses incurred but not reported. Such liabilities are necessarily based on assumptions and estimates and while management believes the amount is adequate, the ultimate liability may be in excess of or less than the amount provided. The methods for making such estimates and for establishing the resulting liability is continually reviewed and adjustments are reflected in the period determined.
- (12) (13) Not applicable.

D. Going Concern

According to management's evaluation, as of December 31, 2021, there were no principal conditions or events that raised substantial doubt about the Company's ability to continue as a going concern.

NOTES TO FINANCIAL STATEMENTS

2. Accounting Changes and Corrections of Errors: Not applicable.

3. Business Combinations and Goodwill: Not applicable.

4. **Discontinued Operations:** Not applicable.

5. Investments:

A. Mortgage Loans: Not applicable.

B. **Debt Restructuring**: Not applicable.

C. Reverse Mortgages: Not applicable.

D. Loan-Backed Securities:

- Prepayment assumptions for loan-backed securities were generated using a purchased prepayment model. The
 prepayment model uses several factors to estimate prepayment activity, including the time of year (seasonality), current
 levels of interest rates (refinancing incentive), economic activity (including housing turnover), and term and age of the
 underlying collateral (burnout, seasoning). On an ongoing basis, the rate of prepayment is monitored and the model is
 calibrated to reflect actual experience and market factors.
- 2. Aggregate Intent to sell or Aggregate Intent and Ability: Not applicable.
- 3. Securities with an other than temporary impairment recognized in the reporting period: Not applicable.
- Securities for which the amortized cost exceeds fair value but an other-than-temporary impairment has not been recognized in earnings as a realized loss: Not applicable.
- E. Repurchase Agreements and/or Securities Lending Transactions: Not applicable.
- F. Repurchase Agreements Transactions Accounted for as Secured Borrowing: Not applicable.
- G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing: Not applicable.
- H. Repurchase Agreements Transactions Accounted for as a Sale: Not applicable.
- I. Reverse Repurchase Agreements Transactions Accounted for as a Sale: Not applicable.
- J. Real Estate: Not applicable.
- K. Low Income Housing Tax Credits (LIHTC): Not applicable.
- L. Restricted Assets:
 - 1. Restricted Assets (Including Pledged) a) -i) and k) -n) are not applicable.

			Gross Restr	icted				8	Percenta	ge
		Current '								
	1 2 3 4 5									
				Protected Cell						
		G/A	Total	Account						Admitted
		Supporting	Protected	Assets				Total Current	Gross	Restricted
		Protected	Cell Account	Supporting			Increase/	Year	Restricted	to Total
Restricted Asset	Total General	Cell Account	Restricted	G/A Activity	Total (1 plus	Total From Prior	(Decrease)	Admitted	to Total	Admitted
Category	Account (G/A)	Activity (a)	Assets	(b)	3)	Year	(5 minus 6)	Restricted	Assets	Assets
j. On deposit with										
states	\$ 2,104,271	-	-	-	\$ 2,104,271	\$ 2,106,264	\$ (1,993)	\$ 2,104,271	3.1%	3.1%
o. Total Restricted										
Assets	\$ 2,104,271	-	-	-	\$ 2,104,271	\$ 2,106,264	\$ (1,993)	\$ 2,104,271	3.1%	3.1%

- 2. Assets Pledged as Collateral Not Captured in Other Categories: Not applicable.
- 3. Other Restricted Assets: Not applicable
- 4. Collateral Received and Reflected as Assets Within the Financial Statements: Not applicable.
- M. Working Capital Finance Investments: Not applicable.
- N. Offsetting and Netting of Assets and Liabilities: Not applicable.
- O. 5GI Securities: Not applicable.
- P. Short Sales: Not applicable.
- Q. Prepayment Penalty and Acceleration Fees: Not applicable.
- R. Cash Pool by Asset Type:

Asset Type	Percent Share
(1) Cash	100%
(2) Cash Equivalents	0%
(3) Short-Term Investments	0%
(4) Total	100%

NOTES TO FINANCIAL STATEMENTS

6. Joint Ventures, Partnerships and Limited Liability Companies: Not applicable.

7. Investment Income:

- A. **Due and Accrued Income was Excluded from Surplus on the Following Basis:** Surplus excludes due and accrued investment income if amounts are over 90 days past due.
- B. **Total Amount of Due and Accrued Income Excluded:** At December 31, 2021, the Company did not have any due and accrued investment income past due.
- **8. Derivative Instruments:** Not applicable.

9. Income Taxes:

A. The Components of Net Deferred Tax Asset at December 31 are as follows:

1.		_		17	2/31/2021					1:	2/31/2020						Change		
4.			(1)	14	(2)		(3)		(4)	<u> </u>	(5)		(6)		(7)		(8)	Т	(9)
			·-/		\- <i>'</i>		(Col 1+2)		1.7		1-7		(Col 4+5)	(Col 1-4)		(Col 2-5)		(Col 7+8)
		_ c	Ordinary	L	Capital		Total	_ (Ordinary	L	Capital	L	Total		Ordinary	L	Capital		Total
(a)	Gross Deferred Tax Assets	\$	69,664	\$	-	\$	69,664	\$	47,744	\$	-	\$	47,744	\$	21,920	\$	-	\$	21,920
(b)	Statutory Valuation Allowance	\$		Ś		Ś		\$		Ś		Ś		\$		\$		\$	
(c)	Adjustments Adjusted Gross Deferred Tax Assets (1a -	>	-	>	-	\$	-	\$	-	\$	-	>	-	>	-	>	-	>	-
(0)	1b)	\$	69,664	\$	_	\$	69,664	\$	47,744	\$	_	\$	47,744	\$	21,920	\$	_	\$	21,920
(d)	Deferred Tax Assets Nonadmitted	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
(e)	Subtotal Net Admitted Deferred Tax Asset									•								-	
	(1c - 1d)	\$	69,664	\$	-	\$	69,664	\$	47,744	\$	-	\$	47,744	\$	21,920	\$	-	\$	21,920
(f)	Deferred Tax Liabilities	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
(g)	Net Admitted Deferred Tax Asset/(Net																		
	Deferred Tax Liability) (1e - 1f)	\$	69,664	\$	-	\$	69,664	\$	47,744	\$	-	\$	47,744	\$	21,920	\$	-	\$	21,920
2.				12	2/31/2021					12	2/31/2020						Change		
			(1)		(2)		(3)		(4)		(5)		(6)		(7)		(8)		(9)
						((Col 1+2)						(Col 4+5)	(Col 1-4)		(Col 2-5)		(Col 7+8)
		C	Ordinary		Capital		Total	(Ordinary		Capital		Total	(Ordinary		Capital		Total
	ssion Calculation Components SSAP No. 101																		
(a)	Federal Income Taxes Paid In Prior Years	_		_		_		_		_		_		_		_		_	
(b)	Recoverable Through Loss Carrybacks. Adjusted Gross Deferred Tax Assets	\$	-	Ş	-	Ş	-	Ş	-	Ş	-	Ş	-	\$	-	\$	-	Ş	-
(0)	Expected To Be Realized (Excluding the																		
	Amount of Deferred Tax Assets From 2(a)																		
	above) After Application of the Threshold																		
	Limitation. (The Lesser of 2(b)1 and 2(b)2																		
	Below).	\$	69,664	\$	-	\$	69,664	\$	47,744	\$	-	\$	47,744	\$	21,920	\$	-	\$	21,920
	 Adjusted Gross Deferred Tax Assets 																		
	Expected to be Realized Following the																		
	Balance Sheet Date.	\$	69,664	\$	-	\$	69,664	\$	47,744	\$	-	\$	47,744	\$	21,920	\$	-	\$	21,920
	2. Adjusted Gross Deferred Tax Assets		100/		1001		4 647 005		100/		1001		4 760 564		1001		1004		(454.466)
(c)	Allowed per Limitation Threshold. Adjusted Gross Deferred Tax Assets		XXX		XXX	\$	1,617,095		XXX		XXX	\$	1,768,561		XXX		XXX	\$	(151,466)
(c)	(Excluding The Amount Of Deferred Tax																		
	Assets From 2(a) and 2(b) above) Offset by																		
	Gross Deferred Tax Liabilities.	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
(d)	Deferred Tax Assets Admitted as the									•								-	
	result of application of SSAP No. 101.																		
	Total (2(a) + 2(b) + 2(c))	\$	69,664	\$	-	\$	69,664	\$	47,744	\$	-	\$	47,744	\$	21,920	\$	-	\$	21,920
		_																	
3.			2021		2020														
(a)	Ratio Percentage Used to Determine																		
(d)	Recovery Period And Threshold Limitation																		
	Amount		392%		896%														
(b)	Amount of Adjusted Capital And Surplus		332/0		330/0														
(~)	Used to Determine Recovery Period And																		
	Threshold Limitation In 2(b)2 Above.	1	.0,780,632	1	1,790,406														
				_				_						ì					
4.			12/31	/202	21		12/31,	/20:	20		Ch	ang	e						

12/31/2021 12/31/2020 Change
(1) (2) (3) (4) (5) (6) (Col 1-3) (Col 2-4)

Ordinary

Ordinary

Capital

The Company does not have any impacts from Tax-Planning Strategies.

(a) Determination Of Adjusted Gross Deferred Tax Assets And Net Admitted Deferred Tax Assets, By Tax Character As A Percentage.

 Adjusted Gross DTAs Amount From Note 9A1(c) 	\$ 69,664	\$ _	\$ 47,744	\$ -	\$ 21,920	\$ _
2. Percentage Of Adjusted Gross DTAs By Tax						
Character Attributable To The Impact Of						
Tax Planning Strategies	0%	0%	0%	0%		
3. Net Admitted Adjusted Gross DTAs						
Amount From Note 9A1(e)	\$ 69,664	\$ -	\$ 47,744	\$ -	\$ 21,920	\$ -
4. Percentage Of Net Admitted Adjusted						
Gross DTAs By Tax Character Admitted						
Because Of The Impact Of Tax Planning						
Strategies	0%	0%	0%	0%		
<u> </u>						

(b) Does the Company's tax-planning strategies include the use of reinsurance? Yes ____ No _X_

NOTES TO FINANCIAL STATEMENTS

B. Deferred Tax Liabilities Not Recognized: There are no amounts on which the Company has not recognized deferred tax.

C. Current Income Taxes Incurred Consist of the Following Major Components:

			(1)		(2)	, .	(3)
			/24 /2024	1	/24 /2022		Col 1-2)
		12/	/31/2021	12/	31/2020	C	hange
1.	Current Income Tax	\$	-	\$	-	\$	-
2.	Deferred Tax Assets:						
	(a) Ordinary						
	(1) Discounting of unpaid losses	\$	21,509	\$	11,979	\$	9,530
	(2) Unearned premium reserves	\$	48,155	\$	35,765	\$	12,390
	(11) Net operating loss carry-forward	\$	-	\$	-	\$	-
	(99) Subtotal	\$	69,664	\$	47,744	\$	21,920
	(b) Statutory valuation allowance adjustment	\$	-	\$	-	\$	-
	(c) Nonadmitted	\$	-	\$	-	\$	-
	(d) Admitted ordinary deferred tax assets (2a99 - 2b - 2c)	\$	69,664	\$	47,744	\$	21,920
	(e) Capital	\$	-	\$	-	\$	-
	(f) Statutory valuation allowance adjustment	\$	-	\$	-	\$	-
	(g) Nonadmitted	\$	-	\$	-	\$	-
	(h) Admitted capital deferred tax assets (2e99 - 2f - 2g)	\$	-	\$	-	\$	-
	(i) Admitted deferred tax assets (2d + 2h)	\$	69,664	\$	47,744	\$	21,920
3.	Deferred Tax Liabilities:						
	(a) Ordinary	\$	-	\$	-	\$	-
	(b) Capital	\$	-	\$	-	\$	-
	(c) Deferred tax liabilities (a + b)	\$	-	\$	-	\$	-
4.	Net deferred tax assets/liabilities (2i - 3c)	\$	69,664	\$	47,744	\$	21,920

D. Significant Book to Tax Adjustments: The Company does not have any significant book to tax adjustments.

E. Additional Disclosures:

- The Company does not have net operating losses available for carryforward to future periods under its tax allocation agreement with Old American Capital Corporation.
- 2. There is no provision for federal and foreign income taxes incurred as of December 31, 2021.
- 3. The Company does not have any deposits admitted under Section 6603 of the Internal Revenue Service Code.

F. Consolidation of Federal Income Tax Return:

- 1. The Company's Federal Income Tax Return is consolidated with Old American Capital Corporation.
- 2. Under the terms of a tax allocation agreement between Old American Capital Corporation ("Old American Capital", formerly known as Portsmouth Capital Corporation), a Delaware corporation, and its subsidiaries, the tax liability of each subsidiary of Old American Capital, including that of the Company, is based upon separate return calculations. The Company is required to make payment to Old American Capital of an amount equal to its share of tax liability no earlier than thirty days prior to Old American Capital's filing date and no later than thirty days after the filing date. In the event the Company would be entitled to a refund of federal income tax for any tax year if it had filed a separate tax return, Old American Capital is required to pay the Company the refund amount when the Consolidated Return is filed by Old American Capital, and no later than thirty days after the refund amount is calculated. If for any taxable period the Company has an item of credit or loss that is not used to reduce its federal income tax liability for that period, that item of credit or loss shall be retained by the Company for possible future use in computing its separate return tax liability or its right to a refund.
- G. Federal or Foreign Income Tax Loss Contingencies: The Company does not have any federal or foreign income tax loss contingencies.
- H. Repatriation Transition Tax (RTT): The Company is not subject to the Repatriation Transition Tax (RTT).
- I. Alternative Minimum Tax (AMT) Credit: The Company does not have an Alternative Minimum Tax (AMT) Credit.

10. Information Concerning Parent, Subsidiaries and Affiliates:

A. Relationship of Parent, Subsidiaries and Affiliates: The Company is 100% owned by Old American Capital Corporation.

B. Transaction Information:

Under the terms of an administrative agreement, Old American Services is responsible for providing administrative support services to the Company, including accounting and information technology, product development, underwriting management and claims audit services in exchange for a fee. This fee is based on 2% of the gross written premium of the Company. In 2021 and 2020, the Company recorded \$1,779,501 and \$1,312,124, respectively, in fees paid or payable to Old American Services.

The Company paid a dividend of \$750,000 to its parent company Old American Capital Corporation on October 25, 2021.

The Company's parent company, Old American Capital Corporation, declared a surplus contribution of \$450,000 for year-end December 31, 2021. As of the statement date, the contribution is showing as a receivable from the parent company.

NOTES TO FINANCIAL STATEMENTS

C - O: Not applicable.

11. Debt:

A. Debt Related Items: Not applicable.

B. Federal Home Loan Bank Agreements: Not applicable.

12. Retirement Plans, Deferred Compensation, Post-employment Benefits and Compensated Absences and Other Postretirement Benefit Plans:

A - F: Not applicable.

G. Consolidated/Holding Company Plans: The Company's upstream parent has a 401(k) plan that follows all ERISA regulations and IRS Section 125 cafeteria regulations. The parent company matches employee contributions up to 6%. The Company has no legal obligation for benefits under this plan.

H – I: Not applicable.

13. Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations:

The Company has 2,000,000 Class A common shares authorized, issued and outstanding.

The Company has no preferred stock outstanding.

Without prior approval of its domiciliary commissioner, dividends to shareholders may not be paid except out of that part of the Company's surplus funds which is derived from any realized net profits. Surplus funds for the purposes of this calculation are defined as the excess of assets over liabilities, including capital stock as a liability. There are no other restrictions placed on the portion of the Company profits that may be paid as ordinary dividends to shareholders.

The Company paid \$750,000 in dividends in 2021. No dividends were paid by the Company in 2020.

The Company received no capital contributions in 2021 or 2020.

There were no restrictions placed on the Company's surplus, including for whom the surplus is being held.

The Company received \$450,000 of contributed surplus.

There is no stock held by the Company for special purposes.

There is no reduction of unassigned funds (surplus) represented or reduced by cumulative unrealized gains or losses.

The Company has not issued surplus debentures or similar obligations.

There have been no prior quasi-reorganizations.

- 14. Liabilities, Contingencies and Assessments: Not applicable.
- 15. Leases: Not applicable.
- 16. Information About Financial Instruments With Off-Balance Sheet Risk And Financial Instruments With Concentrations of Credit Risk: Not applicable.
- 17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities: Not applicable.
- 18. Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans: Not applicable.
- 19. Direct Premium Written/Produced by Managing General Agents/Third Party Administrators:

During 2021, the direct written premium of \$88,975,070 before policy fees was written by 5 active managing general agents and 1 managing general agent in run-off. All 6 managing general agents wrote premium that exceeded 5% of the Company's surplus. The managing general agents direct written premium before policy fees are as follows:

Name and Address of MGA	FEIN	Exclusive Contract	Types of Business Written	Types of Authority Granted	ect Premium ritten
Aggressive Insurance Services, LLC 28470 Avenue Stanford, Suite 250 Santa Clarita, CA 91355	20-8521100	No	Personal auto liability, physical damage and accidental death & dismemberment	Underwriting	\$ 62,734,718
Save Money Car Insurance 6528 E 101st St, Suite D1 #422 Tulsa, OK 74133	46-5338509	No	Personal auto liability and physical damage	Underwriting	\$ 10,183,766
Motion Auto, LLC 3782 S. Spinnaker Bay Drive Saratoga Springs, UT 84045	83-1141293	No	Personal auto liability and physical damage	Underwriting	\$ 7,331,343
Connect MGA 3700 W 15th St., Ste 200A Plano, TX 75075	45-1475095	No	Personal auto liability and physical damage	Underwriting	\$ 5,571,577
Embark General Insurance Agency, LLC 400 Northridge Rd, Suite 300 Atlanta, GA 30350-3354	83-0707283	No	Personal auto liability, physical damage and accidental death & dismemberment	Underwriting	\$ 2,313,550
Value Insurance MGA, LLC 2109 Lynngate Drive Birmingham, AL 35216	83-2582851	No	Personal auto liability and physical damage	Underwriting	\$ 840,117

NOTES TO FINANCIAL STATEMENTS

20. Fair Value Measurement:

The Company does not own any investments that are considered to be other than temporarily impaired. All bonds held are reported at amortized cost in the statement of financial position. Short term securities and cash equivalents are valued at amortized cost.

Fair value of the Company's invested assets is determined and reported for disclosure purposes in accordance with the *Purposes and Procedures Manual of the NAIC Investment Analysis Office* when available. For those investments not valued by the NAIC Securities Valuation Office, prices were obtained from an independent pricing service vendor such as Interactive Data Corporation, Merrill Lynch indices, Reuters, S&P or Bloomberg. Under certain circumstances, if neither an SVO price nor a vendor price is available, a price may be obtained from a broker.

Transfers between fair value levels are recognized as of the end of the reporting period. During the year of 2021, the Company did not have any transfers between Levels 1, 2 or 3 for assets measured and reported at fair value.

As of December 31, 2021, the fair value of the Company's financial instruments is summarized as below:

- A. Fair Value Measurements at Reporting Date: Not applicable.
- C. Fair Value Measurement for all Financial Instruments and Placement in the Fair Value Hierarchy as of December 31, 2021:

	Aggregate Fair Value	Admitted Assets	Level 1	Level 2	Level 3	Net Asset Value (NAV)	Not Practicable (Carrying Value)
Bonds Cash, cash equivalents and short-term	\$ 28,656,960	28,850,697	1,918,371	26,738,589	_	_	_
investments	1,680,272	1,680,272	1,680,272	_	_	_	_
Cash and invested assets	30,337,232	30,530,969	3,598,643	26,738,589			

- D. Not Practicable (Carrying Value): Not applicable.
- E. NAV Practical Expedient: Not applicable.

21. Other Items:

- A. Unusual or Infrequent Items: Not applicable.
- B. Troubled Debt Restructuring: Not applicable.
- C. Other Disclosures: The Company elected to use rounding in reporting amounts in this statement.
- D. Business Interruption Insurance Recoveries: Not applicable.
- E. State Transferable and Non-Transferable Tax Credits: Not applicable.
- F. Subprime Mortgage Related Risk Exposure: Not applicable.
- G. Insurance-Linked Securities (ILS) Contracts: Not applicable.
- H. The Amount that could be Realized on Life Insurance Where the Reporting Entity is Owner and Beneficiary or Has Otherwise Obtained Rights to Control the Policy: Not applicable.
- 22. Events Subsequent: None.
- 23. Reinsurance
 - A. Unsecured Reinsurance Recoverables:

NAIC Group No.	NAIC No.	ID Number	Name of Reinsurer	R	Int of Unsecured Leinsurance Lecoverable
00000	33499	38-2145898	DORINCO REINS CO	\$	3,093,927
03219	11551	35-2293075	ENDURANCE ASSUR CORP	\$	2,434,017
00311	14788	02-0170490	NGM INS CO	\$	5,949,959
00158	23680	47-0698507	ODYSSEY REINS CO	\$	4,404,920
3483	38636	13-3031176	PARTNER REINSURANCE CO OF THE	US \$	1,430,877

B. Reinsurance Recoverable in Dispute: Not applicable.

NOTES TO FINANCIAL STATEMENTS

C. Reinsurance Assumed and Ceded:

	Assumed Reinsurance			ance	Ceded Rei	nsurance	Net		
	Premium Reserve			mmission Equity	Premium Reserve	Commission Equity	Premium Reserve	Commission Equity	
Affiliates	\$	-	\$	-	1,146,541	229,426	(1,146,541)	(229,426)	
All Other		-		-	20,637,729	3,369,765	(20,637,729)	(3,369,765)	
Total	\$	-	\$	-	21,784,270	3,599,191	(21,784,270)	(3,599,191)	

Direct unearned premium reserve is \$22,930,810 as of December 31, 2021

- D. Uncollectible Reinsurance: Not applicable.
- E. Commutation of Ceded Reinsurance: Not applicable.
- F. Retroactive Reinsurance: Not applicable.
- G. Reinsurance Accounted for as a Deposit: Not applicable.
- H. Disclosure for the Transfer of Property and Casualty Run-off Agreements: Not applicable.
- I. Certified reinsurer Rating Downgraded or Status Subject to Revocation: Not applicable.
- J. Reinsurance Agreements Qualifying for Reinsurer Aggregation: Not applicable.
- 24. Retrospectively Rated Contracts and Contracts Subject to Redetermination: Not applicable.
- 25. Changes in Incurred Losses and Loss Adjustment Expenses:
 - A. **Development of Prior Year Losses and Loss Adjustment Expenses:** As of December 31, 2021, net reserves totaled \$2,048,486. As of December 31, 2021, \$815,223 has been paid for losses and loss adjustment expenses related to insured events of prior years. Reserves remaining for prior years are now \$265,054 as a result of reevaluations of unpaid claims and claim adjustment expenses. Therefore, during 2021, prior year losses and loss adjustment expenses developed favorably by \$60,562. The favorable development is generally the result of ongoing analysis of recent loss development trends.
 - B. Significant Changes in Methodologies and Assumptions Used in Calculating the Liability for Unpaid Losses and Loss Adjustment Expenses: Not applicable.
- 26. Intercompany Pooling Arrangements: Not applicable.
- **27. Structured Settlements:** Not applicable.
- 28. Health Care Receivables: Not applicable.
- 29. Participating Policies: Not applicable.
- 30. Premium Deficiency Reserves:
 - 1. Liability carried for premium deficiency reserves: \$60,326
 - 2. Date of the most recent evaluation of this liability: December 31, 2021
 - 3. Was anticipated investment income utilized in the calculation? Yes.
- 31. High Deductibles: Not applicable.
- 32. Discounting of Liabilities for Unpaid Losses or Unpaid Loss Adjustment Expenses: Not applicable.
- 33. Asbestos/Environmental Reserves: Not applicable.
- 34. Subscriber Savings Accounts: Not applicable.
- **35. Multiple Peril Crop Insurance:** Not applicable.
- **36.** Financial Guaranty Insurance Exposures: Not applicable.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

1.1	Is the reporting entity a member of an Insurance Holding Company System c which is an insurer?	consisting of two or more affiliated persons, one or more of
	If yes, complete Schedule Y, Parts 1, 1A, 2 and 3.	
1.2	If yes, did the reporting entity register and file with its domiciliary State Insurance regulatory official of the state of domicile of the principal insurer in the Holdin disclosure substantially similar to the standards adopted by the National Assoc Insurance Holding Company System Regulatory Act and model regulations standards and disclosure requirements substantially similar to those required by	ng Company System, a registration statement providing ciation of Insurance Commissioners (NAIC) in its Model pertaining thereto, or is the reporting entity subject to
1.3	State Regulating? KENTUCKY	
1.4	Is the reporting entity publicly traded or a member of a publicly traded group?	Yes [X] No []
1.5	If the response to 1.4 is yes, provide the CIK (Central Index Key) code issued by	, , , , , , , , , , , , , , , , , , , ,
2.1	Has any change been made during the year of this statement in the charter, by reporting entity?	Yes [] No [X]
2.2	If yes, date of change:	42/24/2040
3.1	State as of what date the latest financial examination of the reporting entity was State the as of date that the latest financial examination report became available date should be the date of the examined balance sheet and not the date the rep	e from either the state of domicile or the reporting entity. This
3.3	State as of what date the latest financial examination report became available to the reporting entity. This is the release date or completion date of the examinati date).	o other states or the public from either the state of domicile or
3.4	By what department or departments? KENTUCKY DEPARTMENT OF INSURAN	NCE
3.5	Have all financial statement adjustments within the latest financial examination statement filed with Departments?	on report been accounted for in a subsequent financial Yes [] No [] N/A [X]
3.6	Have all of the recommendations within the latest financial examination report be	een complied with? Yes [] No [] N/A [X]
4.1	During the period covered by this statement, did any agent, broker, sales represent combination thereof under common control (other than salaried employees control a substantial part (more than 20 percent of any major line of business major premiums) of:	of the reporting entity) receive credit or commissions for or
4.2	During the period covered by this statement, did any sales/service organizati	
	affiliate, receive credit or commissions for or control a substantial part (more t direct premiums) of:	than 20 percent of any major line of business measured on
	, p,	4.21 sales of new business? Yes [] No [X]
		4.22 renewals? Yes [] No [X]
5.1	Has the reporting entity been a party to a merger or consolidation during the peri	iod covered by this statement? Yes [] No [X]
	If yes, complete and file the merger history data file with the NAIC.	
5.2	If yes, provide the name of the entity, NAIC company code, and state of domic ceased to exist as a result of the merger or consolidation.	cile (use two letter state abbreviation) for any entity that has
	1 Name of Entity	2 3 NAIC Company Code State of Domicile
6.1	Has the reporting entity had any Certificates of Authority, licenses or registration	
0.0	or revoked by any governmental entity during the reporting period?	Yes [] No [X]
6.2	If yes, give full information	
7.1 7.2	Does any foreign (non-United States) person or entity directly or indirectly control	ol 10% or more of the reporting entity? Yes [X] No []
1.2	If yes, 7.21 State the percentage of foreign control	100.0 %
	7.21 State the percentage of foreign control 7.22 State the nationality(s) of the foreign person(s) or entity(s); or manager or attorney-in-fact and identify the type of entity(s) (e. in-fact).	r if the entity is a mutual or reciprocal, the nationality of its
	1 Nationality	2 Type of Entity
		· · · · · · · · · · · · · · · · · · ·
	BERMUDA. HOLI	DING COMPANY

GENERAL INTERROGATORIES

8.1 8.2	Is the company a subsidiary of a depository institution hold. If response to 8.1 is yes, please identify the name of the DI		ulated by the	Federal Reser	ve Board?	Yes [] No [X]
8.3 8.4	Is the company affiliated with one or more banks, thrifts or If response to 8.3 is yes, please provide the names and loc financial regulatory services agency [i.e. the Federal Reser Federal Deposit Insurance Corporation (FDIC) and the Sec regulator.	cations (city and state of the main office) over Board (FRB), the Office of the Comptr	oller of the Cu	irrency (OCC)	, the	Yes [] No [X]
	1	2	3	4	5	6	1
	A SCILLAGO NO DO DO	Location	EDD	000	FDIO	050	
	Affiliate Name	(City, State)	FRB	OCC	FDIC	SEC	
8.5	Is the reporting entity a depository institution holding compart of Federal Reserve System or a subsidiary of the reporting	entity?	,		Governors	Yes [] No [X]
8.6	If response to 8.5 is no, is the reporting entity a company o to the Federal Reserve Board's capital rule?			-	Yes [] No [X] N/A []
9.	What is the name and address of the independent certified DELOITTE & TOUCHE LLP, 2200 ROSS AVENUE, SUITE	E 1600, DALLAS, TX 75201					
	Has the insurer been granted any exemptions to the prohib requirements as allowed in Section 7H of the Annual Finan law or regulation?	cial Reporting Model Regulation (Model A				Yes [] No [X]
10.2	If the response to 10.1 is yes, provide information related to	o this exemption:					
10.3	Has the insurer been granted any exemptions related to allowed for in Section 18A of the Model Regulation, or subst		inancial Repo	orting Model F	Regulation as	Yes [] No [X]
10.4	If the response to 10.3 is yes, provide information related to	o this exemption:					
10.5	Has the reporting entity established an Audit Committee in	compliance with the domiciliary state insu	ırance laws?		Yes [X] No [] N/A []
10.6	If the response to 10.5 is no or n/a, please explain						
11.	consulting firm) of the individual providing the statement of	actuarial opinion/certification?					
40.4	WILLIS TOWERS WATSON / SALEH LALANI, 500 NORT					1 ooV	1 No 1 V
12.1	Does the reporting entity own any securities of a real estate	e notating company of otherwise notal real		•] No [X
		12.11 Name of Re					
		12.13 Total book/a					
12.2	If yes, provide explanation	12.10 10.01 50010	aajaotoa oarrj	ing value	Ψ		
13.	FOR UNITED STATES BRANCHES OF ALIEN REPORTIN	NG ENTITIES ONLY:					
13.1	What changes have been made during the year in the Unit	ed States manager or the United States to	rustees of the	reporting entit	y?		
	Does this statement contain all business transacted for the	, , ,	Branch on ris	ks wherever lo	ocated?	Yes [] No [
	Have there been any changes made to any of the trust inde	o ,			., -	L] No [
	If answer to (13.3) is yes, has the domiciliary or entry state Are the senior officers (principal executive officer, principal similar functions) of the reporting entity subject to a code of	al financial officer, principal accounting of		oller, or persor	Yes [ns performing] N/A []
	a. Honest and ethical conduct, including the ethical handle relationships;			personal and	l professional	103 [A] NO [
	b. Full, fair, accurate, timely and understandable disclosure c. Compliance with applicable governmental laws, rules an		d by the repor	ting entity;			
	d. The prompt internal reporting of violations to an appropri e. Accountability for adherence to the code.	-	de; and				
4.11	If the response to 14.1 is no, please explain:						
14.2	Has the code of ethics for senior managers been amended	!?				Yes [] No [X]
4.21	If the response to 14.2 is yes, provide information related to	o amendment(s).					
14.3	Have any provisions of the code of ethics been waived for	any of the specified officers?				Yes [] No [X

14.31 If the response to 14.3 is yes, provide the nature of any waiver(s).

GENERAL INTERROGATORIES

15.1	Is the reporting entity the SVO Bank List?	ne beneficiary of a Lett	ter of Credit that is unrelated to	reinsurance where the	ne issuing or confirming bank is not on the	e Yes [] No [X
15.2			nerican Bankers Association (A circumstances in which the Lett		and the name of the issuing or confirmined.	g	
		1	2		3	4	
	Ba Ass	nerican ankers ociation					
	N) Routing umber	Issuing or Confirming Bank Name		es That Can Trigger the Letter of Credit	Amount	
			BOARD (OF DIRECTOR	S		
16.	Is the purchase or sale thereof?	e of all investments of	f the reporting entity passed up	pon either by the boa	ard of directors or a subordinate commit	ttee Yes [X]	No [
17.	Does the reporting enthereof?	tity keep a complete p	permanent record of the proce	edings of its board of	of directors and all subordinate committ	ees Yes [X]	No [
18.					tees of any material interest or affiliation is likely to conflict with the official duties		No [
			FINANCI	IAL			
19.	Has this statement bee Accounting Principles)				rinciples (e.g., Generally Accepted	Yes []	No [X
20.1	Total amount loaned de	uring the year (inclusiv	re of Separate Accounts, exclus	sive of policy loans):	20.11 To directors or other officers	\$	
					20.12 To stockholders not officers 20.13 Trustees, supreme or grand	\$	
00.0	T				(Fraternal only)	\$	
20.2	Policy loans):	outstanding at the end	of year (inclusive of Separate A	Accounts, exclusive o	20.21 To directors or other officers	\$	
					20.22 To stockholders not officers	\$	
					20.23 Trustees, supreme or grand (Fraternal only)	\$	
21.1	Were any assets report obligation being reported		ubject to a contractual obligatio	n to transfer to anoth	er party without the liability for such	Yes [No [X
21.2	If yes, state the amoun	t thereof at December	31 of the current year:	21.21 Rented f		\$	
				21.22 Borrowe		\$	
				21.23 Leased f 21.24 Other	rom others	\$ \$	
22.1	Does this statement inc guaranty association as		sessments as described in the		structions other than guaranty fund or	Yes [
22.2	If answer is yes:			22.21 Amount	paid as losses or risk adjustment	\$	
					paid as expenses	\$	
				22.23 Other a	·	\$	
	• •		due from parent, subsidiaries of parent included in the Page 2 a	_	or this statement?	Yes [X]	
	•	·			y the third parties are not settled in	Yes []	
24.2	•	is yes, identify the thir	d-party that pays the agents an	d whether they are a	related party.		^
	[Nan	1 ne of Third-Party	Is the Third-	2 Party Agent a Related Party (Yes/No)		
			INV	ESTMENT			
25.01			es owned December 31 of curre on said date? (other than securi		the reporting entity has exclusive control,	in Yes [X]	No 1
	aotaai possessioii (or the reporting entity t	on care date: (other than securi	aco londing programs	o addi 00000 iii 20.00j	103 [//]	110 [

GENERAL INTERROGATORIES

25.02	If no, give full and com	plete information, relating	thereto							
25.03					g value for collateral and amount of loaned securities se Note 17 where this information is also provided)	, and				
25.04	For the reporting entity Capital Instructions.	y's securities lending prog	ram, report amount o	of collateral	for conforming programs as outlined in the Risk-Based					
25.05	For the reporting entity	's securities lending progr	ram, report amount of	collateral f	or other programs.	\$				
25.06	Does your securities outset of the contract?		102% (domestic secu	urities) and	105% (foreign securities) from the counterparty at the	ne Yes	l l No	[]	NA [X	1
25 07		ity non-admit when the co	llateral received from	the counte	rparty falls below 100%?	Yes			NA [X	•
					he Master Securities Lending Agreement (MSLA) to		1 1	. ,	[1
	conduct securities lend	ding?				Yes	[] No	[]	NA [X]
25.09	For the reporting entity	s securities lending progr	ram, state the amount	t of the follo	owing as of December 31 of the current year:					
		al fair value of reinvested o	·			\$				
	25.092 Tota	ll book adjusted/carrying v	alue of reinvested co	llateral asse	ets reported on Schedule DL, Parts 1 and 2	\$				
		al payable for securities ler	= :							
26.1	control of the reporting		ng entity sold or transf		at December 31 of the current year not exclusively un assets subject to a put option contract that is currently in			[X] No [1
26.2	If ves. state the amour	nt thereof at December 31	of the current year:					-		·
	,		6.21 Subject to repu	ırchase agr	eements	\$				
			26.22 Subject to reve	_						
			6.23 Subject to dolla	·	· ·					
					epurchase agreements					
			26.25 Placed under o		·					
					estricted as to sale – excluding FHLB Capital Stock	•				
			6.27 FHLB Capital S							
			6.28 On deposit with							
			6.29 On deposit with	_	•					
			_		cluding collateral pledged to an FHLB					
			_	lateral to FI	HLB – including assets backing funding agreements	•				
			26.32 Other			\$				
26.3	For category (26.26) p	rovide the following:								
	. o. oatogo., (20.20) p	Tovide the following.								
		1 Nature of Restriction			2 Description		3 Amoun	t		
		1 Nature of Restriction			Description		Amoun			,
27.1	Does the reporting ent	1 Nature of Restriction	· ·		Description	Yes		[]	No [X N/A [X	•
27.1 27.2 LINES	Does the reporting ent If yes, has a comprehe If no, attach a descript 27.3 through 27.5: FOR	Nature of Restriction ity have any hedging transensive description of the hion with this statement. R LIFE/FRATERNAL REP	edging program been	made avai	Description B?	Yes	Yes [N/A [X	•
27.1 27.2 LINES 27.3	Does the reporting ent If yes, has a comprehe If no, attach a descript 27.3 through 27.5: FOI Does the reporting ent rate sensitivity?	Nature of Restriction ity have any hedging transensive description of the hion with this statement. R LIFE/FRATERNAL REP	edging program been ORTING ENTITIES O	made avai	Description B? ilable to the domiciliary state?	Yes	Amoun			•
27.1 27.2 LINES 27.3	Does the reporting ent If yes, has a comprehe If no, attach a descript 27.3 through 27.5: FOI Does the reporting ent rate sensitivity?	Nature of Restriction ity have any hedging transensive description of the higher than the higher transfer of the	edging program been ORTING ENTITIES C dge variable annuity of	made avai DNLY: guarantees	Description B? ilable to the domiciliary state? subject to fluctuations as a result of interest	Yes	Yes [] No [[]	N/A [X] No [•
27.1 27.2 LINES 27.3	Does the reporting ent If yes, has a comprehe If no, attach a descript 27.3 through 27.5: FOI Does the reporting ent rate sensitivity?	1 Nature of Restriction ity have any hedging transensive description of the hion with this statement. R LIFE/FRATERNAL REPity utilize derivatives to here is YES, does the reporting	edging program been ORTING ENTITIES C dge variable annuity of g entity utilize: 27.41 Special accour	made avai DNLY: guarantees nting provisi	Description B? ilable to the domiciliary state? subject to fluctuations as a result of interest ion of SSAP No. 108	Yes	Yes [] No [Yes	[[N/A [X] No [] No [•
27.1 27.2 LINES 27.3	Does the reporting ent If yes, has a comprehe If no, attach a descript 27.3 through 27.5: FOI Does the reporting ent rate sensitivity?	Nature of Restriction ity have any hedging transensive description of the hion with this statement. R LIFE/FRATERNAL REPrity utilize derivatives to here is YES, does the reportin	edging program been ORTING ENTITIES C dge variable annuity of g entity utilize: 27.41 Special accour 27.42 Permitted accour	made avai DNLY: guarantees nting provisi	Description B? illable to the domiciliary state? subject to fluctuations as a result of interest ion of SSAP No. 108 ctice	Yes	Yes [] No [Yes Yes Yes	[]	N/A [X] No [] No [] No [•
27.1 27.2 LINES 27.3 27.4	Does the reporting ent If yes, has a comprehe If no, attach a descript 27.3 through 27.5: FOI Does the reporting ent rate sensitivity? If the response to 27.3	Nature of Restriction ity have any hedging transcensive description of the hion with this statement. R LIFE/FRATERNAL REPrity utilize derivatives to here is YES, does the reportin	edging program been ORTING ENTITIES C dge variable annuity of g entity utilize: 27.41 Special accour 27.42 Permitted accour 27.43 Other accounti	made avai DNLY: guarantees nting provisi punting prace ng guidance	Description B? ilable to the domiciliary state? subject to fluctuations as a result of interest ion of SSAP No. 108 stice e	Yes	Yes [] No [Yes	[]	N/A [X] No [] No [•
27.1 27.2 LINES 27.3 27.4	Does the reporting ent If yes, has a comprehe If no, attach a descript 27.3 through 27.5: FOR Does the reporting ent rate sensitivity? If the response to 27.3 By responding YES to	Nature of Restriction ity have any hedging transcensive description of the hion with this statement. R LIFE/FRATERNAL REPrity utilize derivatives to here is YES, does the reportin	edging program been ORTING ENTITIES C dge variable annuity of g entity utilize: 27.41 Special accour 27.42 Permitted accour 27.43 Other accounti	made avai DNLY: guarantees nting provisi punting prace ng guidance	Description B? illable to the domiciliary state? subject to fluctuations as a result of interest ion of SSAP No. 108 ctice	Yes	Yes [] No [Yes Yes Yes Yes	[[[[[N/A [X] No [] No [] No [] No [•
27.1 27.2 LINES 27.3 27.4	Does the reporting ent If yes, has a comprehe If no, attach a descript 27.3 through 27.5: FOI Does the reporting ent rate sensitivity? If the response to 27.3 By responding YES to the following:	Nature of Restriction iity have any hedging transcensive description of the hion with this statement. R LIFE/FRATERNAL REP ity utilize derivatives to he is YES, does the reportin 2 27.41 regarding utilizing t	edging program been ORTING ENTITIES C dge variable annuity of g entity utilize: 27.41 Special accourt 27.42 Permitted accourt 27.43 Other accounting	made avai DNLY: guarantees nting provisi punting prac ng guidance g provisions	Description B? ilable to the domiciliary state? subject to fluctuations as a result of interest ion of SSAP No. 108 stice e of SSAP No. 108, the reporting entity attests to	Yes	Yes [] No [Yes Yes Yes	[[[[[N/A [X] No [] No [] No [•
27.1 27.2 LINES 27.3 27.4	Does the reporting ent If yes, has a comprehe If no, attach a descript 27.3 through 27.5: FOF Does the reporting ent rate sensitivity? If the response to 27.3 By responding YES to the following: • The reporti	1 Nature of Restriction ity have any hedging transensive description of the hion with this statement. R LIFE/FRATERNAL REPity utilize derivatives to here is YES, does the reportin 2 27.41 regarding utilizing thing entity has obtained explains and the statement of the stateme	edging program been ORTING ENTITIES C dge variable annuity of g entity utilize: 27.41 Special accourt 27.42 Permitted accourt 27.43 Other accounting the special accounting	DNLY: guarantees nting provisi ounting prac ng guidance g provisions e domiciliar	Description B? ilable to the domiciliary state? subject to fluctuations as a result of interest ion of SSAP No. 108 stice e of SSAP No. 108, the reporting entity attests to	Yes	Yes [] No [Yes Yes Yes Yes	[[[[[N/A [X] No [] No [] No [] No [•
27.1 27.2 LINES 27.3 27.4	Does the reporting ent If yes, has a comprehe If no, attach a descript 27.3 through 27.5: FOF Does the reporting ent rate sensitivity? If the response to 27.3 By responding YES to the following: The reporti Hedging st Actuarial of	1 Nature of Restriction iity have any hedging transcensive description of the hion with this statement. R LIFE/FRATERNAL REP ity utilize derivatives to he is YES, does the reportin 2 27.41 regarding utilizing to the specientification has been obtained experiments.	edging program been ORTING ENTITIES C dge variable annuity of g entity utilize: 27.41 Special accourt 27.42 Permitted account the special accounting plicit approval from the ial accounting provisi ined which indicates	DNLY: guarantees nting provision guidance g provisions e domiciliar ons is cons that the he	Description B? ilable to the domiciliary state? subject to fluctuations as a result of interest ion of SSAP No. 108 ctice e of SSAP No. 108, the reporting entity attests to ry state. iistent with the requirements of VM-21. edging strategy is incorporated within the establishmen	t of VM	Yes [] No [Yes Yes Yes Yes Yes Yes	[[[[[N/A [X] No [] No [] No [] No [•
27.1 27.2 LINES 27.3 27.4	Does the reporting ent If yes, has a comprehe If no, attach a descript 27.3 through 27.5: FOI Does the reporting ent rate sensitivity? If the response to 27.3 By responding YES to the following: The reporti Hedging st Actuarial c 21 reserve	Nature of Restriction ity have any hedging transensive description of the hion with this statement. R LIFE/FRATERNAL REPrity utilize derivatives to here is YES, does the reporting 22 27.41 regarding utilizing the ing entity has obtained experimentally subject to the specientification has been obtained and provides the impact	edging program been ORTING ENTITIES C dge variable annuity of g entity utilize: 27.41 Special accour 27.42 Permitted accounting the special accounting plicit approval from the cial accounting provision ined which indicates of the hedging strate	DNLY: guarantees nting provision guidance g provisions e domiciliar ons is cons that the he gy within the	Description B? ilable to the domiciliary state? subject to fluctuations as a result of interest ion of SSAP No. 108 ctice e of SSAP No. 108, the reporting entity attests to ry state. isstent with the requirements of VM-21. edging strategy is incorporated within the establishmen the Actuarial Guideline Conditional Tail Expectation Amo	t of VM unt.	Yes [] No [Yes Yes Yes Yes Yes Yes	[[[[[N/A [X] No [] No [] No [] No [•
27.1 27.2 LINES 27.3 27.4	Does the reporting ent If yes, has a comprehe If no, attach a descript 27.3 through 27.5: FOR Does the reporting ent rate sensitivity? If the response to 27.3 By responding YES to the following: The reporti Hedging st Actuarial c 21 reserve Financial C Hedging S	Nature of Restriction ity have any hedging transcensive description of the hion with this statement. R LIFE/FRATERNAL REPrity utilize derivatives to he is YES, does the reporting 22 27.41 regarding utilizing the ingentity has obtained expertification has been obtained and provides the impact officer Certification has be	edging program been ORTING ENTITIES C dge variable annuity of g entity utilize: 27.41 Special account 27.42 Permitted account the special accounting plicit approval from the cial accounting provision ined which indicates of the hedging strate then obtained which in that the Clearly Defir	DNLY: guarantees nting provision guidance g provisions e domiciliar ons is cons that the he gy within the dicates that	Description B? ilable to the domiciliary state? subject to fluctuations as a result of interest ion of SSAP No. 108 ctice e of SSAP No. 108, the reporting entity attests to ry state. iistent with the requirements of VM-21. edging strategy is incorporated within the establishmen	t of VM unt. Defined	Yes [Yes Yes Yes Yes Yes Yes Yes Yes	[[[[[N/A [X] No [] No [] No [] No [•
27.1 27.2 LINES 27.3 27.4	Does the reporting ent If yes, has a comprehe If no, attach a descript 27.3 through 27.5: FOR Does the reporting ent rate sensitivity? If the response to 27.3 By responding YES to the following: The reporti Hedging st Actuarial c 21 reserve Financial C Hedging S in its actuar	Nature of Restriction ity have any hedging transcensive description of the hion with this statement. R LIFE/FRATERNAL REPrity utilize derivatives to here is YES, does the reporting 22 27.41 regarding utilizing the impact of	edging program been ORTING ENTITIES C dge variable annuity of gentity utilize: 27.41 Special account 27.42 Permitted account 27.43 Other accounting policit approval from the cial accounting provision ined which indicates a of the hedging strate then obtained which in that the Clearly Defir the efforts.	DNLY: guarantees Inting provision ong guidance g provisions e domiciliar ons is cons that the he gy within the dicates that ned Hedging	Description B? ilable to the domiciliary state? subject to fluctuations as a result of interest ion of SSAP No. 108 ctice e of SSAP No. 108, the reporting entity attests to ry state. iistent with the requirements of VM-21. edging strategy is incorporated within the establishmen he Actuarial Guideline Conditional Tail Expectation Amo t the hedging strategy meets the definition of a Clearly	t of VM unt. Defined ompany	Yes [No [Yes Yes Yes Yes Yes Yes		N/A [X] No [] No [] No [] No [
27.1 27.2 LINES 27.3 27.4 27.5	Does the reporting ent If yes, has a comprehe If no, attach a descript 27.3 through 27.5: FOR Does the reporting ent rate sensitivity? If the response to 27.3 By responding YES to the following: The reporti Hedging st Actuarial c 21 reserve Financial C Hedging S in its actual Were any preferred sto the issuer, convertible	Nature of Restriction ity have any hedging transcensive description of the hion with this statement. R LIFE/FRATERNAL REPrity utilize derivatives to here is YES, does the reporting 22 27.41 regarding utilizing the impact of	edging program been ORTING ENTITIES C dge variable annuity of gentity utilize: 27.41 Special account 27.42 Permitted account 27.43 Other accounting plicit approval from the ial accounting provision of the hedging strate then obtained which indicates of the hedging strate then obtained which in that the Clearly Defir the efforts. If December 31 of the	DNLY: guarantees Inting provision ong guidance g provisions e domiciliar ons is cons that the he gy within the dicates that ned Hedging	Description B? ilable to the domiciliary state? subject to fluctuations as a result of interest ion of SSAP No. 108 stice e of SSAP No. 108, the reporting entity attests to ry state. iistent with the requirements of VM-21. edging strategy is incorporated within the establishmen are Actuarial Guideline Conditional Tail Expectation Amo t the hedging strategy meets the definition of a Clearly of the Strategy is the hedging strategy being used by the conditional strategy is the hedging strategy being used by the conditional strategy is the hedging strategy being used by the conditional strategy is the hedging strategy being used by the conditional strategy being use	t of VM unt. Defined ompany	Yes [No [Yes Yes Yes Yes Yes Yes		N/A [X] No [] No [] No [] No [] No [X]
27.1 27.2 LINES 27.3 27.4 27.5	Does the reporting ent If yes, has a comprehe If no, attach a descript 27.3 through 27.5: FOI Does the reporting ent rate sensitivity? If the response to 27.3 By responding YES to the following: The report Hedging st Actuarial c 21 reserve Financial C Hedging S in its actual Were any preferred ste the issuer, convertible If yes, state the amour Excluding items in Sch entity's offices, vaults of pursuant to a custodia Considerations, F. Out	Nature of Restriction Nature of Restriction Nature of Restriction Nature of Restriction Nature of Restriction Nature of Restriction Nature of Restriction of the him on with this statement. Nature of Restriction of the him on with this statement. Nature of Restriction of the him or with a statement. Nature of Restriction of the him or with a statement of the special of t	edging program been ORTING ENTITIES Codge variable annuity of gentity utilize: 27.41 Special accourt. 27.42 Permitted accourt. 27.43 Other accounting the special accounting policit approval from the sial accounting provision of the hedging strate and the Clearly Defirm efforts. If December 31 of the of the current year. If Deposits, real estate and bank or trust comp.	DNLY: guarantees Inting provision ounting pracing guidance of provisions e domiciliar ons is cons that the he gy within the dicates that ned Hedging current yea e, mortgage and other s any in acco	Description B? ilable to the domiciliary state? subject to fluctuations as a result of interest ion of SSAP No. 108 stice e of SSAP No. 108, the reporting entity attests to ry state. iistent with the requirements of VM-21. edging strategy is incorporated within the establishmen are Actuarial Guideline Conditional Tail Expectation Amo t the hedging strategy meets the definition of a Clearly of the Strategy is the hedging strategy being used by the conditional strategy is the hedging strategy being used by the conditional strategy is the hedging strategy being used by the conditional strategy is the hedging strategy being used by the conditional strategy being use	t of VM unt. Defined ompany	Yes [Yes Yes Yes Yes Yes Yes Yes		N/A [X] No [] No [] No [] No [] No []
27.1 27.2 LINES 27.3 27.4 27.5	Does the reporting ent If yes, has a comprehe If no, attach a descript 27.3 through 27.5: FOF Does the reporting ent rate sensitivity? If the response to 27.3 By responding YES to the following: The report Hedging st Actuarial of 21 reserve Financial C Hedging S in its actua Were any preferred ste the issuer, convertible If yes, state the amour Excluding items in Schenitity's offices, vaults of pursuant to a custodia Considerations, F. Out Handbook?	Nature of Restriction It was any hedging transport of the hole of	edging program been ORTING ENTITIES Codge variable annuity of gentity utilize: 27.41 Special accourter. 27.42 Permitted accourter. 27.43 Other accounting the special accounting policit approval from the initial accounting provisioned which indicates for the hedging stratement obtained which indicates for the Clearly Defirm efforts. If December 31 of the confidence of the current year. If Deposits, real estatement of the current year. If Deposits, real estatement of the current year. If Deposits, real estatement of the current year. If Deposits, real estatement year, and Deposits, real estatement year, custodial or Safether year, custodial or Safether year, custodial or Safether year, custodial or Safether year, custodial or Safether year, custodial or Safether year, custodial or Safether year, custodial or Safether year, custodial or Safether year, custodial or Safether year,	DNLY: guarantees unting provision punting pracing guidance g provisions e domiciliar ons is cons that the he gy within the dicates that ned Hedging current yea e, mortgage and other s any in acco ekeeping ag	B? illable to the domiciliary state? subject to fluctuations as a result of interest ion of SSAP No. 108 ctice e of SSAP No. 108, the reporting entity attests to ry state. istent with the requirements of VM-21. edging strategy is incorporated within the establishmen he Actuarial Guideline Conditional Tail Expectation Amo to the hedging strategy meets the definition of a Clearly I g Strategy is the hedging strategy being used by the color ar mandatorily convertible into equity, or, at the option of the loans and investments held physically in the reporting securities, owned throughout the current year held ordance with Section 1, III – General Examination greements of the NAIC Financial Condition Examiners	t of VM unt. Defined ompany	Yes [Yes Yes Yes Yes Yes Yes Yes		N/A [X] No [] No [] No [] No [] No [X]
27.1 27.2 LINES 27.3 27.4 27.5	Does the reporting ent If yes, has a comprehe If no, attach a descript 27.3 through 27.5: FOF Does the reporting ent rate sensitivity? If the response to 27.3 By responding YES to the following: The report Hedging st Actuarial of 21 reserve Financial C Hedging S in its actua Were any preferred ste the issuer, convertible If yes, state the amour Excluding items in Schenitity's offices, vaults of pursuant to a custodia Considerations, F. Out Handbook?	Nature of Restriction It was any hedging transport of the hole of	edging program been ORTING ENTITIES Codge variable annuity of gentity utilize: 27.41 Special account: 27.42 Permitted account: 27.43 Other accounting the special accounting policit approval from the sial accounting provision in the dial accounting provision of the hedging strate the en obtained which indicates of the hedging strate the obtained which in efforts. If December 31 of the of the current year. If Deposits, real estate the en all stocks, bonds and bank or trust compons, Custodial or Safetts of the NAIC Finance.	DNLY: guarantees unting provision punting pracing guidance g provisions e domiciliar ons is cons that the he gy within the dicates that ned Hedging current yea e, mortgage and other s any in acco ekeeping ag	B? ilable to the domiciliary state? subject to fluctuations as a result of interest ion of SSAP No. 108 ctice e s of SSAP No. 108, the reporting entity attests to ry state. iistent with the requirements of VM-21. edging strategy is incorporated within the establishmen he Actuarial Guideline Conditional Tail Expectation Amo to the hedging strategy meets the definition of a Clearly of g Strategy is the hedging strategy being used by the color ar mandatorily convertible into equity, or, at the option of the loans and investments held physically in the reporting securities, owned throughout the current year held ordance with Section 1, III — General Examination greements of the NAIC Financial Condition Examiners on Examiners Handbook, complete the following:	t of VM unt. Defined ompany	Yes [Yes Yes Yes Yes Yes Yes Yes		N/A [X] No [] No [] No [] No [] No []
27.1 27.2 LINES 27.3 27.4 27.5	Does the reporting ent If yes, has a comprehe If no, attach a descript 27.3 through 27.5: FOF Does the reporting ent rate sensitivity? If the response to 27.3 By responding YES to the following: The report Hedging st Actuarial of 21 reserve Financial C Hedging S in its actua Were any preferred ste the issuer, convertible If yes, state the amour Excluding items in Schenitity's offices, vaults of pursuant to a custodia Considerations, F. Out Handbook?	Nature of Restriction ity have any hedging transport of the high in with this statement. R LIFE/FRATERNAL REP ity utilize derivatives to he its YES, does the reporting a state of the inity utilize derivatives to he its is YES, does the reporting a state of the inity utilize derivatives to he its is YES, does the reporting a state of the inity utilized derivatives to he its ingle entity has obtained experimentally and in the inity of the init	edging program been ORTING ENTITIES Codge variable annuity of gentity utilize: 27.41 Special accourter. 27.42 Permitted accourter. 27.43 Other accounting the special accounting policit approval from the initial accounting provisioned which indicates for the hedging stratement obtained which indicates for the Clearly Defirm efforts. If December 31 of the confidence of the current year. If Deposits, real estatement of the current year. If Deposits, real estatement of the current year. If Deposits, real estatement of the current year. If Deposits, real estatement year, and Deposits, real estatement year, custodial or Safether year, custodial or Safether year, custodial or Safether year, custodial or Safether year, custodial or Safether year, custodial or Safether year, custodial or Safether year, custodial or Safether year, custodial or Safether year, custodial or Safether year,	DNLY: guarantees Inting provision ounting practing guidance grovisions e domiciliar ons is cons that the he gy within the dicates that ned Hedging current yea e, mortgage and other s any in acco ekeeping accial Condition	B? illable to the domiciliary state? subject to fluctuations as a result of interest ion of SSAP No. 108 ctice e of SSAP No. 108, the reporting entity attests to ry state. istent with the requirements of VM-21. edging strategy is incorporated within the establishmen he Actuarial Guideline Conditional Tail Expectation Amo to the hedging strategy meets the definition of a Clearly I g Strategy is the hedging strategy being used by the color ar mandatorily convertible into equity, or, at the option of the loans and investments held physically in the reporting securities, owned throughout the current year held ordance with Section 1, III – General Examination greements of the NAIC Financial Condition Examiners	t of VM unt. Defined ompany	Yes [Yes Yes Yes Yes Yes Yes Yes		N/A [X] No [] No [] No [] No [] No []
27.1 27.2 LINES 27.3 27.4 27.5	Does the reporting ent If yes, has a comprehe If no, attach a descript 27.3 through 27.5: FOF Does the reporting ent rate sensitivity? If the response to 27.3 By responding YES to the following: The report Hedging st Actuarial of 21 reserve Financial C Hedging S in its actua Were any preferred ste the issuer, convertible If yes, state the amour Excluding items in Schenitity's offices, vaults of pursuant to a custodia Considerations, F. Out Handbook?	Nature of Restriction ity have any hedging transensive description of the hion with this statement. R LIFE/FRATERNAL REP ity utilize derivatives to here is YES, does the reporting the ingreen of the	edging program been ORTING ENTITIES Codge variable annuity of gentity utilize: 27.41 Special account: 27.42 Permitted account: 27.43 Other accounting provision of the special accounting provision of the hedging strate are nobtained which indicates and the Clearly Defirm of the current year. If December 31 of the of the current year. If Deposits, real estate and bank or trust compons, Custodial or Safents of the NAIC Finance of the NAIC Finance of the Safents of the NAIC Finance of the Safents of the NAIC Finance of Custodian(s)	DNLY: guarantees Inting provisi bunting praci- guarantees provisions e domiciliar ons is cons that the he gy within the dicates that ned Hedging current yea e, mortgage and other s any in acco ekeeping accial Condition	B? ilable to the domiciliary state? subject to fluctuations as a result of interest ion of SSAP No. 108 ctice e of SSAP No. 108, the reporting entity attests to ry state. iistent with the requirements of VM-21. dedging strategy is incorporated within the establishmen he Actuarial Guideline Conditional Tail Expectation Amo to the hedging strategy meets the definition of a Clearly of gStrategy is the hedging strategy being used by the color ar mandatorily convertible into equity, or, at the option of the loans and investments held physically in the reporting securities, owned throughout the current year held ordance with Section 1, III – General Examination greements of the NAIC Financial Condition Examiners on Examiners Handbook, complete the following:	t of VM unt. Defined ompany f \$	Yes [Yes Yes Yes Yes Yes Yes Yes		N/A [X] No [] No [] No [] No [] No []

GENERAL INTERROGATORIES

29.02	For all agreements that do not comply with the requirements of the NAIC Financial Condition Examiners Handbook, provide the name,	
	location and a complete explanation:	

1	2	3
N====(=)	1 4: (-)	0
Name(s)	Location(s)	Complete Explanation(s)

29.03 Have there been any changes, including name changes, in the custodian(s) identified in 29.01 during the current year?	Yes [1	No [X
23.05 Trave there been any changes, including hame changes, in the custodian(s) identified in 23.01 during the current year:	163 [J	NO [/\
29.04. If yes, give full and complete information relating thereto:				

1	2	3	4
		Date of	
Old Custodian	New Custodian	Change	Reason

29.05 Investment management – Identify all investment advisors, investment managers, broker/dealers, including individuals that have the authority to make investment decisions on behalf of the reporting entity. For assets that are managed internally by employees of the reporting entity, note as such. ["...that have access to the investment accounts"; "...handle securities"]

1 Name of Firm or Individual	2 Affiliation
NEW ENGLAND ASSET MANAGEMENT, INC	U

- 29.0597 For those firms/individuals listed in the table for Question 29.05, do any firms/individuals unaffiliated with the reporting entity (i.e., designated with a "U") manage more than 10% of the reporting entity's invested assets?
- 29.0598 For firms/individuals unaffiliated with the reporting entity (i.e., designated with a "U") listed in the table for Question 29.05, does the total assets under management aggregate to more than 50% of the reporting entity's invested assets?

Yes [X] No [] Yes [X] No []

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

1 Central Registration Depository Number	2 Name of Firm or Individual	3 Legal Entity Identifier (LEI)	4 Registered With	5 Investment Management Agreement (IMA) Filed
105900	NEW ENGLAND ASSET MANAGEMENT, INC	KUR85EPS460FZTFC130	SEC	NO

- 30.1 Does the reporting entity have any diversified mutual funds reported in Schedule D Part 2 (diversified according to the Securities and Exchange Commission (SEC) in the Investment Company Act of 1940 [Section 5 (b) (1)])?
 30.2 If yes, complete the following schedule:

Yes	ſ]	No	ſ	χ	1

1	2	3
CUSIP#	Name of Mutual Fund	Book/Adjusted Carrying Value
30.2999 TOTAL		

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

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

GENERAL INTERROGATORIES

		1 Statement (Admitted)	2	3 Excess of Statement over Fair Value (-), or Fair Value					
		Value	Fair Value	over Statement (+)					
	31.1 Bonds		, ,	(193,737)					
	31.2 Preferred Stocks			//00 707					
	31.3 Totals	28,850,697	28,656,960	(193,737)					
	Describe the sources or methods utiliz	· ·							
	•	Company's investment advisor, New En	-			F V	,		. ,
		ue determined by a broker or custodian	-		Ye	es [X]	No []
	If the answer to 32.1 is yes, does the for all brokers or custodians used as a	reporting entity have a copy of the broken pricing source?	ker's or custodian's pricing polic	y (hard copy or electronic copy)	Υe	es [X	1	No I	1
3		he reporting entity's process for determ	iining a reliable pricing source f	or purposes of disclosure of fair		·	,	•	
1	Have all the filing requirements of the	Purposes and Procedures Manual of th	e NAIC Investment Analysis Off	ice been followed?	Ye	es [X]	No []
2	If no, list exceptions:								
	J	contracted interest and principal payme ation of ultimate payment of all contract			,	Yes [1	No	ſΧ
5.	By self-designating PLGI securities, the a. The security was purchased price b. The reporting entity is holding card. The NAIC Designation was derive which is shown on a current priving regulators.	the reporting entity is certifying the follow in to January 1, 2018. Apital commensurate with the NAIC Designed from the credit rating assigned by an ate letter rating held by the insurer and	ignation reported for the security n NAIC CRP in its legal capacity available for examination by sta	/. as an NRSRO	,	Yes []		[X
	designated FE fund: a. The shares were purchased pric b. The reporting entity is holding ca c. The security had a public credit to January 1, 2019. d. The fund only or predominantly e. The current reported NAIC Desi CRP in its legal capacity as an f. The public credit rating(s) with ar	pital commensurate with the NAIC Destating(s) with annual surveillance assign molds bonds in its portfolio. In gnation was derived from the public creating surveillance assigned by an NAIC inual surveillance assigned by an NAIC	ignation reported for the security ed by an NAIC CRP in its legal dit rating(s) with annual surveilla CRP has not lapsed.	r. capacity as an NRSRO prior nce assigned by an NAIC					
	. 6 , 6	 Schedule BA non-registered private for equivalent investments with continued 	·		,	Yes []	No	[X
	(identified through a code (%) in those a. The investment is a liquid asset b. If the investment is with a nonrel renewal completed at the discre c. If the investment is with a relate of the transaction for which doc	investment schedules), the reporting e that can be terminated by the reporting ated party or nonaffiliated then it reflect ion of all involved parties. It party or affiliate, then the reporting ent umentation is available for regulator rev	ntity is certifying to the following entity on the current maturity da s an arms-length transaction wit ity has completed robust re-und iew.	: te. h erwriting					
	 d. Short-term and cash equivalent criteria in 37.a -37.c are reporte 	investments that have been renewed/ro d as long-term investments	lled from the prior period that do	not meet the					
		d short-term or cash equivalent investm	ents in accordance with these c	riteria? Yes	1	No [1	l NA	ſΧ

GENERAL INTERROGATORIES

OTHER

38.1	Amount of payments t	o trade associations, service organizations and statistical or rating bureaus, if any?	\$	7,119
38.2		organization and the amount paid if any such payment represented 25% or more of the organizations, and statistical or rating bureaus during the period covered by this statement.	e total payments to tra	de
		1 Name	2 Amount Paid	
		INDEPENDENT STATISTICAL SERVICES	\$7,119	

39.1 Amount of payments for legal expenses, if any?

\$ 141,490

39.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payments for legal expenses during the period covered by this statement.

1 Name	2 Amount Paid
GREENBERG TAURIG, P.A	\$41,924
LOCKE LORD LLP.	\$98,259
	,

40.1 Amount of payments for expenditures in connection with matters before legislative bodies, officers, or departments of government, if any? \$

40.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payment expenditures in connection with matters before legislative bodies, officers, or departments of government during the period covered by this statement.

1	2
Name	Amount Paid

GENERAL INTERROGATORIES

PART 2 - PROPERTY & CASUALTY INTERROGATORIES

1.1	Does the reporting entity have any direct Medicare Supp	lement Insurance in force?	?			Yes [] No [X]
1.2	If yes, indicate premium earned on U. S. business only.					\$
1.3	What portion of Item (1.2) is not reported on the Medicar	e Supplement Insurance E	xperience E	Exhibit?		\$
	1.31 Reason for excluding					
1.4	Indicate amount of earned premium attributable to Canad	dian and/or Other Alien no	t included in	Item (1.2) above		\$
1.5	Indicate total incurred claims on all Medicare Supplement	nt insurance.				\$
1.6	Individual policies:					
			Most curren	t three years:		
			1.61 Total	premium earned		\$
			1.62 Total	incurred claims		\$
			1.63 Numb	per of covered lives		
			All years pri	or to most current thre	e years:	
			1.64 Total	premium earned		\$
			1.65 Total	incurred claims		\$
			1.66 Numb	per of covered lives		
1.7	Group policies:					
			Most curren	t three years:		
			1.71 Total	premium earned		\$
			1.72 Total	incurred claims		\$
			1.73 Numb	per of covered lives		
			All years pri	or to most current thre	e years:	
			1.74 Total	premium earned		 \$
			1.75 Total	incurred claims		\$
			1.76 Numb	per of covered lives		
2.	Health Test:					
				1		2
				Current Year		Prior Year
	2.1	Premium Numerator	\$			
	2.2	Premium Denominator	\$	8,854,372	\$	6,463,791
	2.3	Premium Ratio (2.1/2.2)				
	2.4	Reserve Numerator		6,042		10 , 109
	2.5	Reserve Denominator		3,195,026	\$	1,992,387
	2.6	Reserve Ratio (2.4/2.5)		0.002		0.005
3.1	Did the reporting entity issue participating policies during					Yes [] No [X]
3.2	If yes, provide the amount of premium written for particip	- : :		-		¢
						\$ \$
			0.22 Non-p	articipating policies		Ψ
4.	For Mutual reporting entities and Reciprocal Exchanges	only:				
4.1	Does the reporting entity issue assessable policies?					Yes [] No [X]
4.2	Does the reporting entity issue non-assessable policies?					
4.3	If assessable policies are issued, what is the extent of th					
4.4	Total amount of assessments paid or ordered to be paid	during the year on deposit	t notes or co	intingent premiums		\$
5.	For Reciprocal Exchanges Only:					
5.1	Does the exchange appoint local agents?					Yes [] No [X]
5.2	If yes, is the commission paid:					
				Attorney's-in-fact com		
				irect expense of the ex	change	
5.3	What expenses of the Exchange are not paid out of the	compensation of the Attorn	ev-in-fact?			
0.0		•	•			
5.35.45.5						

GENERAL INTERROGATORIES PART 2 - PROPERTY & CASUALTY INTERROGATORIES

6.1	What provision has this reporting entity made to protect itself from an excessive loss in the event of a catastrophe under a workers' compensation contract issued without limit of loss:					
	The Company does not write workers' compensation					
6.2	Describe the method used to estimate this reporting entity's probable maximum insurance loss, and identify the type of insured exposures comprising that probable maximum loss, the locations of concentrations of those exposures and the external resources (such as consulting firms or computer software models), if any, used in the estimation process:					
	The Company writes property damage coverage on a direct basis in Alabama, Arizona, Georgia, Indiana, Louisiana, Oklahoma, South Carolina, and Utah. The Company evaluates its exposures by zip code and county					
6.3	What provision has this reporting entity made (such as a catastrophic reinsurance program) to protect itself from an excessive loss arising from the types and concentrations of insured exposures comprising its probable maximum property insurance loss?					
	The Company's marketing efforts have been focused on achieving a spread of risk to minimize catastrophe exposure. The Company participates in multiple reinsurance contracts as well as a Catastrophe Reinsurance program that provides additional protection from excessive losses					
6.4	Does the reporting entity carry catastrophe reinsurance protection for at least one reinstatement, in an amount sufficient to cover its estimated probable maximum loss attributable to a single loss event or occurrence?	Yes	[]	No []	Х]
6.5	If no, describe any arrangements or mechanisms employed by the reporting entity to supplement its catastrophe reinsurance program or to hedge its exposure to unreinsured catastrophic loss					
	The Company is party to multiple reinsurance contracts that provide protection from covered claims, including catastrophe risks					
7.1	Has the reporting entity reinsured any risk with any other entity under a quota share reinsurance contract that includes a provision that would limit the reinsurer's losses below the stated quota share percentage (e.g., a deductible, a loss ratio corridor, a loss cap, an aggregate limit or any similar provisions)?				No [2	
7.2 7.3	If yes, indicate the number of reinsurance contracts containing such provisions					
8.1	provision(s)? Has this reporting entity reinsured any risk with any other entity and agreed to release such entity from liability, in whole or in part, from any	Yes	[]	No []
8.2	loss that may occur on this risk, or portion thereof, reinsured?	Yes	[]	No [2	Х]
9.1	Has the reporting entity ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates) for which during the period covered by the statement: (i) it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; (ii) it accounted for that contract as reinsurance and not as a deposit; and (iii) the contract(s) contain one or more of the following features or other features that would have similar results:					
	(a) A contract term longer than two years and the contract is noncancellable by the reporting entity during the contract term;					
	(b) A limited or conditional cancellation provision under which cancellation triggers an obligation by the reporting entity, or an affiliate of the reporting entity, to enter into a new reinsurance contract with the reinsurer, or an affiliate of the reinsurer;					
	(c) Aggregate stop loss reinsurance coverage;(d) A unilateral right by either party (or both parties) to commute the reinsurance contract, whether conditional or not, except for such provisions which are only triggered by a decline in the credit status of the other party;					
	(e) A provision permitting reporting of losses, or payment of losses, less frequently than on a quarterly basis (unless there is no activity during the period); or					
	(f) Payment schedule, accumulating retentions from multiple years or any features inherently designed to delay timing of the reimbursement to the ceding entity	Yes	[]	No []	Х]
9.2	Has the reporting entity during the period covered by the statement ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates), for which, during the period covered by the statement, it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; excluding cessions to approved pooling arrangements or to captive insurance companies that are directly or indirectly controlling, controlled by, or under common control with (i) one or more unaffiliated policyholders of the reporting entity, or (ii) an association of which one or more unaffiliated policyholders of the reporting entity is a member where:					
	(a) The written premium ceded to the reinsurer by the reporting entity or its affiliates represents fifty percent (50%) or more of the entire direct and assumed premium written by the reinsurer based on its most recently available financial statement; or					
	(b) Twenty–five percent (25%) or more of the written premium ceded to the reinsurer has been retroceded back to the reporting entity or its affiliates in a separate reinsurance contract.	Yes	[X]	No []
9.3	If yes to 9.1 or 9.2, please provide the following information in the Reinsurance Summary Supplemental Filing for General Interrogatory 9: (a) The aggregate financial statement impact gross of all such ceded reinsurance contracts on the balance sheet and statement of					
	income; (b) A summary of the reinsurance contract terms and indicate whether it applies to the contracts meeting the criteria in 9.1 or 9.2; and					
	(c) A brief discussion of management's principle objectives in entering into the reinsurance contract including the economic purpose to be achieved.					
9.4	Except for transactions meeting the requirements of paragraph 36 of SSAP No. 62R - Property and Casualty Reinsurance, has the reporting entity ceded any risk under any reinsurance contract (or multiple contracts with the same reinsurer or its affiliates) during the period covered by the financial statement, and either:					
	(a) Accounted for that contract as reinsurance (either prospective or retroactive) under statutory accounting principles ("SAP") and as a deposit under generally accepted accounting principles ("GAAP"); or					
9.5	(b) Accounted for that contract as reinsurance under GAAP and as a deposit under SAP? If yes to 9.4, explain in the Reinsurance Summary Supplemental Filing for General Interrogatory 9 (Section D) why the contract(s) is	Yes	[]	No []	Х]
9.6	treated differently for GAAP and SAP. The reporting entity is exempt from the Reinsurance Attestation Supplement under one or more of the following criteria:					
	(a) The entity does not utilize reinsurance; or,	Yes	[]	No []	Χ]
	(b) The entity only engages in a 100% quota share contract with an affiliate and the affiliated or lead company has filed an attestation supplement; or	Yes	[]	No [2	Х]
	(c) The entity has no external cessions and only participates in an intercompany pool and the affiliated or lead company has filed an attestation supplement.	Yes	[]	No []	Х]
10.	If the reporting entity has assumed risks from another entity, there should be charged on account of such reinsurances a reserve equal to that which the original entity would have been required to charge had it retained the risks. Has this been done?	Yes [] No	[]	N/A	[X]

GENERAL INTERROGATORIES

PART 2 - PROPERTY & CASUALTY INTERROGATORIES

	If yes, give full information					Yes	[]	No	[X]
12.1	If the reporting entity recorded accretion the amount of corresponding liabiliti	ued retrospective premiums es recorded for:	on insurance contracts on	Line 15.3 of the asset sch	edule, Page 2, state				
	Of the amount on Line 15.3, Page 2 If the reporting entity underwrites co	l, state the amount that is se	ecured by letters of credit, of credit, of credit, of compensations are unclassed in the compensations of the compensations are unclassed in the compensations of the compensations are unclassed in the compensations of the compensations are unclassed in the compensations of the compensations are unclassed in the compensations of the compensations are unclassed in the compensations of the compensations are unclassed in the compensations of the compensations are unclassed in the compensations of the compensations are unclassed in the compensations are unclassed in the compensations are unclassed in the compensations are unclassed in the compensations are unclassed in the compensations are unclassed in the compensations are unclassed in the compensations are unclassed in the compensations are unclassed in the compensations are unclassed in the compensation are unclassed in the comp	collateral and other funds?. ition, are premium notes or	\$ promissory notes				
12.4	If yes, provide the range of interest 12.41 From	rates charged under such n	otes during the period cove	ered by this statement:					%
	Are letters of credit or collateral and promissory notes taken by a reportile losses under loss deductible feature	other funds received from ing entity, or to secure any oes of commercial policies?	insureds being utilized by the reporting entity's repo	ne reporting entity to secur orted direct unpaid loss res	e premium notes or erves, including unpaid			No	
12.6					•				
13.1 13.2	Does any reinsurance contract cons	sidered in the calculation of	this amount include an agg	regate limit of recovery wit	hout also including a	Vec		28 , No	
13.3	State the number of reinsurance co	ntracts (excluding individual	facultative risk certificates	. but including facultative p	rograms, automatic				
14.1 14.2	If yes, please describe the method	of allocating and recording r	einsurance among the ced	ants:		Yes	[]	No	[X]
14.3						Yes	[]	No	[]
	If the answer to 14.3 is no, are all the If the answer to 14.4 is no, please e	e methods described in 14. xplain:	2 entirely contained in writt	en agreements?		Yes	[]	No	[]
	Has the reporting entity guaranteed If yes, give full information	any financed premium acco	ounts?			Yes	[]	No	[X]
16.1	Does the reporting entity write any w	varranty business?				Yes	[]	No [[X]
	If yes, disclose the following informa	ation for each of the followin	g types of warranty covera	ge:					
	, ,		· ,	•					
			Direct Losses	Direct Written	4 Direct Premium Unearned	Dire	5 ect Pr Earn	emium ed	n
16.11	Home	\$	\$	\$	\$. \$			
16.12	Products	\$	\$	\$	\$. \$			
		\$							

^{*} Disclose type of coverage:

GENERAL INTERROGATORIES PART 2 - PROPERTY & CASUALTY INTERROGATORIES

17.1		thorized reinsurance in Schedule F – Part 3 that is exempt from the statuto		Yes []	No [X]		
	Incurred but not reported losses on contracts in force prior to provision for unauthorized reinsurance. Provide the following inf	July 1, 1984, and not subsequently renewed are exempt from the statuto formation for this exemption:	ry					
		Gross amount of unauthorized reinsurance in Schedule F $-$ Part 3 exempt from the statutory provision for unauthorized reinsurance	\$					
	17.12	Unfunded portion of Interrogatory 17.11	\$					
	17.13	17.13 Paid losses and loss adjustment expenses portion of Interrogatory 17.11 17.14 Case reserves portion of Interrogatory 17.11						
	17.14							
	17.15							
	17.16	Unearned premium portion of Interrogatory 17.11	\$					
	17.17	Contingent commission portion of Interrogatory 17.11	\$					
18.1	Do you act as a custodian for health savings accounts?			Yes []	No [X]		
18.2	If yes, please provide the amount of custodial funds held as of the	ne reporting date.	\$					
18.3	Do you act as an administrator for health savings accounts?			Yes []	No [X]		
		of the reporting date.						
19.		, eligible or writing business in at least two states?		Yes [)	Χ]	No []		
19.1	If no, does the reporting entity assume reinsurance business that	at covers risks residing in at least one state other than the state of domicile	of	1 ooV	1	No I I		

FIVE-YEAR HISTORICAL DATA

Show amounts in whole dollars only, no cents; show percentages to one decimal place, i.e., 17.6. 2021 2020 2019 2018 2017 Gross Premiums Written (Page 8, Part 1B, Cols. 1, 2 & 3) 1. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4) 1.633.360 .66.975.940 50 279 211 49.141.769 .2.339.982 13.082.881 652.903 1.371.574 Property lines (Lines 1, 2, 9, 12, 21 & 26). 21.641.125 14.365.240 Property and liability combined lines (Lines 3, 4, 5, 3. 8, 22 & 27). All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34) .5.172.615 .4.423.524 4.967.492 .90.092 (27.277)5. Nonproportional reinsurance lines (Lines 31, 32 & 33) 6. Total (Line 35) .93,789,679 .69,067,975 .67, 192, 142 .2,376,355 .3,684,279 Net Premiums Written (Page 8, Part 1B, Col. 6) 7. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, .2,488.749 .1,557.190 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4) 3 279 798 69 668 104 903 1.037.056 10.145 8. Property lines (Lines 1, 2, 9, 12, 21 & 26) 683.779 401.292 36.125 Property and liability combined lines 9. (Lines 3, 4, 5, 8, 22 & 27) All other lines 10. (27,277) (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34) 4.832.509 .3.510.781 3.543.747 .90.092 11. Nonproportional reinsurance lines (Lines 31, 32 & 33) .. 12. Total (Line 35) .9,149,364 .6,683,310 5 502 229 169 905 113 751 Statement of Income (Page 4) 13. Net underwriting gain (loss) (Line 8) (1.234.322)1.252.693 523.916 (103.515) (148.021).524,548 192,200 141,840 Net investment gain (loss) (Line 11) .221,649 ..79,326 14. Total other income (Line 15). .75,000 Dividends to policyholders (Line 17) 17. Federal and foreign income taxes incurred 18. Net income (Line 20) (709.774)1.444.893 745.565 113.325 (68.695)Balance Sheet Lines (Pages 2 and 3) Total admitted assets excluding protected cell business (Page 2, Line 26, Col. 3) 19. .68,076,972 48,406,415 .20.588.058 11,061,604 12,151,896 20 Premiums and considerations (Page 2, Col. 3) .4,915,130 367,856 271,987 .6,054,451 3,111,929 20.1 In course of collection (Line 15.1) 18,893,678 13,793,099 .2,016,248 .414,816 .548,438 20.2 Deferred and not yet due (Line 15.2) 20.3 Accrued retrospective premiums (Line 15.3) Total liabilities excluding protected cell business (Page 3, Line 26) .57,226,676 36,568,265 10,044,895 1,461,656 2,665,273 Losses (Page 3, Line 1) ... 1,758,746 977.086 .463,251 112.823 199.605 23 Loss adjustment expenses (Page 3, Line 3) 289 740 163 752 77 096 20 926 37 878 1,146,540 .632,030 .39,253 .42,012 .851,549 24. Unearned premiums (Page 3, Line 9) 25. Capital paid up (Page 3, Lines 30 & 31). .2.500.000 2.500.000 2.500.000 .2.500.000 2,500,000 Surplus as regards policyholders (Page 3, Line 37) 10,850,296 11,838,150 10,543,163 .9,599,948 .9,486,623 Cash Flow (Page 5) 27. Net cash from operations (Line 11). (523.986). (483,553) (375,003) 249.712 .537,395 Risk-Based Capital Analysis 10.850.296 11.838.150 10.543.163 9.599.948 9.486.623 28. Total adjusted capital 29. Authorized control level risk-based capital ..1.312.247 .1.480.910 126.430 .271.865 .2.753.309 Percentage Distribution of Cash, Cash Equivalents and Invested Assets (Page 2, Col. 3)(Item divided by Page 2, Line 12, Col. 3) x 100.0 Bonds (Line 1) .94.5 .87.6 .78.2 72.9 .78.0 Stocks (Lines 2.1 & 2.2) ... 32. Mortgage loans on real estate (Lines 3.1 and 3.2) 33. Real estate (Lines 4.1, 4.2 & 4.3) Cash, cash equivalents and short-term investments 34. 5 5 12 4 21.8 27 1 21 2 (Line 5) Contract loans (Line 6) 35. Derivatives (Line 7)... 37. Other invested assets (Line 8) 38 Receivables for securities (Line 9). 8.0. Securities lending reinvested collateral assets (Line 39. 10). 40. Aggregate write-ins for invested assets (Line 11) 41. Cash, cash equivalents and invested assets (Line 12) 100.0 100.0 100.0 100.0 100.0 nvestments in Parent, Subsidiaries and Affiliates 42. Affiliated bonds, (Sch. D, Summary, Line 12, Col. 1) Affiliated preferred stocks 43. (Sch. D, Summary, Line 18, Col. 1) Affiliated common stocks 44. (Sch. D, Summary, Line 24, Col. 1) Affiliated short-term investments (subtotals included 45. in Schedule DA Verification, Col. 5, Line 10). 46. Affiliated mortgage loans on real estate 47. All other affiliated ... 48. Total of above Lines 42 to 47 Total Investment in parent included in Lines 42 to 47 above. Percentage of investments in parent, subsidiaries and affiliates to surplus as regards policyholders (Line 48 above divided by Page 3, Col. 1, Line 37 x 100.0)

FIVE-YEAR HISTORICAL DATA

(Continued) 2021 2020 2019 2018 2017 Capital and Surplus Accounts (Page 4) 51. Net unrealized capital gains (losses) (Line 24) (750,000) 52. Dividends to stockholders (Line 35) Change in surplus as regards policyholders for the year (Line 38) .1,294,987 943,215 113,325 (68,695) (987,854) Gross Losses Paid (Page 9, Part 2, Cols. 1 & 2) Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)39, 162, 733 .25, 152, 547 10,068,683 .2,158,236 .4,857,786 .1,070,503 14.075.871 6.854.045 4.091.583 405.363 55. Property lines (Lines 1, 2, 9, 12, 21 & 26) Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27) ... 57. All other lines 10.000 10.372 (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34) Nonproportional reinsurance lines (Lines 31, 32 & 33) 58. 59. Total (Line 35) 53.248.976 32.016.592 14.160.266 2.563.599 5.928.289 Net Losses Paid (Page 9, Part 2, Col. 4) 60. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 1.925.711 302.002 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4) 1.030.590 120.569 262.369 61. Property lines (Lines 1, 2, 9, 12, 21 & 26) 704.451 .327,142 125,618 .20,194 51.193 Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27). All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34) .519 .369 Nonproportional reinsurance lines (Lines 31, 32 & 33) 65. Total (Line 35) .2.630.681 .1.358.101 .427.621 .140.763 .313.562 Operating Percentages (Page 4) (Item divided by Page 4, Line 1) x 100.0 100.0. .100.0. .100.0. 100.0. .100.0 66. Premiums earned (Line 1) .38.5 29.0 ..15.8 .31.3 ..130 .8 67. Losses incurred (Line 2). .5.7 .5.6 .4.0 .(1.1) .11.8 68. Loss expenses incurred (Line 3). .69.2 .69.5 .129.8 .59.9 .46.1 69. Other underwriting expenses incurred (Line 4) .(60.0) 70. Net underwriting gain (loss) (Line 8) (13.9)19 4 10 7 (102.5)Other Percentages 71. Other underwriting expenses to net premiums written (Page 4, Lines 4 + 5 - 15 divided by Page 8, Part 1B, Col. 6, Line 35 x 100.0)67.5 .44.5 .62.0 .87.7 .76.0 72. Losses and loss expenses incurred to premiums earned (Page 4, Lines 2 + 3 divided by Page 4, Line 1 x 100.0) .44 . 2 34.6 19.8 .30.2 142.6 73. Net premiums written to policyholders' surplus (Page 8, Part 1B, Col. 6, Line 35 divided by Page 3, Line 37, Col. 1 x 100.0) .84.3 .56.5 .52.2 1.8 One Year Loss Development (\$000 omitted) 74. Development in estimated losses and loss expenses incurred prior to current year (Schedule P, Part 2-Summary, Line 12, Col. 11) .(63).(31).(46) (47)14 75. Percent of development of losses and loss expenses incurred to policyholders' surplus of prior year end (Line 74 above divided by Page 4, Line 21, Col. 1 x 100.0) ... (0.5)(0.3)(0.5).(0.5) .0.1 Two Year Loss Development (\$000 omitted) 76. Development in estimated losses and loss expense incurred 2 years before the current year and prior year (Schedule P, Part 2 - Summary, Line 12, Col. 12) .(50) .(65) .(81). .(16) .(107) 77. Percent of development of losses and loss expenses incurred to reported policyholders' surplus of second prior year end (Line 76 above divided by (0.2)(0.5)(0.7)(0.9)(1.1)Page 4, Line 21, Col. 2 x 100.0)

NOTE: If a party to a merger, have the two most recent years of this exhibit been restated due to a merger in compliance with the disclosure requirements of SSAP No. 3 - Accounting Changes and Correction of Errors?

Yes [] No []

If no, please explain



EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

	NAIC Group Code 04762		SS IN THE STATE (ND LOSSES (Statuto		DURING THE YEAR	2021			C Company Code 1	
		and Premiums on	ess Return Premiums Policies not Taken 2	3 Dividends Paid or Credited to	4 Direct Unearned	5 Direct Losses	6	7	8 Direct Defense and Cost Containment	9 Direct Defense and Cost Containment	10 Direct Defense and Cost Containment	11 Commissions	12
	Line of Business	Direct Premiums Written	Direct Premiums Earned	Policyholders on Direct Business	Premium Reserves	Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Expense Paid	Expense Incurred	Expense Unpaid	and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire	VVIIICII	Larricu	Direct Business	TRESCIVES	(deducting salvage)	ilicalica	Oripaid	i aid	incurred	Oripaid	Expenses	LICCHSCS AND I CCS
2.1	Allied lines												
2.2	Multiple peril crop										L		
2.3	Federal flood												
2.4	Private crop										L		
2.5	Private flood												
3.	Farmowners multiple peril												
4.	Homeowners multiple peril												
5.1	Commercial multiple peril (non-liability portion)												
5.2	Commercial multiple peril (liability portion)												
6.	Mortgage guaranty												
8.	Ocean marine												
9.	Inland marine												
10.	Financial guaranty	.							.	.			
11.	Medical professional liability								.				
12.	Earthquake												
13.	Group accident and health (b)												
14.	Credit A & H (group and individual)									.	ļ		
15.1	Collectively renewable A & H (b)												
15.2	Non-cancelable A & H (b).									.			
15.3	Guaranteed renewable A & H (b)												
15.4	Non-renewable for stated reasons only (b).									.			
15.5	Other accident only	358,006	440,877		73,551	10,372	10,373	40,000		. (1)	4,068	45,431	13,119
15.6	Medicare Title XVIII exempt from state taxes or fees												
15.7	All other A & H (b)												
15.8	Federal Employees Health Benefits Plan premium (b)									.			
16.	Workers' compensation												
17.1	Other liability-Occurrence									.			
17.2	Other Liability-Claims-Made												
17.3	Excess workers' compensation.									.			
18.	Products liability												
19.1	Private passenger auto no-fault (personal injury protection)		826,852		348,816	339,894	492,753			1,818		109,835	26,752
19.2	Other private passenger auto liability	65,994,747	61,986,795		16,855,563	38,822,839	52,621,336	33,351,153	215,663	1,597,797	3,411,781	7,736,686	2,391,474
19.3	Commercial auto no-fault (personal injury protection)									.	ļ		
19.4	Other commercial auto liability												
21.1	Private passenger auto physical damage	21,641,125	19,820,717		5,652,879	14,075,871	14,946,183	1,774,797	189,251	281,068	160,837	2,470,232	
21.2	Commercial auto physical damage												
22.	Aircraft (all perils)												
23.	Fidelity	-							-	-			
24.	Surety	·		·····	ļ						·····		
26.	Burglary and theft	-		·····	····				· · · · · · · · · · · · · · · · · · · ·		·····		
27.	Boiler and machinery	·		·····	 	·····			· 		·····		
28.	Credit	-		····					· · · · · · · · · · · · · · · · · · · ·	-	····		
29. 30.	International	·							· · · · · · · · · · · · · · · · · · · ·	-			
30. 34.	Warranty	4,814,609	4,814,609						-	-		4,574,290	
34. 35.	Aggregate write-ins for other lines of business	93,789,679	4,814,609 87.889.849	·····	22.930.810	53.248.976	68,070,645	35.418.394	406.731	1.880.682	3.576.685	14,574,290	3,223,508
DETAIL	FOTAL (a)	93,709,079	01,009,849		22,930,810	JJ, Z40,970	00,070,040	30,418,394	400,731	1,000,082	3,370,083	14,930,474	3,223,308
	Policy Fees.	4,814,609	4.814.609									4,574,290	
3402.	10110y 1 663.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,000						-				
3403.		<u> </u>						·	-				
	Summary of remaining write-ins for Line 34 from overflow page								-				
3499	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	4.814.609	4.814.609									4.574.290	
	inance and service charges not included in Lines 1 to 35 \$	1,017,000	1,017,000	!	1	1		-!	1	1		1,011,200	

⁽a) Finance and service charges not included in Lines 1 to 35 \$

⁽b) For health business on indicated lines report: Number of persons insured under PPO managed care products

Schedule F - Part 1

NONE

Schedule F - Part 2

NONE

Unauthorized - Protected Cells

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE OLD AMERICAN INDEMNITY COMPANY

SCHEDULE F - PART 3

					Ceded	Reinsurano	ce as of Dec	ember 31, C	urrent Year	(\$000 Omitte	ed)								
1	2	3	4	5	6				Reinsur	ance Recove	rable On				16	Reinsuran	ce Payable	19	20
						7	8	9	10	11	12	13	14	15	1	17	18		
																		Net Amount	
																		Recover-	Funds Held
					Reinsur-			Known							Amount in		Other	able From	By Company
	NAIC				ance			Case	Known				Contingent	Cols.	Dispute	Ceded	Amounts	Reinsurers	Under
ID	Company		Domiciliary	Special	Premiums	Paid	Paid	Loss		IBNR Loss			Commis-	7 through	Included in	Balances	Due to	Cols. 15 -	
Number	Code	Name of Reinsurer	Jurisdiction	Code	Ceded	Losses	LAE	Reserves	Reserves	Reserves	Reserves	Premiums	sions	14 Totals	Column 15	Payable	Reinsurers	[17 + 18]	Treaties
		U.S. Intercompany Pooling																	
		U.S. Non-Pool - Captive																	
		U.S. Non-Pool - Other																	
		Other (Non-U.S.) - Captive																	
		Other (Non-U.S.) - Other																	
06-1430254		naffiliated Insurers ARCH REINS CO	I DE		0.1		<u> </u>		1	ı	I	1	ı	1	1	1	1		1
38-2145898		DORINGO REINS CO	MI		5,853	224	49	1,327	1	1,067	377	1,803		4.848		1,754		3,094	
35-2293075		ENDURANCE ASSUR CORP	DE		1,536	304	11	694	'	1,069	309	447		2.834		400		2,434	
04 - 1543470		LIBERTY MUT INS CO	MA.		(20)	5	1	24		15	6			51				I 51	
02-0170490	14788	NGM INS CO.	FL		9,746	629	74	1,857		2,666	750	2,640		8,617		2,667		5,950	
47 - 0698507	23680	ODYSSEY REINS CO	CT		8,033	1,528	169	1,103		2,266	565	1,920				3,147		4,405	
13-3031176		PARTNER REINS CO OF THE US.	NY		4,529	635	95	408		799	195	1,052		3,184		1,753	ļ	1,431	
30-0703280		RENAISSANCERE EUROPE AG US BRANCH.	NY			4		9		5	2			21			ļ	21	
		red - Other U.S. Unaffiliated Insurers			29,687	3,329	400	5,421	2	7,887	2,205	7,863		27,107		9,721		17,385	
	Pools - Manda																		
	Pools - Volu																		
	Other Non-U.								,										
AA - 1126435	00000	LLOYD'S SYNDICATE NUMBER 435	GBR		ļ1 <u>/</u>														
AA - 1126566		LLOYD'S SYNDICATE NUMBER 566 (Incidental to 2999)	GBR		 / ₂			 											
AA - 1126609 AA - 1127084		LLOYD'S SYNDICATE NUMBER 609 LLOYD'S SYNDICATE NUMBER 1084	GBRGBR		t/ ₁				 						+				
AA-1127004		Lloyd's Syndicate Number 1414	GBR		†' ₀				+						†				
AA-1120124	00000	LLOYD'S SYNDICATE NUMBER 1945.	GBR		1 3			†	†									†	
AA - 1128121	00000	LLOYD'S SYNDICATE NUMBER 2121.	GBR	·····	3				1						1				
AA-1128791		LLOYD'S SYNDICATE NUMBER 2791.	GBR		45														
AA-1128987		Lloyd's Syndicate Number 2987.	GBR		12														
1299999 - 1	otal Authoriz	ed - Other Non-U.S. Insurers			105														
Authorized -	Protected Ce	lls					•	•	•	•	•	•	•	•	•	•	•	•	•
1499999 - 1	otal Authoriz	red Excluding Protected Cells (Sum of 0899999, 0999999,	1099999, 1199999	and 1299999)	29,791	3,329	400	5,421	2	7,887	2,205	7,863		27,107		9,721		17,385	
		- U.S. Intercompany Pooling													•				
		- U.S. Non-Pool - Captive																	
		- U.S. NonPool - Other																	
		- Other (Non-U.S.) - Captive																	
		- Other (Non-U.S.) - Other																	
		ORPHEUS RE LTD.	BRB		4,449	261	32			1,062	291			3,499		1,135		2,365	
		ized - Affiliates - Other (Non-U.S.) - Other			4,449	261	32			1,062	291	1,147		3,499		1,135		2,365	
		ized - Affiliates - Other (Non-U.S.) - Total			4,449	261	32			1,062	291	1,147		3,499		1,135		2,365	
		ized - Affiliates - Total Unauthorized - Affiliates			4,449	261	32	706		1,062	291	1,147		3,499		1,135		2,365	
		Unaffiliated Insurers																	
		ndatory Pools																	
	- Pools - Vo																		
	- Other non-		01:=																
AA - 1460019		MS Amlin AG	CHE		5,484	1,015	119	628		1,316	320 587	1,315		4,714		2,192	ļ	2,522	29
AA -3191306		Bluefire Re Ltd	BMU CHE		12,851	1,906	273	1,205	ļ	2,407 2,202	587	3,006 2.104	ļ	9,384		5,010	ļ	4,374	16,719
AA - 1460018 AA - 3770420		Catlin Re Switzerland Ltd Coastal Ins SPC	CYM		8,704 4,273	1,691 165	191 35	1,031 939	1	750		1,339		7,754 3,496		3,507 1,277	····	4,247 2,218	
AA-3770420		Corinthian Re SPC	CYM		3,632	843		1,028		752 1,040	342	1,051	····	4,378		1,605	·	2,773	l
AA-5320039		Peak Reins Co Ltd	HKG		6,320	365	47	850		1,421	371	1,604	<u> </u>	4,376		1,701	ļ	2,773	l
AA-3191298		Qatar Reins Co Ltd.	BMU		5,484	328	39	609		1,282	312	1,315		3,885		1.454		2,431	
AA - 1460023		RenaissanceRe Europe AG	CHE		1	(3)	3		I	13	2					1		I 15	
AA - 3770492	00000	Topsail Reins Spc Ltd.	CYM		3,652	310	25	976	2	853	308	1,041		3,514		1,110		2,404	60
AA-3191250		Watford Re Ltd.	BMU			11		11		20	5			47				47	
2699999 - 7		ized - Other Non-U.S. Insurers			50,400	6,631	805	7,278	3	11,305	3,047	12,775		41,844		17,856		23,987	16,807

SCHEDULE F - PART 3

Ceded Reinsurance as of December 31, Current Year (\$000 Omitted

					Ceded	Remsuranc	e as or Deci	eniber 31, C	urrent Year	·									
1	2	3	4	5	6 [Reinsura	ance Recove	rable On				16	Reinsuran	ce Payable	19	20
						7	8	9	10	11	12	13	14	15		17	18		
																		Net Amount	:
																		Recover-	Funds Held
					Reinsur-			Known							Amount in		Other	able From	By Company
	NAIC				ance			Case	Known				Contingent	Cols.	Dispute	Ceded	Amounts	Reinsurers	
ID	Company		Domiciliary	Special	Premiums	Paid	Paid	Loss	Case LAE	IBNR Loss	IBNR LAE	Unearned	Commis-	7 through		Balances	Due to		Reinsurance
Number	Code	Name of Reinsurer	Jurisdiction	Code	Ceded	Losses	LAE	Reserves	Reserves		Reserves	_	sions		Column 15		Reinsurers	-	
		rized Excluding Protected Cells (Sum of 2299999, 2399999			Occou	200000	L/ (L	110001100	110001100	110001100	110001100	TTOTTIGHTO	CIOTIC	1110000	COIGITIII 10	1 dyabio	rtomouroro	[17 - 10]	Troduco
2000000	2699999)	1250 Exordaring 110100100 00110 (Calli 01 2250000, 2000000	, 2100000, 200000	o una	54.849	6.892	837	7.984	3	12.367	3.338	13,922		45,343		18.991		26,352	16,807
Certified -	Affiliates -	U.S. Intercompany Pooling			. ,	.,		,	-	, , , , , , , , , , , , , , , , , , , ,			ı		1				.,,
		U.S. Non-Pool - Captive																	
Certified -	Affiliates -	U.S. Non-Pool - Other																	
Certified -	Affiliates -	Other (Non-U.S) - Captive																	
Certified -	Affiliates -	Other (Non-U.S.) - Other																	
Certified -	Other U.S. Un	affiliated Insurers																	
Certified -	Pools - Manda	tory Pools																	
Certified -																			
Certified -																			
Certified -																			
		Affiliates - U.S. Intercompany Pooling																	
Reciprocal J	urisdiction –	Affiliates - U.S. Non-Pool - Captive																	
		Affiliates - U.S. Non-Pool - Other																	
		Affiliates - Other (Non-U.S.) - Captive																	
		Affiliates - Other (Non-U.S.) - Other																	
		Other U.S. Unaffiliated Insurers																	
Reciprocal J	urisdiction –	Pools - Mandatory Pools																	
		Pools - Voluntary Pools																	
Reciprocal J	urisdiction –	Other Non-U.S. Insurers																	
		Protected Cells																	
5799999 -		zed, Unauthorized, Reciprocal Jurisdiction and Certified	d Excluding Protec	ted Cells															
	(Sum of 1499	9999, 2899999, 4299999 and 5699999)			84,640	10,221	1,237	13,405	5	20,254	5,543	21,784		72,450		28,712		43,737	
9999999	Totals				84,640	10,221	1,237	13,405	5	20,254	5,543	21,784		72,450		28,712		43,737	16,807

					Ocaca Iteli	isarance as o	(Credit Ris		ai (\$000 Oillitt	cu,							
			Colla	ateral		25	26	27				Ceded	Reinsurance	Credit Risk			
		21	22	23	24				28	29	30 Reinsurance	31	32	33	34		36 Credit Risk on Uncollateralized Recoverables
ID				Issuing or Confirming	Single Beneficiary Trusts &	Total Funds	Net Recoverable	Applicable	Total Amount Recoverable From Reinsurers	Stressed	Payable & Funds Held (Cols. 17+18+20;	Stressed Net	Total Collateral (Cols. 21 +			(Col. 32 * Factor Applicable to Reinsurer	(Col. 33 * Factor
Number		Multiple		Bank	Other	Held,	Net of Funds	Sch. F	Less Penalty	Recoverable		Recoverable	22 + 24, no	ot Collateral	Reinsurer	Designation	Designation
From	Name of Reinsurer	Beneficiary	Letters of	Reference	Allowable	Payables &	Held &	Penalty (Col.		(Col. 28 *	excess of	(Cols. 29 –	in Excess		Designation		
Col. 1	From Col. 3 ffiliates - U.S. Intercompany Pooling	Trusts	Credit	Number	Collateral	Collateral	Collateral	78)	27)	120%)	Col. 29)	30)	of Col. 31)	31 - 32)	Equivalent	Col. 34)	Col. 34)
	ffiliates - U.S. Non-Pool - Captive																
	ffiliates - U.S. Non-Pool - Other																
	ffiliates - Other (Non-U.S.) - Captive ffiliates - Other (Non-U.S.) - Other																
	ther U.S. Unaffiliated Insurers																
06-1430254	ARCH REINS CO			I		I									2		
	DORINCO REINS CO.			ļ		1,754	3,094		4,848	5,817	1,754	4,063		4,063	3		195
	ENDURANCE ASSUR CORP			ł		400	2,434 51		2,834	3,401 61	400	3,001 61		3,001	2		123
02-0170490	NGM INS CO.					2,667	5,950		51 8,617	10,340	2,667	7,673			3		368
47 - 0698507	ODYSSEY REINS CO			ļ		3,147	4,405			9,062	3,147	5,915		5,915	3		284
	PARTNER REINS CO OF THE US			ł		1,753	1,431 21		3,184	3,821 25	1,753	2,068 25			22		85
	tal Authorized - Other U.S. Unaffiliated Insurers			XXX		9,721	17,385		27.107	32,528	9,721	22,807		22,807	XXX		1.065
	ools - Mandatory Pools		l			*,	,	l		, ,,,,,,,	*,:=:					1	
	ools – Voluntary Pools																
	ther Non-U.S. Insurers LLOYD'S SYNDICATE NUMBER 435						ı	ı		ı			1	1		1	
	LLOYD'S SYNDICATE NUMBER 435LLOYD'S SYNDICATE NUMBER 566 (Incidental to 2999)			ł		 					 	 			b		ļ
AA-1126609	LLOYD'S SYNDICATE NUMBER 609.`														6		[
AA - 1127084	LLOYD'S SYNDICATE NUMBER 1084			ļ	ļ	ļ			ļ		ļ				6		ļ
AA-1127414 AA-1120124	Lloyd's Syndicate Number 1414 LLOYD'S SYNDICATE NUMBER 1945			·								†			b		f
	LLOYD'S SYNDICATE NUMBER 2121														6		
	LLOYD'S SYNDICATE NUMBER 2791														6		
	Lloyd's Syndicate Number 2987			VVV											6		
	tal Authorized – Other Non-U.S. Insurers			XXX											XXX		1
	tal Authorized Excluding Protected Cells (Sum of			1							I						
1100000	0899999, 0999999, 1099999, 1199999 and 1299999)			XXX		9,721	17,385		27,107	32,528	9,721	22,807		22,807	XXX		1,065
	Affiliates - U.S. Intercompany Pooling																
	Affiliates - U.S. Non-Pool - Captive Affiliates - U.S. NonPool - Other																
	Affiliates - O.S. NonPool - Other Affiliates - Other (Non-U.S.) - Captive																
	Affiliates - Other (Non-U.S.) - Other																
	ORPHEUS RE LTD				2,367	3,499			3,499	4, 199	1,135		2,367			118	
	tal Unauthorized - Affiliates - Other (Non-U.S.) - Other			XXX	2,367	3,499			3,499	4,199	1,135		2,367		XXX	118	98
	tal Unauthorized - Affiliates - Other (Non-U.S.) - Total			XXX	2,367	3,499			3,499	4,199	1,135	3,064	2,367	7 697	XXX	118	98
	tal Unauthorized – Affiliates – Total Unauthorized – Affiliates			l _{xxx}	2,367	3,499			3,499	4,199	1,135	3,064	2,367	7 697	XXX	118	98
	Other U.S. Unaffiliated Insurers			1 7777	2,00.	0,100			0,100	1,100	1,100	0,001	2,000		7000	1.0	
Unauthorized -	Pools - Mandatory Pools																
	Pools - Voluntary Pools																
AA-1460019	Other non-U.S. Insurers	1	3,574	0001		4.714	I	I	4,714	5,656	2,220	3,436	3,436	6 I	3	165	
	Bluefire Re Ltd.		0/4, لا		1,155	9,384		İ	9 384	11,261	11,261		,430 د		6	103	
AA-1460018	Catlin Re Switzerland Ltd		5,196	0004	I	7,754				9,305	3,507	5,798	5 , 196		2	213	25 97
	Coastal Ins SPC	·····	1,375 2,773	0007	853	3,496 4,378			3,496 4,378	4,195 5,253	1,277	2,917 3,648	2,228	8 690 3 876	6	111	97 123
	Peak Reins Co Ltd.		2,773	0006	†	4,378	····	†	4,378	5,253	1,701	3,888	2,773			148	

							(Credit Ris	sk)	•	,							
			Colla	ateral		25	26	27				Ceded	Reinsurance (Credit Risk			
ID Number From	Name of Reinsurer	21 Multiple Beneficiary	22 Letters of	23 Issuing or Confirming Bank Reference	Single Beneficiary Trusts & Other Allowable		Net Recoverable Net of Funds	Applicable	28 Total Amount Recoverable From Reinsurers Less Penalty (Cols. 15 -	29 Stressed Recoverable (Col. 28 *		31 Stressed Net Recoverable (Cols. 29 –		Stressed Net Recoverable Net of Collateral Offsets (Cols.	34 Reinsurer Designation	Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation	(Col. 33 * Factor Applicable to Reinsurer Designation
Col. 1	From Col. 3	Trusts	Credit	Number	Collateral	Collateral	Collateral	78)	27)	120%)	Col. 29)	30)	of Col. 31)	31 - 32)	Equivalent	Col. 34)	Col. 34)
	Qatar Reins Co Ltd		2,431	0003		3,885			3,885	4,662	1,454	3,208	2,431		3	117	37
AA - 1460023	RenaissanceRe Europe AG		3,065	0002		15			15	19		19	19		22	1	
AA - 3770492	Topsail Reins Spc Ltd.		2,344	0009	ļ	3,514			3,514	4,217	1,170	3,047	2,344	703	6	117	98
	Watford Re Ltd.		1,026	0005	0.000	47			47	56	04.405	56	56	4 570	6		400
	otal Unauthorized - Other Non-U.S. Insurers		24,740	XXX	2,009	41,844			41,844	50,213	24,195	26,017	21,439	4,578	XXX	1,013	429
	- Protected Cells otal Unauthorized Excluding Protected Cells (Sum of					1	1	1	1		1		I	1	ı		
	2299999, 2399999, 2499999, 2599999 and 2699999)		24,740	XXX	4,376	45,343			45,343	54,412	25,330	29,082	23,806	5,275	XXX	1,132	526
	ffiliates – U.S. Intercompany Pooling																
	ffiliates - U.S. Non-Pool - Captive																
	ffiliates - U.S. Non-Pool - Other																
	ffiliates - Other (Non-U.S) - Captive																
	ffiliates - Other (Non-U.S.) - Other																
	ther U.S. Unaffiliated Insurers pols - Mandatory Pools																
	ools - Walldatory Pools																
	ther Non-U.S. Insurers																
Certified - P																	
	risdiction - Affiliates - U.S. Intercompany Pooling																
	risdiction - Affiliates - U.S. Non-Pool - Captive																
	risdiction - Affiliates - U.S. Non-Pool - Other																
	risdiction - Affiliates - Other (Non-U.S.) - Captive																
Reciprocal Ju	risdiction - Affiliates - Other (Non-U.S.) - Other																
	risdiction – Other U.S. Unaffiliated Insurers																
	risdiction – Pools – Mandatory Pools																
	risdiction – Pools – Voluntary Pools																
	risdiction - Other Non-U.S. Insurers																
	risdiction - Protected Cells					1		1									
	otal Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999,		04.740	VVV	4.070	55.004	47.005		70.450	00.010	05.054	54 000	00.000	00.000	VVV	4 400	4.504
	2899999, 4299999 and 5699999)		24,740	XXX	4,376	55,064	17,385		72,450	86,940	,	51,888	23,806	28,082	XXX	1,132	1,591
9999999 T	otals		24,740	XXX	4,376	55,064	17,385		72,450	86,940	35,051	51,888	23,806	28,082	XXX	1,132	1,591

							(Aging of Ce	eded Reinsura	ance)	,								
		Reins	surance Reco	verable on Pa	id Losses and	Paid Loss Ad			44	45	46	47	48	49	50	51	52	53
		37			Overdue			43										
			38	39	40	41	42	1		Recoverable		Recoverable						
										on Paid		on Paid						
									Total	Losses &	Total	Losses &			Percentage			
									Recoverable		Recoverable	LAE Over 90			of Amounts			
									on Paid	Days Past	on Paid	Days Past			More Than	_		Amounts in
									Losses &	Due	Losses &	Due			90 Days	Percentage		Col. 47 for
							.	Total Due	LAE	Amounts	LAE	Amounts			Overdue Not		Is the	Reinsurers
ID Normalia a m							Total	Cols. 37 + 42		in Dispute	Amounts Not in Dispute	Not in	Amounts	Percentage	in Dispute	120 Days	Amount in	with Values
Number	Name of Reinsurer		1 20	20 00	04 400	Over 120	Overdue	(In total	Dispute	Included		Dispute (Cols. 40 +	Received Prior 90	Overdue	(Col. 47/	Overdue (Col. 41/	Col. 50 Less Than 20%	20% in Col.
From Col. 1	From Col. 3	Current	1 – 29 Days	30 – 90 Days	91 – 120 Days	Days		should equal Cols. 7 + 8)		in Cols. 40 & 41	(Cols. 43 – 44)	41 – 45)	Days	Col. 42/Col. 43	[Cols. 46 + 48])	Col. 41/	(Yes or No)	50% III Col.
	Affiliates - U.S. Intercompany Pooling	Current	Days	Days	Days	Days	+ 40 + 41	Cois. 1 + 0)	001. 43	1 40 Q 4 I	44)	41 – 43)	Days	1 40	40 <u>]</u>)	COI. 43)	(165 01 140)	30
	Affiliates - U.S. Non-Pool - Captive																	
	Affiliates - U.S. Non-Pool - Other																	
	Affiliates - Other (Non-U.S.) - Captive																	
Authorized -	Affiliates - Other (Non-U.S.) - Other																	
	Other U.S. Unaffiliated Insurers				_													
	ARCH REINS CO.																YES	
38-2145898	DORINGO REINS CO	273						273		-	273			00 004			YES	
	ENDURANCE ASSUR CORPLIBERTY MUT INS CO	251	64		 	 	64	315		+	315			20.234	ļ		YESYES	
	NGM INS CO	703			†		t	703		†	703			†	t		YESYES	
	ODYSSEY REINS CO.	1,139			†		558	1,697		·	1,697			32.894			YES	
	PARTNER REINS CO OF THE US.	495	235				235	730			730			32.216			YES	
	RENAISSANCERE EUROPE AG US BRANCH.	4	1				11	4			4			17.320			YES	
	otal Authorized – Other U.S. Unaffiliated Insurers	2,871	858				858	3,729			3,729			23.010			XXX	
	Pools - Mandatory Pools																	
	Pools - Voluntary Pools																	
	Other Non-U.S. Insurers LLOYD'S SYNDICATE NUMBER 435					1				1	1						VEO	
	LLOYD'S SYNDICATE NUMBER 435LLOYD'S SYNDICATE NUMBER 566 (Incidental to 2999)				 		 			-	+						YESYES	
AA-1126609	LLOYD'S SYNDICATE NUMBER 609.																YES	
	LLOYD'S SYNDICATE NUMBER 1084.						Ī										YES	
AA-1127414	Lloyd's Syndicate Number 1414.																YES	
	LLOYD'S SYNDICATE NUMBER 1945.				ļ			ļ						ļ	ļ		YES	
	LLOYD'S SYNDICATE NUMBER 2121																YES	
	LLOYD'S SYNDICATE NUMBER 2791																YESYES	
	otal Authorized - Other Non-U.S. Insurers																XXX	
	Protected Cells				1	l .	1	1	I	1	1			1			ΛΛΛ	
1499999 - Tr	otal Authorized Excluding Protected Cells (Sum of									1								
	0899999, 0999999, 1099999, 1199999 and 1299999)	2,871	858				858	3,729			3,729			23.010			XXX	
	- Affiliates - U.S. Intercompany Pooling																	
	- Affiliates – U.S. Non-Pool – Captive					-										-		
	- Affiliates - U.S. NonPool - Other																	
	- Affiliates - Other (Non-U.S.) - Captive																	
	- Affiliates - Other (Non-U.S.) - Other ORPHEUS RE LTD	202 1				ı		1 000			1 000			1			I VEC	
	okal Unauthorized - Affiliates - Other (Non-U.S.) -	293						293			293						YES	
	Other	293						293			293						XXX	
	other Ital Unauthorized - Affiliates - Other (Non-U.S.) -	200					1	200			200						AAA	
	Total	293						293			293						XXX	
2299999 - To	otal Unauthorized - Affiliates - Total Unauthorized																	
	- Affiliates	293						293			293						XXX	
	- Other U.S. Unaffiliated Insurers						-	-			-						-	
Unauthorized	- Pools - Mandatory Pools																	
	- Pools - Voluntary Pools																	
AA - 1460019	Other non-U.S. Insurers	750 I	382		1	1	200	1 111	ı	1	1 1 101			22 740			VEC	
	Bluefire Re Ltd.	752 1,468			†		382 711	1,134 2,179		+	1,134 2,179						YESYES	
	Catlin Re Switzerland Ltd.	1,242	640		†	İ	640	1,882		T	1,882			34.030			YES	
					T	T	T	F	r	T				T	F		T	r

SCHEDULE F - PART 3 (Continued) Ceded Reinsurance as of December 31, Current Year (\$000 Omitted) (Aging of Ceded Reinsurance)

								ded Reinsur	ance)									
		Reins	urance Reco	verable on Pai	d Losses and	Paid Loss Ad	justment Expe	nses	44	45	46	47	48	49	50	51	52	53
		37			Overdue			43	1									
			38	39	40	41	42			Recoverable		Recoverable						
										on Paid		on Paid						
									Total	Losses &	Total	Losses &			Percentage			
									Recoverable	LAE Over 90	Recoverable	LAE Over 90			of Amounts			
									on Paid	Days Past	on Paid	Days Past			More Than			Amounts in
									Losses &	Due	Losses &	Due			90 Days	Percentage		Col. 47 for
								Total Due	LAE	Amounts	LAE	Amounts			Overdue Not		Is the	Reinsurers
ID ID							Total	Cols. 37 + 42	Amounts in	in Dispute	Amounts Not		Amounts	Percentage	in Dispute	120 Days	Amount in	with Values
Number							Overdue	(In total	Dispute	Included	in Dispute	Dispute	Received	Overdue	(Col. 47/		Col. 50 Less	
From	Name of Reinsurer		1 – 29	30 – 90	91 – 120	Over 120	Cols. 38 + 39			in Cols.	(Cols. 43 –	(Cols. 40 +	Prior 90	Col. 42/Col.	[Cols. 46 +	(Col. 41/	Than 20%	20% in Col.
Col. 1	From Col. 3	Current	Days	Days	Days	Davs		Cols. 7 + 8)	Col. 43	40 & 41	44)	41 – 45)	Davs	43	481)	Col. 43)	(Yes or No)	50
AA-3770420	Coastal Ins SPC	200	Days	Days	Days	Days	740741	200	COI. 43	40 0 41	200	41-43)	Days	45	40])	COI. 43)	YES	30
AA-3770420	Corinthian Re SPC	386	33	497			530	917			917			57.873			YES	
	Peak Reins Co Ltd	412					1	412			412						YES	
	Qatar Reins Co Ltd						†	367			367			1			YES	
	RenaissanceRe Europe AG																YES	
	Topsail Reins Spc Ltd	334						334			334						YES	
AA-3191250	Watford Re Ltd.	7	3				 3	İ11			İ11			31.496			YES	
2699999 - To	otal Unauthorized - Other Non-U.S. Insurers	5,169	1,770	497			2,267	7,436			7,436			30.490			XXX	
	- Protected Cells							•	•	•		•		•				•
2899999 - To	otal Unauthorized Excluding Protected Cells (Sum of																	
	2299999, 2399999, 2499999, 2599999 and 2699999)	5,462	1,770	497			2,267	7,729			7,729			29.333			XXX	
Certified - A	ffiliates - U.S. Intercompany Pooling	•						•			•			•				
Certified - A	ffiliates - U.S. Non-Pool - Captive																	
	ffiliates - U.S. Non-Pool - Other																	
	ffiliates - Other (Non-U.S) - Captive																	
	ffiliates - Other (Non-U.S.) - Other																	
	ther U.S. Unaffiliated Insurers																	
	ools – Mandatory Pools																	
	ools – Voluntary Pools																	
	ther Non-U.S. Insurers																	
	rotected Cells																	
	risdiction – Affiliates – U.S. Intercompany Pooling																	
	risdiction - Affiliates - U.S. Non-Pool - Captive																	
	risdiction - Affiliates - U.S. Non-Pool - Other																	
	risdiction - Affiliates - Other (Non-U.S.) - Captive																	
	risdiction - Affiliates - Other (Non-U.S.) - Other																	
Reciprocal Ju	risdiction – Other U.S. Unaffiliated Insurers																	
	risdiction – Pools – Mandatory Pools																	
	risdiction – Pools – Voluntary Pools																	
	risdiction – Other Non-U.S. Insurers																	
	risdiction - Protected Cells																	
5799999 - To	otal Authorized, Unauthorized, Reciprocal						1											
	Jurisdiction and Certified Excluding Protected						1				1							
	Cells (Sum of 1499999, 2899999, 4299999 and	0 000	0.000	407			2 405	44 450			44 450			07 075			VVV	
0000000	5699999)	8,333	2,628	497			3,125	11,458	-		11,458	1		27.275			XXX	
9999999 T	otals	8,333	2,628	497			3,125	11,458			11,458			27 . 275			XXX	

								, Current Year Certified Reins		-,							
					(ovision for Cert	tified Reinsura	nce						
		54	55	56	57	58	59	60	61	62	63	64	65	Complete it	f Col. 52 = "No"	Otherwise	69
		34	33	30] 37	30	09	00	"	02	03	04	03	Complete	Enter 0	, outloi Wido	
								Percent of	Percent					66	67	68	Provision for
								Collateral	Credit				20% of	00	01	00	Overdue
										200/ of							
								Provided for	Allowed on	20% of		D	Recoverable				Reinsurance
								Net	Net	Recoverable		Provision for	on Paid				Ceded to
						_ Net			Recoverables		l	Reinsurance	Losses &	Total			Certified
						Recoverables		Subject to	Subject to	Losses &	Amount of	with Certified		-	Net		Reinsurers
				Percent		Subject to	Dollar	Collateral	Collateral	LAE Over	Credit	Reinsurers	Days Past	Provided	Unsecured		(Greater of
				Collateral	Catastrophe	Collateral	Amount of	Requirements		90 Days	Allowed for	Due to	Due Amounts		Recoverable		[Col. 62 +
ID		Certified	Effective Date	Required for	Recoverables	Requirements	Collateral	([Col. 20+Col.	(Col. 60 / Col.	Past Due	Net	Collateral	Not in	21+Col.22+	for Which		Col. 65] or
Number		Reinsurer	of Certified	Full Credit	Qualifying for	for Full Credit	Required	21+Col.	56, not to	Amounts in	Recoverables	Deficiency	Dispute	Col. 24; not	Credit is	20% of	Col. 68; not
From	Name of Reinsurer	Rating	Reinsurer	(0% through	Collateral	(Col. 19 –	(Col. 56 *	22+Col.	exceed	Dispute (Col.	(Col. 57+[Col.	(Col. 19 –	(Col. 47 *	to Exceed	Allowed (Col.	Amount in	to Exceed
Col. 1	From Col. 3	(1 through 6)	Rating	100%)	Deferral	Col. 57)	Col. 58)	241/Col. 58)	100%)	45 * 20%)	58 * Col. 61])	Col. 63)	20%)	Col. 63)	63-Col. 66)	Col. 67	Col. 63)
Authorized -	Affiliates - U.S. Intercompany Pooling			,		, , ,	,										·
Authorized -	Affiliates - U.S. Non-Pool - Captive																
	Affiliates - U.S. Non-Pool - Other																
	Affiliates - Other (Non-U.S.) - Captive																
	Affiliates - Other (Non-U.S.) - Other																
	Other U.S. Unaffiliated Insurers																
	ARCH REINS CO.	XXX	XXX	I XXX	I XXX	XXX	XXX	I XXX	I XXX	I XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
38-2145898	DORINCO REINS CO.	XXX	XXX	XXX	xxx	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
35-2293075	ENDURANCE ASSUR CORP	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
04-1543470	LIBERTY MUT INS CO	XXX	XXX	xxx	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	ХХХ	XXX	XXX
02-0170490	NGM INS CO.	XXX	LXXX	LXXX	XXX	XXX	XXX	XXX	XXX	LXXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
47 - 0698507	ODYSSEY REINS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	ХХХ	ХХХ	ХХХ	ХХХ	ХХХ	XXX	XXX
	PARTNER REINS CO OF THE US	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	RENAISSANCERE EUROPE AG US BRANCH.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0999999 - To	otal Authorized – Other U.S. Unaffiliated Insurers	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
Authorized -	Pools – Mandatory Pools																
Authorized -	Pools – Voluntary Pools																
Authorized -	Other Non-U.S. Insurers																
AA-1126435	LLOYD'S SYNDICATE NUMBER 435	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA - 1126566	LLOYD'S SYNDICATE NUMBER 566 (Incidental to 2999)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA - 1126609	LLOYD'S SYNDICATE NUMBER 609.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	. . XXX	XXX	XXX		XXX	XXX	XXX
	LLOYD'S SYNDICATE NUMBER 1084.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	Lloyd's Syndicate Number 1414	XXX	XXX	LXXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX		XXX	XXX	XXX
	LLOYD'S SYNDICATE NUMBER 1945.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	LLOYD'S SYNDICATE NUMBER 2121	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	LLOYD'S SYNDICATE NUMBER 2791	XXX	XXX	XXX	XXX	XXX	LXXX	XXX	LXXX	LXXX	XXX	LXXX	LXXX	XXX	XXX	XXX	XXX
	Lloyd's Syndicate Number 2987	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	otal Authorized - Other Non-U.S. Insurers	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	Protected Cells					,			,	,							
1499999 - To	otal Authorized Excluding Protected Cells (Sum of 0899999,	VVV	VVV	VVV	VVV	VVV	VVV	VVV	VVV	VVV	VVV	VVV	VVV	VVV	VVV	VVV	, , , , , , , , , , , , , , , , , , ,
	0999999, 1099999, 1199999 and 1299999)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	- Affiliates - U.S. Intercompany Pooling																
	- Affiliates - U.S. Non-Pool - Captive																
	- Affiliates - U.S. NonPool - Other																
	- Affiliates - Other (Non-U.S.) - Captive																
	- Affiliates - Other (Non-U.S.) - Other	VVV	I VVV	T VVV	T VVV	1 1000	VVV	T VVV	I www	T 2007	T 9999	T 2007		1 1/1/1/	1 1/1/1/	VVV	1000
	ORPHEUS RE LTD.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	otal Unauthorized - Affiliates - Other (Non-U.S.) - Other	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	otal Unauthorized - Affiliates - Other (Non-U.S.) - Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	otal Unauthorized – Affiliates – Total Unauthorized –																
	Affiliates	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	- Other U.S. Unaffiliated Insurers																
	- Pools - Mandatory Pools																
	- Pools - Voluntary Pools																
	- Other non-U.S. Insurers																
AA-1460019		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3191306	Bluefire Re Ltd	XXX	LXXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

SCHEDULE F - PART 3 (Continued) Ceded Reinsurance as of December 31, Current Year (\$000 Omitted) (Provision for Reinsurance for Certified Reinsurers)

								Pr	ovision for Cert	tified Reinsura	nce						
		54	55	56	57	58	59	60	61	62	63	64	65	Complete it	Col. 52 = "No"	; Otherwise	69
						"				-					Enter 0		"
								Percent of	Percent					66	67	68	Provision for
								Collateral	Credit				20% of		"	00	Overdue
								Provided for		20% of			Recoverable				Reinsurance
								Net	Net	Recoverable		Provision for					Ceded to
						Not				1				Total			Ceded to
						Net			Recoverables		A	Reinsurance	LOSSES &	Total	N1-4		
				l <u> </u>		Recoverables		Subject to	Subject to	Losses &	Amount of			Collateral	Net .		Reinsurers
				Percent	1	Subject to	Dollar	Collateral	Collateral	LAE Over	Credit	Reinsurers	_ Days Past	Provided	Unsecured		(Greater of
				Collateral	Catastrophe		Amount of		Requirements		Allowed for	Due to	Due Amounts		Recoverable		[Col. 62 +
ID						Requirements	Collateral		(Col. 60 / Col.	Past Due	Net	Collateral	Not in	21+Col.22+	for Which		Col. 65] or
Number		Reinsurer	of Certified	Full Credit		for Full Credit	Required	21+Col.	56, not to		Recoverables		Dispute	Col. 24; not	Credit is	20% of	Col. 68; not
From	Name of Reinsurer	Rating	Reinsurer	(0% through		(Col. 19 –	(Col. 56 *	22+Col.	exceed		(Col. 57+[Col.	(Col. 19 –	(Col. 47 *		Allowed (Col.	Amount in	to Exceed
Col. 1	From Col. 3	(1 through 6)	Rating	100%)	Deferral	Col. 57)	Col. 58)	24]/Col. 58)	100%)		58 * Col. 61])	Col. 63)	20%)	Col. 63)	63-Col. 66)	Col. 67	Col. 63)
AA - 1460018	Catlin Re Switzerland Ltd	XXX	XXX	XXX		XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA - 3770420	Coastal Ins SPC.	XXX	XXX	XXX	. LXXX	XXX	XXX		XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX
AA-3770495	Corinthian Re SPC	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-5320039 AA-3191298	Peak Reins Co Ltd	XXX	XXXXXX	XXX	XXXXXX	XXX	XXXXXX	XXX	XXX	XXX	XXXXXX	XXX	XXX	XXX	XXXXXX	XXXXXX	XXX
AA-1460023	RenaissanceRe Europe AG	XXX XXX	XXX	XXXXXX	-†XXX	XXXXXX	XXX	XXX	XXX	XXXXXX	XXX	XXX	XXX	XXXXXX	XXX	XXX	XXXXXX
	Topsail Reins Spc Ltd.	XXX	XXX	XXX	·†^^^-	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1XXX
	Watford Re Ltd.	XXX	XXX	xxx	1xxx	1xxx	XXX	XXX	XXX	1XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	otal Unauthorized - Other Non-U.S. Insurers	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	- Protected Cells	7///	AAA		1 ////	ΛΛΛ	AAA	AAA	AAA	ΛΛΛ		AAA	AAA	AAA	ΛΛΛ	AAA	AAA
	otal Unauthorized Excluding Protected Cells (Sum of			1				T			1						
2033333 - 11	2299999. 2399999. 2499999. 2599999 and 2699999)	XXX	XXX	l xxx	XXX	l xxx l	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	l xxx
Certified - A	ffiliates - U.S. Intercompany Pooling	N/A/	7000	7000	7///	AAA	7001	7000	7///	7000	, , , , ,	, , , , , , , , , , , , , , , , , , ,	MM	7000	7001	7001	7///
	ffiliates - U.S. Non-Pool - Captive																
	ffiliates - U.S. Non-Pool - Other																
	ffiliates - Other (Non-U.S) - Captive																
Certified - A	ffiliates - Other (Non-U.S.) - Other																
Certified - 0	ther U.S. Unaffiliated Insurers																
Certified - P	ools - Mandatory Pools																
Certified - P	ools – Voluntary Pools																
Certified - 0	ther Non-U.S. Insurers																
Certified - P	rotected Cells																
Reciprocal Ju	risdiction - Affiliates - U.S. Intercompany Pooling																
Reciprocal Ju	risdiction - Affiliates - U.S. Non-Pool - Captive																
Reciprocal Ju	risdiction - Affiliates - U.S. Non-Pool - Other																
Reciprocal Ju	risdiction - Affiliates - Other (Non-U.S.) - Captive																
	risdiction - Affiliates - Other (Non-U.S.) - Other																
	risdiction – Other U.S. Unaffiliated Insurers																
	risdiction – Pools – Mandatory Pools																
	risdiction – Pools – Voluntary Pools																
	risdiction – Other Non–U.S. Insurers																
	risdiction - Protected Cells																
9999999 T	otals	XXX	XXX	XXX				XXX	XXX								

			(Tota	I Provision for Reinsu	rance)	•				
		70		norized Reinsurance		due Authorized and		Total Provision	for Reinsurance	
		'				iction Reinsurance				
			71	72	73	74	75	76	77	78
			1 ''	12	70	Complete if	, ,	''	,,	70
						Col. 52 = "No";				
					Complete if	Otherwise Enter 0				
						Otherwise Enter 0				
					Col. 52 = "Yes";					
					Otherwise Enter 0	Greater of 20% of Net				
						Recoverable Net of				
					20% of Recoverable	Funds Held &				
				Provision for Overdue						
		20% of Recoverable	Provision for	Reinsurance from	Over 90 Days Past	Recoverable on Paid		Provision for Amounts		
		on Paid Losses &	Reinsurance with	Unauthorized	Due Amounts Not in	Losses & LAE Over	Ceded to Authorized	Ceded to		
ID I		LAE Over 90 Days	Unauthorized	Reinsurers and	Dispute + 20% of	90 Days Past Due	and Reciprocal	Unauthorized	Provision for Amounts	
Number		Past Due Amounts	Reinsurers Due to	Amounts in Dispute	Amounts in Dispute	(Greater of Col. 26 *	Jurisdiction	Reinsurers	Ceded to Certified	Total Provision for
From	Name of Reinsurer	Not in Dispute	Collateral Deficiency	(Col. 70 + 20% of the	([Col. 47 * 20%] +	20% or [Col. 40 + 41]	Reinsurers	(Cols. 71 + 72 Not in	Reinsurers	Reinsurance
Col. 1	From Col. 3	(Col. 47 * 20%)	(Col. 26)	`Amount in Col. 16)	"[Col. 45 * 20%])	* 20%)	(Cols. 73 + 74)	Excess of Col. 15)	(Col. 64 + 69)	(Cols. 75 + 76 + 77)
	Affiliates - U.S. Intercompany Pooling		. , -,	/	- /					, /
	Affiliates - U.S. Non-Pool - Captive									
	Affiliates - U.S. Non-Pool - Other									
	Affiliates - Other (Non-U.S.) - Captive									
	Affiliates - Other (Non-U.S.) - Other									
	Other U.S. Unaffiliated Insurers									
	ARCH REINS CO		I XXX	XXX		1		I XXX	XXX	
	DORINCO REINS CO.		XXX	XXX				XXX	XXX	
	ENDURANCE ASSUR CORP.	[XXX	XXX				XXX	XXX	
04-1543470	LIBERTY MUT INS CO.		XXX	XXX		<u> </u>		XXX	XXX	
02-0170490	NGM INS CO		XXX	XXX		<u> </u>		XXX	XXX	
	ODYSSEY REINS CO.		XXX	XXX		ļ		XXX	XXX	
13-3031176	PARTNER REINS CO OF THE US.		XXX	XXX				XXX	XXX	
	RENAISSANCERE EUROPE AG US BRANCH		XXX	XXX				XXX	XXX	
	otal Authorized – Other U.S. Unaffiliated Insurers		XXX	XXX				XXX	XXX	
	Pools – Mandatory Pools									
	Pools – Voluntary Pools									
	Other Non-U.S. Insurers									
AA - 1126435	LLOYD'S SYNDICATE NUMBER 435		XXX	XXX				XXX	XXX	
AA - 1126566	LLOYD'S SYNDICATE NUMBER 566 (Incidental to 2999)		XXX	XXX				XXX	XXX	
AA - 1126609	LLOYD'S SYNDICATE NUMBER 609		ХХХ	XXX		ļ		XXX	ХХХ	
	LLOYD'S SYNDICATE NUMBER 1084.		XXX	XXX				XXX	XXX	
	Lloyd's Syndicate Number 1414		XXX	XXX				XXX	XXX	
	LLOŸD'S SŸNDICATE NUMBER 1945		XXX	XXX		 		XXX	XXX	
AA -1128121	LLOYD'S SYNDICATE NUMBER 2121		XXX	XXX				XXX	XXX	
AA - 1128791 AA - 1128987	Lloyd's Syndicate Number 2/91		XXX	XXX XXX		 		XXXXXX	XXX XXX	
			XXX	XXX				XXX	XXX	
	otal Authorized - Other Non-U.S. Insurers		YXX	λλλ		1		XXX	λλλ	
	Protected Cells	1	1			1		1		
	otal Authorized Excluding Protected Cells (Sum of 0899999, 09999999, 10999999,		VVV	VVV				VVV	VVV	
	1199999 and 1299999)		XXX	XXX				XXX	XXX	
	- Affiliates - U.S. Intercompany Pooling									
	- Affiliates - U.S. Non-Pool - Captive									
	- Affiliates - U.S. NonPool - Other									
	- Affiliates - Other (Non-U.S.) - Captive									
	- Affiliates - Other (Non-U.S.) - Other		1		1007	T WAR	I wor	1	1007	
	ORPHEUS RE LTD.				XXX	XXX	XXX		XXX	
	otal Unauthorized - Affiliates - Other (Non-U.S.) - Other				XXX	XXX	XXX		XXX	
	otal Unauthorized – Affiliates – Other (Non-U.S.) – Total				XXX	XXX	XXX		XXX	
	otal Unauthorized – Affiliates – Total Unauthorized – Affiliates				XXX	XXX	XXX		XXX	
	- Other U.S. Unaffiliated Insurers									
	- Pools - Mandatory Pools									
	– Pools – Voluntary Pools									
	- Other non-U.S. Insurers									
AA - 1460019	MS Amlin AG				XXX	XXX	XXX		XXX	

SCHEDULE F - PART 3 (Continued) Ceded Reinsurance as of December 31, Current Year (\$000 Omitted) (Total Provision for Reinsurance)

			(Tota	I Provision for Reinsu	rance)					
		70	Provision for Unautl	norized Reinsurance	Provision for Over	due Authorized and		Total Provision	for Reinsurance	
					Reciprocal Jurisdi	iction Reinsurance				
			71	72	73	74	75	76	77	78
			, ,	12	70	Complete if	''	''	''	7.0
						Col. 52 = "No";				
					0I-t- if					
					Complete if	Otherwise Enter 0				
					Col. 52 = "Yes";					
					Otherwise Enter 0	Greater of 20% of Net				
						Recoverable Net of				
					20% of Recoverable	Funds Held &				
				Provision for Overdue	on Paid Losses & LAF	Collateral, or 20% of				
		20% of Recoverable	Provision for	Reinsurance from	Over 90 Days Past		Provision for Amounts	Provision for Amounts		
		on Paid Losses &	Reinsurance with	Unauthorized	Due Amounts Not in	Losses & LAE Over	Ceded to Authorized	Ceded to		
l ID		LAE Over 90 Davs	Unauthorized	Reinsurers and	Dispute + 20% of	90 Days Past Due	_	Unauthorized	Provision for Amounts	
							and Reciprocal			T : ID :: f
Number		Past Due Amounts	Reinsurers Due to	Amounts in Dispute	Amounts in Dispute	(Greater of Col. 26 *	Jurisdiction	Reinsurers	Ceded to Certified	Total Provision for
From	Name of Reinsurer	Not in Dispute	Collateral Deficiency	(Col. 70 + 20% of the	([Col. 47 * 20%] +	20% or [Col. 40 + 41]		(Cols. 71 + 72 Not in	Reinsurers	Reinsurance
Col. 1	From Col. 3	(Col. 47 * 20%)	(Col. 26)	Amount in Col. 16)	[Col. 45 * 20%])	* 20%)	(Cols. 73 + 74)	Excess of Col. 15)	(Col. 64 + 69)	(Cols. 75 + 76 + 77)
	Bluefire Re Ltd				XXX	ХХХ	XXX		XXX	
	Catlin Re Switzerland Ltd.				XXX	XXX	XXX		XXX	
	Coastal Ins SPC				XXX	ХХХ	XXX		XXX	
AA-3770495	Corinthian Re SPC				XXX	ХХХ	XXX		XXX	
	Peak Reins Co Ltd.				XXX	ХХХ	XXX		XXX	
AA-3191298	Qatar Reins Co Ltd				XXX	XXX	XXX		XXX	
AA-1460023	RenaissanceRe Europe AG.				XXX	XXX	XXX		XXX	
AA-3770492	Topsail Reins Spc Ltd				XXX	XXX	XXX		XXX	
	Watford Re Ltd.				XXX	XXX	XXX		XXX	
	tal Unauthorized – Other Non-U.S. Insurers				XXX	XXX	XXX		XXX	
Unauthorized	- Protected Cells									
2899999 - To	tal Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999,									
	2599999 and 2699999)				XXX	XXX	XXX		XXX	
Certified - A	filiates - U.S. Intercompany Pooling			•		•	•	•		
Certified - A	filiates - U.S. Non-Pool - Captive									
	filiates - U.S. Non-Pool - Other									
	ffiliates - Other (Non-U.S) - Captive									
	ffiliates - Other (Non-U.S.) - Other									
	ther U.S. Unaffiliated Insurers									
	pols - Mandatory Pools									
Cortified Po	pols - Voluntary Pools									
	ther Non-U.S. Insurers									
	rotected Cells									
	risdiction - Affiliates - U.S. Intercompany Pooling									
	risdiction - Affiliates - U.S. Non-Pool - Captive									
	risdiction – Affiliates – U.S. Non–Pool – Other									
	risdiction – Affiliates – Other (Non–U.S.) – Captive									
	risdiction – Affiliates – Other (Non–U.S.) – Other									
	risdiction – Other U.S. Unaffiliated Insurers									
	risdiction – Pools – Mandatory Pools									
Reciprocal Jul	risdiction – Pools – Voluntary Pools									
	risdiction - Other Non-U.S. Insurers									
Reciprocal Jun	risdiction - Protected Cells									
0,00000 - 10	tal Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)									
9999999 To						 				
_ 9999999 10	ກເລເວ						1		1	

SCHEDULE F - PART 4

Issuing or Confirming Banks for Letters of Credit from Schedule F, Part 3 (\$000 Omitted)

Issuing or Confirming	1	American Bankers		
Bank Reference	Letters of			
Number	Credit Code	Association (ABA) Routing Number	Issuing or Confirming Bank Name Letters of Credit Amount	
	Code			06
0001	22		DANGLATO DANK PLG, NEW TORK DRANGE.	36
0001	22	981390502	LLOYDS BANK CORPORATE MARKETS PLC, NEW YORK BRANCH	86
0001	2	026007728	NATIONAL AUSTRALIA BANK LIMITED	15
0001	2	026007689	BNP PARIBAS, NEW YORK BRANCH 6	43
0001	2	026008044	COMMERZBANK, A.G.	43
0002	1	021000089	CITIBANK NA	65
0003	1	026009917	AUSTRALIA AND NEW ZEALAND BANKING GROUP LTD	31
0004	1	021000089	CITIBANK NA	96
0005	1	981390502	LLOYDS BANK CORPORATE MARKETS PLC, NEW YORK BRANCH	26
0006	1	026001591	STANDARD CHARTERED	57
0007	3	111000753	COMERICA BANK	19
0007	3	026014685	CHINA CONSTRUCTION BANK, NY BRANCH. 2,0	54
	3	111000753	COMERICA BANK.	85
0008	3	026014685	CHINA CONSTRUCTION BANK, NY BRANCH	90
0009	l1	101000019	COMMERCE BANK 1,60	07
0009	1	121000248.	WELLS FARGO BANK, NA	37
Total			24,74	40

SCHEDULE F - PART 5

Interrogatories for Schedule F, Part 3 (000 Omitted)

A. Report the five largest provisional commission rates included in the cedant's reinsurance treaties. The commission rate to be reported is by contract with ceded premium in excess of \$50,000:

		2	J
	Name of Reinsurer	Commission Rate	Ceded Premium
1.	ENDURANCE ASSUR CORP.	20.000	1,536
2.	NGM INS CO	20.000	9,746
3.	ODYSSEY REINS CO	20.000	8,033
4.	CORINTHIAN RE SPC	20.000	3,632
5.	PEAK REINS CO LTD	19.000	6,320

Report the five largest reinsurance recoverables reported in Schedule F, Part 3. Column 15, due from any one reinsurer (based on-the total recoverables), Schedule F, Part 3, Line 9999999, Column 15, the amount of ceded premium, and indicate whether the recoverables are due from B. an affiliated insurer.

	1	2	3	4
	Name of Reinsurer	Total Recoverables	Ceded Premiums	<u>Affiliated</u>
6.	BLUEFIRE RE LTD	9,384	12,851	Yes [] No [X]
7.	NGM INS CO	8,617	9,746	Yes [] No [X]
8.	CATLIN RE SWITZERLAND LTD	7,754	8,704	Yes [] No [X]
9.	ODYSSEY RIENS CO	7,552	8,033	Yes [] No [X]
10	DORINCO REINS CO	4,848	5,853	Yes [] No [X]

NOTE: Disclosure of the five largest provisional commission rates should exclude mandatory pools and joint underwriting associations.

SCHEDULE F - PART 6

Restatement of Balance Sheet to Identify Net Credit for Reinsurance 3 As Reported (Net of Ceded) Restatement Adjustments (Gross of Ceded) ASSETS (Page 2, Col. 3) 1. Cash and invested assets (Line 12)30,530,969 .30,530,969 .24,948,129 .24,948,129 2. Premiums and considerations (Line 15)11,457,973 ..(11,457,973) 3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1)... 4 Funds held by or deposited with reinsured companies (Line 16.2)... 5. Other assets 1.139.901 1.139.901 6. Net amount recoverable from reinsurers 26.930.448 26.930.448 7. Protected cell assets (Line 27) .. 8. Totals (Line 28)68,076,972 .15,472,475 .83,549,447 LIABILITIES (Page 3) .2,048,486 .39,207,409 9. Losses and loss adjustment expenses (Lines 1 through 3) . 10. Taxes, expenses, and other obligations (Lines 4 through 8)1,781,811 .1,781,811 .22,930,809 ..1,146,540 .21,784,269 11. Unearned premiums (Line 9) ... 12. Advance premiums (Line 10). 13. Dividends declared and unpaid (Line 11.1 and 11.2) .28,712,343 ..(28,712,343) 14. Ceded reinsurance premiums payable (net of ceding commissions) (Line 12) 15. Funds held by company under reinsurance treaties (Line 13)16,806,861 .(16,806,861) 16. Amounts withheld or retained by company for account of others (Line 14) .661,250 661.250 17. Provision for reinsurance (Line 16) 18. Other liabilities ... 6,069,385 6,069,385 72,699,151 57,226,676 15,472,475 19. Total liabilities excluding protected cell business (Line 26) .. 20. Protected cell liabilities (Line 27) ...

NOTE: Is the restatement of this exhibit the result of grossing up balances ceded to affiliates under 100 percent reinsurance or pooling arrangements? Yes [] No [X] If yes, give full explanation:

21. Surplus as regards policyholders (Line 37)

Totals (Line 38)

10,850,296

68,076,972

XXX

15.472.475

10,850,296

83.549.447

SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT

														Other Individua	al Contracts				
		Total		Group Acci Heal		Credit A (Group and I		Collectively R	enewable	Non-Canc	elable	Guaranteed R	enewable	Non-Renev Stated Reas		Other Accide	ent Only	All Oth	ner
		1 Amount	2 %	3 Amount	4 %	5 Amount	6 %	7 Amount	8 %	9 Amount	10 %	11 Amount	12 %	13 Amount	14 %	15 Amount	16 %	17 Amount	18 %
		<u>.</u>					PART 1 -	ANALYSIS OF I	JNDERWRI	ING OPERATION	ONS	•							_
1.	Premiums written	17,900	ХХХ		ХХХ		ХХХ		ХХХ		XXX		XXX		ХХХ	17,900	ХХХ		ХХХ
2.	Premiums earned	22,044	ХХХ		ххх		ххх		ХХХ		XXX		XXX		ххх	22,044	XXX		ххх
3.	Incurred claims	583	2.6						ļ							583	2.6		
4.	Cost containment expenses	1,920	8.7						ļ							1,920	8.7		
5.	Incurred claims and cost containment expenses (Lines 3 and 4)	2,503	11.4													2,503	11.4		
6.	Increase in contract reserves																		
7.	Commissions (a)	3,522	16.0						ļ							3,522	16.0		
8.	Other general insurance expenses																		
9.	Taxes, licenses and fees	13,119	59.5			ļ										13 , 119	59.5		
10.	Total other expenses incurred	16,640	75.5													16,640	75.5		
11.	Aggregate write-ins for deductions																		
12.	Gain from underwriting before dividends or refunds	2,901	13.2													2,901	13.2		
13.	Dividends or refunds					ļ													
14.	Gain from underwriting after dividends or refunds	2,901	13.2													2,901	13.2		
DETA	ILS OF WRITE-INS																		
1101						ļ													
1102																			
1103	J																		
1198	Summary of remaining write-ins for Line 11 from overflow page																		
1199). Total (Lines 1101 through 1103 plus 1198) (Line 11 above)																		

(a) Includes \$reported as "Contract, membership and other fees retained by agents."

SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT (Continued)

						1	· · ·		
	1	2	3	4			ts		
					5	6	7	8	9
		Group Accident And	Credit A&H	Collectively		Guaranteed	Non-Renewable for		
	Total	Health	(Group and Individual)	Renewable	Non-Cancelable	Renewable	Stated Reasons Only	Other Accident Only	All Other
	•	P/	ART 2 - RESERVES AN	D LIABILITIES	•		•		
A. Premium Reserves:									
Unearned premiums	3,678							3,678	
2. Advance premiums									
Reserve for rate credits									
4. Total premium reserves, current year								3,678	
5. Total premium reserves, prior year								7 ,821	
Increase in total premium reserves	(4,144)							(4,144)	
B. Contract Reserves:									
Additional reserves (a)									
Reserve for future contingent benefits									
3. Total contract reserves, current year									
Total contract reserves, prior year									
5. Increase in contract reserves									
C. Claim Reserves and Liabilities:									
Total current year	2,000				ļ			2,000	
2. Total prior year	1,936							1,936	
3. Increase	64							64	

	PART 3 - TEST OF PRIOR YEAR'S CLAIM RESERVES AND LIABILITIES													
Claims paid during the year:														
1.1 On claims incurred prior to current year	500						500							
1.2 On claims incurred during current year	19						L19							
2. Claim reserves and liabilities, December 31, current year:														
2.1 On claims incurred prior to current year														
2.2 On claims incurred during current year	2,000						2,000							
3. Test:														
3.1 Lines 1.1 and 2.1	500						500							
3.2 Claim reserves and liabilities, December 31 prior year	1,936						1,936							
3.3 Line 3.1 minus Line 3.2	(1,436)						(1.436)							

PART 4 - REINSURANCE													
A. Reinsurance Assumed:													
Premiums written													
Premiums earned													
Incurred claims													
4. Commissions													
B. Reinsurance Ceded:													
Premiums written	340 , 105							340 , 105					
2. Premiums earned	418,833							418,833					
Incurred claims	9,790							9,790					
4. Commissions	56,578							56,578					

(a) Includes \$ premium deficiency reserve.

SCHEDULE H - PART 5 - HEALTH CLAIMS

	1 Medical	2 Dental	3 Other	4 Total
A. Direct:				
Incurred Claims				
Beginning Claim Reserves and Liabilities				
Ending Claim Reserves and Liabilities				
4. Claims Paid				
B. Assumed Reinsurance:				
Incurred Claims				
Beginning Claim Reserves and Liabilities				
Ending Claim Reserves and Liabilities				
8. Claims Paid				
C. Ceded Reinsurance:				
Incurred Claims	ION	\IE		
Beginning Claim Reserves and Liabilities		V L		
11. Ending Claim Reserves and Liabilities				
12. Claims Paid				
D. Net:				
13. Incurred Claims				
14. Beginning Claim Reserves and Liabilities				
15. Ending Claim Reserves and Liabilities				
16. Claims Paid				
E. Net Incurred Claims and Cost Containment Expenses:				
17. Incurred Claims and Cost Containment Expenses				
18. Beginning Reserves and Liabilities				
19. Ending Reserves and Liabilities				
20. Paid Claims and Cost Containment Expenses				

SCHEDULE P - ANALYSIS OF LOSSES AND LOSS EXPENSES SCHEDULE P - PART 1 - SUMMARY

	(\$000 Omitted) Premiums Earned Loss and Loss Expense Payments 12 Years in 1 2 3 Defense and Cost Adjusting and Other 10 11												
		Pr	emiums Earn	ed			Loss	and Loss Ex	kpense Paym	ents			12
		1	2	3							10	11	
	hich				Loss Pa			t Payments		nents	_		Number of
	miums				4	5	6	7	8	9	Salvage	Total Net	Claims
1	Earned Losses	_ , ,			D:		D		5		and	Paid (Cols.	Reported
	Incurred	Direct and Assumed	Ceded	Net (Cols. 1 - 2)	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Subrogation Received	4 - 5 + 6 - 7 + 8 - 9)	Direct and Assumed
VVCIC	incurred	Assumed	Ceded	(COIS. 1 - 2)	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Neceived	7+0-9)	Assumed
1.	Prior	XXX	XXX	XXX									XXX
2.	2012	3,338	1,732	1,606	2,623	1,408	136	79	269	174	72	1,367	XXX
3.	2013	3, 193	1,394	1,798	3,213	1 , 427	62	30	363	180	109	2,001	xxx
4.	2014	4,417	3,406	1,011	3,658	2,752	53	36	218	164	249	977	XXX
5.	2015	9,944	9,258	686	9,486		369	352	695	627	351	613	XXX
6.	2016	9,113	8,781	332	8,398	8,039	217	208	518	494	119	391	XXX
7.	2017	4,326	4 , 154	172	2,859	2,715	48	47	343	325	7	164	XXX
8.	2018	2,341	2,259	83	1,469	1,395	35	34	165	157	5	84	XXX
9.	2019	48,299	46 , 888	1,412	25,690	24,898	32	30	4 , 365	4,233	41	925	XXX
10.	2020	64,755	61,753	3,002	35,405	33,699	60	57	6,836	6,507	111	2,038	XXX
11.	2021	83,075	79,035	4,040	37,436	35,564	378	359	6,022	5,721	97	2,192	XXX
12.	Totals	XXX	XXX	XXX	130,237	120,856	1,390	1,231	19,794	18,583	1,160	10,751	XXX

		Losses	Unpaid		Defens	e and Cost (Containment	Unpaid	Adjusting Ung		23	24	25
	Case	Basis	Bulk +	· IBNR	Case	Basis	Bulk +	· IBNR	21	22	1	Total	Number of
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and	Ceded	Salvage and Subrog- ation Anticipated	Net Losses and Expenses Unpaid	Claims Outstand- ing Direct and Assumed
1													XXX
2													xxx
3													xxx
4													XXX
5	5	4	9	7			2	1				4	XXX
6	7	7	16	15			2	2	1	1		1	XXX
7	30	29	14	13			2	2	2	2		2	XXX
8	15	14	13	12	1	1	3	3	1	1		2	XXX
9	433	417	510	491			109	105	51	49	ļ	42	XXX
10	1,381	1,312	2,301	2,188			483	459	196	186		215	xxx
11.	12,235	11,623	18,450	17,528	4	4	2,971	2,822	2,009	1,908		1,783	XXX
12.	14,106	13,405	21,312	20,254	5	5	3,572	3,394	2,261	2,149		2,048	XXX

	Losses and	Total d Loss Expense	es Incurred		oss Expense F.		Nontabul	ar Discount	34 Inter-		nce Sheet ter Discount
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense	Company Pooling Participation Percentage	35 Losses Unpaid	36 Loss Expenses Unpaid
1	xxx	xxx	XXX	XXX	XXX	XXX			xxx		
2	3,028	1,661	1,367	90.7	95.9	85.1					
3	3,638	1,637	2,001	114.0	117 .4	111.3					
4	3,929	2,952	977	88.9	867	96.6					
5	10,566	9,949	616	106.3	107 .5	89.9				3	
6	9 , 159	8,767	392	100.5	99.8	118.2				1	
7	3,298	3 , 132	166	76.2	75.4	96.6				2	
8	1,703	1,617	85	72.7	71.6	103.4				1	
9	31 , 189	30,223	966	64.6	64.5	68.5				36	6
10	46 , 662	44,409	2,253	72.1	71.9	75.0				181	33
11.	79,505	75,530	3,975	95.7	95.6	98.4				1,534	249
12.	XXX	XXX	XXX	XXX	XXX	XXX			XXX	1,759	290

Note: Parts 2 and 4 are gross of all discounting, including tabular discounting. Part 1 is gross of only nontabular discounting, which is reported in Columns 32 and 33 of Part 1. The tabular discount, if any, is reported in the Notes to Financial Statements, which will reconcile Part 1 with Parts 2 and 4.

SCHEDULE P - PART 2 - SUMMARY

	INC	URRED NET	LOSSES AN	D DEFENSE	AND COST C	CONTAINMEN	IT EXPENSE	S REPORTE	O AT YEAR E	ND	1	
						MITTED)					DEVELO	PMENT
Years in Which	1	2	3	4	5	6	7	8	9	10	11	12
Losses Were Incurred	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	One Year	Two Year
1. Prior	364	500	456	447	445	445	445	445	445	445		
2. 2012	1,344	1,350	1,383	1,285	1,272	1,273	1,272	1,272	1,272	1,272		
3. 2013	xxx	1,749	1,802	1,921	1,871	1,826	1,818	1,818	1,818	1,818		
4. 2014	XXX	XXX	852	929	926	929	927	924	923	923		(1)
5. 2015	XXX	XXX	xxx	566	535	567	550	551	549	548		(2)
6. 2016	XXX	XXX	xxx	XXX	374	396	395	374	369	368	(1)	(5)
7. 2017	XXX	XXX	xxx	xxx	XXX	181	164	153	149	148	(1)	(6)
8. 2018	XXX	XXX	xxx	XXX	XXX	XXX	95	84	77	77		(7)
9. 2019	XXX	XXX	xxx	xxx	xxx	XXX	xxx	863	851	833	(18)	(30)
10. 2020	XXX	xxx	xxx	xxx	xxx	XXX	xxx	xxx	1,958	1,915	(43)	xxx
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,574	XXX	XXX
										12. Totals	(63)	(50)

SCHEDULE P - PART 3 - SUMMARY

			•••				0 - 0					
	CUMULAT	IVE PAID NE	T LOSSES A	ND DEFENSE			NT EXPENSE	ES REPORTE	D AT YEAR I	END (\$000	11	12
	1	2	3	4	OMIT 5	1ED) 6	7	8	9	10	Number of	Number of Claims
	'	2	3	4	5	O	,	0	9	10	Claims	Closed
Years in Which											Closed With	Without
Losses Were											Loss	Loss
Incurred	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	Payment	Payment
1. Prior	000	312	359	422	441	441	445	445	445	445	XXX	XXX
2. 2012	861	953	1,260	1,262	1,260	1,272	1,272	1,272	1,272	1,272	XXX	xxx
3. 2013	XXX	1,141	1,580	1,778	1,806	1,818	1,818	1,818	1,818	1,818	XXX	xxx
4. 2014	XXX	xxx	464	780	885	906	923	923	923	923	XXX	xxx
5. 2015	XXX	xxx	XXX	321	472	528	537	545	545	545	xxx	XXX
6. 2016	XXX	xxx	xxx	XXX	195	341	361	365	367	367	xxx	XXX
7. 2017	XXX	xxx	XXX	XXX	XXX	86	137	145	146	146	XXX	XXX
8. 2018	XXX	xxx	XXX	XXX	XXX	XXX	46	70	73	76	XXX	XXX
9. 2019	XXX	xxx	XXX	XXX	XXX	XXX	XXX	391	749	793	XXX	XXX
10. 2020	XXX	xxx	xxx	xxx	XXX	XXX	XXX	xxx	996	1,710	xxx	XXX
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	xxx	XXX	1,891	XXX	XXX

SCHEDULE P - PART 4 - SUMMARY

		U	OHLD		- I WIZI	T - 00	, 1411417-11	\ I		
Years in Which	BULK AND IE	BNR RESERVES	ON NET LOSS	SES AND DEFE	NSE AND COST	CONTAINMEN	IT EXPENSES F	REPORTED AT '	YEAR END (\$00	00 OMITTED)
Losses Were Incurred	1 2012	2 2013	3 2014	4 2015	5 2016	6 2017	7 2018	8 2019	9 2020	10 2021
1. Prior	96	47	20	5	1					
2. 2012	217	194	37	23	5	2				
3. 2013	xxx				28	8				
4. 2014	xxx	XXX	167	92	19	15	4	1		
5. 2015	XXX	XXX	XXX	169	49	25	6	3	1	2
6. 2016	XXX	XXX	XXX	xxx	118	48	21	6	1	1
7. 2017	XXX	XXX	XXX	xxx	XXX	65	18	6	2	1
8. 2018	XXX	XXX	XXX	xxx	XXX	XXX	28	8	2	1
9. 2019	XXX	XXX	XXX	xxx	XXX	xxx	xxx	320	61	23
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	639	136
l 11 2021 l	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1 071

SCHEDULE P - PART 1A - HOMEOWNERS/FARMOWNERS (\$000 OMITTED)

Years in	П	remiums Earn	od	Loss and Loss Expense Payments Defense and Cost Adjusting and Other 10 11										
Which	1	2	3							10	10 11 Total Salvage Net Paid			
Premiums	'	4	3	Loss Pa	vmente		it Payments	Payn		10	11			
Were				1	5	6	7	R Fayii	9	1	Total	Number of		
Earned				+	3	٥	,	ľ	9	Salvage		Claims		
and Losses										and	(Cols. 4 - 5	Reported		
Were	Direct and		Net	Direct and		Direct and		Direct and		Subrogation		Direct and		
Incurred	Assumed	Ceded	(Cols. 1 - 2)		Ceded	Assumed	Ceded	Assumed	Ceded	Received	+ 8 - 9)	Assumed		
				7100011100	00000	7100011100	00000	7100011100	00000	110001104	3 0)			
1. Prior	XXX	XXX	ļXXX									XXX		
2 2012														
2. 2012														
3. 2013														
4 2014														
4. 2014														
5. 2015														
6, 2016														
0. 2010														
7. 2017	ļ		ļ											
8. 2018														
9. 2019														
9. 2019														
10. 2020	ļ													
11. 2021														
12. Totals	XXX	XXX	XXX				·					XXX		

									Adjusting		23	24	25
			Unpaid				Containment U		Unp	paid	_		
	Case	Basis	Bulk +	IBNR	Case	Basis	Bulk +	IBNR	21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded	Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
_						-						G.1,p.2.1.2.	
1.													
2.													
3.													
4.													
5.						V		l					
6.					-								
7.													
8.													
9.													
10.													
11.													
12.													

		Total		Loss and L	oss Expense P	ercentage			34	Net Bala	nce Sheet
	Losses an	d Loss Expense	es Incurred		ed/Premiums E		Nontabula	ar Discount	Inter-		fter Discount
	26	27	28	29	30	31	32	33	Company Pooling	35	36 Loss
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Participation Percentage	Losses Unpaid	Expenses Unpaid
1.	XXX	XXX	XXX	XXX	XXX	xxx			xxx		
2.											
3.											
4.											
5.											
6.											
7.											
8.											
9.											-
11.			-			t					
12.	xxx	XXX	XXX	xxx	XXX	XXX			XXX		

SCHEDULE P - PART 1B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

\$000 OMITTED)

Years in	Pr	emiums Earne	ed		,	Los		cpense Payme	nts			12
Which	1	2	3			Defense		Adjusting		10	11	
Premiums Were				Loss Pa	yments 5	Containmer 6	t Payments	Payn 8	nents 9	-	Total	Number of
Earned				4	5	O	,	°	9	Salvage	Net Paid	Claims
and Losses										and	(Cols. 4 - 5	Reported
Were Incurred	Direct and Assumed	Ceded	Net (Cols. 1 - 2)	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Subrogation Received	+ 6 - 7 + 8 - 9)	Direct and Assumed
				Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Received	+ 0 - 9)	
1. Prior	XXX	XXX	XXX									XXX
2. 2012	2,221	1 , 150	1,072	1,893	1,031	113	64	180	131	13	960	6,496
3. 2013	2,123	909	1,214	1,962	874	61	29	242	120	16	1,242	3,638
4. 2014	2,932	2,201	730	2,718	2,038	45	29	146	108	180	734	935
5. 2015	5,907	5,439	468	6,610	6 , 190	275	261	426	382	167	478	2,182
6. 2016	5,593	5,362	231	5,997	5,737	152	145	318	304	28	280	1,661
7. 2017	2,702	2,579	123	1,970	1,871	34	33	213	202	1	110	536
8. 2018	1,578	1,511	67	1,051	999	21	21	127	121	3	59	290
9. 2019	37 , 261	36 , 161	1 , 100	21,315	20 , 658	20	19	3,383	3,281	10	759	6,640
10. 2020	49 ,707	47 , 384	2,323	28,223	26 , 864	35	33	5,256	5,003	22	1,613	8,426
11. 2021	62,814	59,742	3,072	24,050	22,847	202	192	4,571	4,342	19	1,441	12,464
12. Totals	XXX	XXX	XXX	95,788	89,111	956	825	14,861	13,994	459	7,676	XXX

									Adjusting		23	24	25
		Losses					Containment U		Unp	paid]		
	Case	Basis	Bulk +	IBNR	Case	Basis	Bulk +	IBNR	21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded	Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
1.													
2.													
3.													
4.													
5.	5	4	9	7			2	1				4	1
6.	7	7	16	15			2	2	1	1		1	1
7.	30	29	14	13			2	2	2	2		2	3
8.	10	10	13	12	1	1	3	3	1	1		1	3
9.	428	412	509	490			108	104	51	49		41	74
10.	1 , 366	1 , 298	2,304	2, 191			475	451	190	180		213	236
11.	10,900	10,355	17,992	17,093	3	3	2,817	2,676	1,763	1,675		1,674	2,526
12.	12,747	12,114	20,857	19,822	4	3	3,408	3,239	2,009	1,909		1,937	2,844

	Losses an	Total d Loss Expense	s Incurred		Loss Expense Pred/Premiums Ea		Nontabula	ar Discount	34 Inter-		nce Sheet fter Discount
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense	Company Pooling Participation Percentage	35 Losses Unpaid	36 Loss Expenses Unpaid
1.	XXX	XXX	XXX	XXX	XXX	XXX			xxx		
2.	2,186	1,226	960	98.4	106.7	89.5					
3.	2,265	1,023	1,242	106.7	112.6	102.3					
4.	2,909	2,175	734	99.2	98.8	100 .5					
5.	7 , 327	6 , 845	481	124.0	125.9	102.8				3	
6.	6 , 493	6 , 212	281	116.1	115.8	122.0				1	
7.	2,264	2,151	113	83.8	83.4	91.6				2	
8.	1,228	1 , 168	60	778	77.3	90 . 1				1	
9.	25,813	25 , 013	800	69.3	69.2	72.8				35	
10.	37 ,847	36 , 021	1,826	76.1	76.0	78.6				181	3
11.	62,298	59,183	3,115	99.2	99.1	101.4				1,445	229
12.	XXX	XXX	XXX	XXX	XXX	XXX			xxx	1,668	269

Schedule P - Part 1C - Comm Auto/Truck
NONE

Schedule P - Part 1D - Workers' Comp

Schedule P - Part 1E - Comm Multi Peril
NONE

Schedule P - Part 1F - Med Pro Liab Occ NONE

Schedule P - Part 1F - Med Pro Liab Clm

NONE

Schedule P - Part 1G - Special Liability

NONE

Schedule P - Part 1H - Other Liab Occur NONE

Schedule P - Part 1H - Other Liab Claims

NONE

Schedule P - Part 1I - Special Property

NONE

SCHEDULE P - PART 1J - AUTO PHYSICAL DAMAGE

(\$000 OMITTED)

Years in	Pi	emiums Earne	ed			Los	ss and Loss Ex	cpense Payme	nts			12
Which	1	2	3			Defense	and Cost	Adjusting	and Other	10	11	
Premiums				Loss Pa	ayments	Containmer	nt Payments	Payn	nents			
Were				4	5	6	7	8	9		Total	Number of
Earned										Salvage	Net Paid	Claims
and Losses										and	(Cols. 4 - 5	Reported
Were	Direct and		Net	Direct and		Direct and		Direct and	١	Subrogation		Direct and
Incurred	Assumed	Ceded	(Cols. 1 - 2)	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Received	+ 8 - 9)	Assumed
1.				(44)	,,,,		,					
1. Prior	XXX	XXX	XXX	(11)	(11)	1	1			ļ2		XXX
	40.004	40.004	004	7 400	0.045	0.5	0.4	4 405	4 005		140	5 704
2. 2020	13,884	13,261	624		6,815	25	24	1,465	1,395	88	419	5,721
	40.004	40.075	0.40	40.005	40.740	470	407	4 405	4 050	70	740	0.040
3. 2021	19,821	18,875	946	13,385	12,716	176	167	1,425	1,353	78	749	9,919
								l	l . .			
4. Totals	XXX	XXX	XXX	20,537	19,520	202	192	2,890	2,748	169	1,168	XXX

		Losses	Unpaid		Defen	se and Cost (Containment U	Inpaid	Adjusting Unr		23	24	25
	Case	Basis	Bulk +	· IBNR	Case	Basis	Bulk +	· IBNR	21	22]		Number of
	13	14	15	16	17	18	19	20			0-1	Total	Claims
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Salvage and Subrogation Anticipated	Net Losses and Expenses Unpaid	Outstand- ing Direct and Assumed
1.	10	10	1	1			1	1				1	
2.	15	14	(3)	(3)			8	8	6	6		1	10
3.	1,335	1,268	418	397	2	2	150	142	242	230		107	371
4.	1,359	1,291	415	395	2	2	159	151	249	237		109	381

		T								N. (D.)	01 1
Ιl		Total			Loss Expense P			D: .	34		nce Sheet
		d Loss Expense			ed/Premiums Ea		Nontabula		Inter-	Reserves Af	
ΙI	26	27	28	29	30	31	32	33	Company	35	36
ΙI									Pooling		Loss
ΙI	Direct and			Direct and				Loss	Participation	Losses	Expenses
	Assumed	Ceded	Net	Assumed	Ceded	Net	Loss	Expense	Percentage	Unpaid	Unpaid
1.	XXX	XXX	XXX	XXX	XXX	XXX			xxx	1	
2.	8,680	8,259	420	62.5	62.3	67 .4				1	1
3.	17,132	16,275	857	86.4	86.2	90.5				88	20
4.	XXX	XXX	XXX	XXX	XXX	XXX			xxx	89	20

SCHEDULE P-PART 1K - FIDELITY/SURETY (\$000 OMITTED)

Years in	Pi	remiums Earn	ed			Los	ss and Loss Ex	cpense Payme	ents			12
Which Premiums	1	2	3	Loss Pa	ayments		and Cost nt Payments	Adjusting Payn		10	11	
Were Earned and Losses	l .			4	5	6	7	8	9	Salvage and	Total Net Paid (Cols. 4 - 5 + 6 - 7	Number of Claims Reported
Were Incurred	Direct and Assumed	Ceded	Net (Cols. 1 - 2)	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Subrogation Received	+ 6 - 7 + 8 - 9)	Direct and Assumed
1. Prior	xxx	xxx	xxx									XXX
												2004
2. 2020												XXX
3. 2021												XXX
4. Totals	XXX	XXX	XXX									XXX

		Losses	Unpaid		Defen	se and Cost (Containment U	Inpaid	Adjusting Un	and Other paid	23	24	25
1	Case	Basis	Bulk +	IBNR	Case	Basis	Bulk +	IBNR	21	22	1		
- [13	14	15	16	17	18	19	20				Total	Number of
											Salvage	Net Losses	Claims
											and	and	Outstanding
	Direct and		Direct and		Direct and		Direct and		Direct and		Subrogation	Expenses	Direct and
_	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Anticipated	Unpaid	Assumed
1.						VC)						
2													
3.													
П													
ا ؍													

	Losses ar	Total id Loss Expense	es Incurred		oss Expense P		Nontabula	ar Discount	34 Inter-		nce Sheet fter Discount
	26	27	28	29	30	31	32	33	Company Pooling	35	36 Loss
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Participation Percentage	Losses Unpaid	Expenses Unpaid
1.	XXX	xxx	XXX	xxx	XXX	xxx			xxx		
2.											
3.											
4.	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

SCHEDULE P-PART 1L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)

(\$000 OMITTED)

Years in	P	remiums Earn	ed			Los	ss and Loss Ex	xpense Payme	ents			12
Which	1	2	3				and Cost	Adjusting		10	11	
Premiums				Loss Pa			nt Payments		nents			
Were				4	5	6	7	8	9		Total	Number of
Earned										Salvage	Net Paid	Claims
and Losses										and	(Cols. 4 - 5	Reported
Were	Direct and		Net	Direct and		Direct and		Direct and		Subrogation	+ 6 - 7	Direct and
Incurred	Assumed	Ceded	(Cols. 1 - 2)	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Received	+ 8 - 9)	Assumed
1. Prior	XXX	xxx	xxx									XXX
2. 2020	1,164	1,109	55	20	19			115	110		6	XXX
3. 2021	441	419	22					27	26		1	xxx
4. Totals	XXX	xxx	XXX	20	19			142	135		8	XXX

		Losses	Unpaid		Defen	se and Cost (Containment U	Jnpaid	Adjusting Un	and Other paid	23	24	25
	Case	Basis	Bulk +	· IBNR	Case	Basis	Bulk +	- IBNR	21	22]		
	13 Direct and	14	15 Direct and	16	17 Direct and	18	19 Direct and	20	Direct and	Ondad	Salvage and Subrogation		Outstanding Direct and
	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Anticipated	Unpaid	Assumed
1.													
2.													
3.			40	38			4	4	3	3		2	
4.			40	38			4	4	3	3		2	

	Losses an	Total d Loss Expense	s Incurred		Loss Expense Pred/Premiums E		Nontabula	r Discount	34 Inter-		nce Sheet fter Discount
	26 Direct and	27	28	29 Direct and	30	31	32	33 Loss	Company Pooling Participation	35 Losses	36 Loss Expenses
	Assumed	Ceded	Net	Assumed	Ceded	Net	Loss	Expense	Percentage	Unpaid	Unpaid
1.	xxx	XXX	xxx	XXX	XXX	xxx			xxx		
2.	135	129	6	11.6	11.6	11.6					
3.	75	71	4	17.0	17.0	16.9				2	
4.	xxx	XXX	XXX	XXX	XXX	XXX			XXX	2	

Schedule P - Part 1M - International NONE

Schedule P - Part 1N - Reinsurance NONE

Schedule P - Part 10 - Reinsurance NONE

Schedule P - Part 1P - Reinsurance
NONE

Schedule P - Part 1R - Prod Liab Occur NONE

Schedule P - Part 1R - Prod Liab Claims

NONE

Schedule P - Part 1S-Fin./Mtg. Guaranty

NONE

Schedule P - Part 1T - Warranty
NONE

SCHEDULE P - PART 2A - HOMEOWNERS/FARMOWNERS

	INCURRED	NET LOSSES	AND DEFEN	ISE AND CO	ST CONTAIN	MENT EXPE	NSES REPOF	RTED AT YEA	AR END (\$000	OMITTED)	DEVELO	PMENT
Years in Which	1	2	3	4	5	6	7	8	9	10	11	12
Losses Were Incurred	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	One Year	Two Year
1. Prior												
2. 2012												
3. 2013	XXX											
4. 2014	XXX	XXX										
5. 2015	XXX	XXX	XXX									
6. 2016	XXX	XXX	XXX	xxx								
7. 2017	XXX	XXX	XXX	XXX	XXX	,						
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
										12. Totals		

SCHEDULE P - PART 2B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

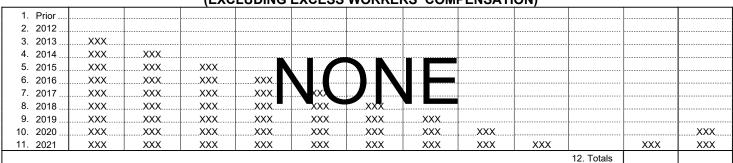
1.	Prior	363	503	460	453	451	453	453	453	453	453		
2.	2012	1,014	980	1,023	924	911	912	911	911	911	911		
3.	2013	XXX	1,034	1,108	1,221	1,172	1,128	1,120	1,120	1,120	1 , 120		
4.	2014	xxx	XXX	647	705	698	702	700	697	696	696		(1)
			xxx			425	457	439	440	438	437		(2)
6.	2016	xxx	XXX	XXX	xxx	276	295	294	273	268	267	(1)	(5)
7.	2017	xxx	xxx	XXX	xxx	XXX	132	118	107	102	102	(1)	(5)
8.	2018	xxx	XXX	XXX	xxx	XXX	XXX	74	61	54	54		(7)
9.	2019	xxx	XXX	XXX	xxx	XXX	XXX	XXX	719	714	697	(18)	(22)
10.	2020	xxx	XXX	XXX	xxx	XXX	XXX	XXX	XXX	1,595	1,564	(31)	XXX
11.	2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,798	XXX	XXX
			•	•				•			12. Totals	(51)	(43)

SCHEDULE P - PART 2C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

1.	Prior								ļ				
2.	2012								ļ				
3.	2013	xxx					ļ		ļ				
4.	2014	xxx	XXX			ļ <u>.</u>	<u></u>	<u> </u>	ļ				
5.	2015	xxx	XXX	XXX					<u> </u>				
6.	2016	xxx	XXX	XXX	xxx.	N							
7.	2017	Lxxx	XXX	XXX	xxx.	XXX		V					
8.	2018	xxx	XXX	XXX	xxx	XXX	XXX		•				
9.	2019	xxx	XXX	XXX	xxx	xxx	XXX	xxx					
10.	2020	xxx	XXX	XXX	xxx	xxx	XXX	XXX	xxx				XXX
11.	2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
							•		•		12 Totals		

SCHEDULE P - PART 2D- WORKERS' COMPENSATION

(EXCLUDING EXCESS WORKERS' COMPENSATION)



SCHEDULE P - PART 2E- COMMERCIAL MULTIPLE PERIL



SCHEDULE P - PART 2F - SECTION 1 - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE

	INCURRED	NET LOSSES	S AND DEFEN	ISE AND CO	ST CONTAIN	MENT EXPE	NSES REPOR	RTED AT YEA	AR END (\$000	OMITTED)	DEVELO	PMENT
Years in Which	1	2	3	4	5	6	7	8	9	10	11	12
Losses Were	0040	0040	0044	0045	0040	0047	0040	0040	0000	0004		T ./
Incurred	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	One Year	Two Year
1. Prior				••••								
2. 2012				<u></u>	<u></u>		<u> </u>					
3. 2013	XXX											
4. 2014	XXX	XXX										
5. 2015	XXX	XXX	XXX		N .		·					
6. 2016	XXX	XXX	XXX	XXX								
7. 2017	XXX	XXX	XXX	XXX	XXX							
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2020	XXX	xxx	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
										12. Totals		

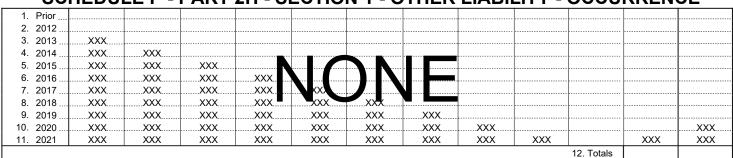
SCHEDULE P - PART 2F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE

1. Pri	ior												
2. 20)12												<u> </u>
3. 20)13	XXX											
4. 20)14	XXX	XXX										
5. 20)15	XXX	XXX	XXX									
6. 20)16	XXX	XXX	XXX	XXX.								<u> </u>
7. 20)17	XXX	XXX	XXX	XXX.	××.							
8. 20	18	XXX	XXX	XXX	XXX	XXX	XXX						İ
9. 20)19	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 20	20	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				xxx
11. 20	21	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
											12. Totals		

SCHEDULE P - PART 2G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER AND MACHINERY)

1. Prior												
2. 2012												
3. 2013	xxx											
4. 2014	xxx	xxx										
5. 2015	xxx	xxx	XXX	L								
6. 2016	lxxx	xxx	XXX	xxx								
7. 2017	xxx	XXX	XXX	XXX	X XX							
8. 2018	xxx	XXX	XXX	xxx •	XXX	XXX						
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
										12. Totals		

SCHEDULE P - PART 2H - SECTION 1 - OTHER LIABILITY - OCCURRENCE



SCHEDULE P - PART 2H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE

	00			1 711	<u> </u>		11 2 - 0	,			OLAIII		
1.	Prior												
2.	2012												
3.	2013	xxx											
4.	2014	XXX	XXX										
5.	2015	xxx	XXX	XXX									
6.	2016	xxx	XXX	XXX	xxx.	\							
7.	2017	xxx	XXX	XXX	xxx.								
8.	2018	xxx	XXX	XXX	xxx.	xxx	XXX						
9.	2019	xxx	XXX	XXX	xxx	XXX	XXX	XXX					
10.	2020	xxx	XXX	XXX	XXX	XXX	XXX	XXX	xxx				XXX
11.	2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
											12. Totals		

SCHEDULE P - PART 2I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY, AND THEFT)

					-							
	INCURRED	NET LOSSES	AND DEFE	NSE AND CO	ST CONTAIN	MENT EXPE	NSES REPOR	RTED AT YEA	AR END (\$000	OMITTED)	DEVELO	PMENT
Years in Which	1	2	3	4	5	6	7	8	9	10	11	12
Losses Were	0040	0040	0044	0045	0040	0047	0040	0040	0000	0004	0 1/	
Incurred	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	One Year	Two Year
1 Dries	XXX	xxx	XXX	_								
1. Prior				XXX.	· · · · · · · · · · · · · · · · · · ·							
2. 2020	XXX	XXX	XXX	XXX	XXX	XXX		XXX				xxx
3. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
										Totals		

SCHEDULE P - PART 2J - AUTO PHYSICAL DAMAGE

1. Prior	xxx	XXX	XXX	xxx	xxx	xxx	XXX	21	15	16		(6)
								2004	200	350	(44)	(0)
2. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	360		(11)	XXX
3. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	773	XXX	XXX
										4. Totals	(10)	(6)

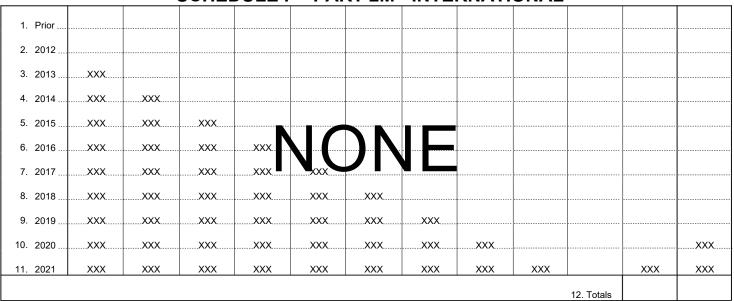
SCHEDULE P - PART 2K - FIDELITY, SURETY

1. PriorX	(XXXXX	XXX	xxx	_xxx	XXX	XXX				
2. 2020X				××			XXX			XXX
	(XX XXX	XXX	XXX	V _{XX}			XXX	XXX	XXX	XXX
V. 2021										

SCHEDULE P - PART 2L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)

1.	Prior	XXX	XXX	xxx	xxx	xxx	xxx	xxx	1				(1)
			xxx						xxx	3	1	(2)	xxx
	2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2	XXX	XXX
0.	2021	XXX	NOX			700	XXX		XXX	XXX		XXX	7///
											4. Totals	(2)	(1

SCHEDULE P - PART 2M - INTERNATIONAL



Schedule P - Part 2N

NONE

Schedule P - Part 20

NONE

Schedule P - Part 2P

NONE

Schedule P - Part 2R - Prod Liab Occur

NONE

Schedule P - Part 2R - Prod Liab Claims

NONE

Schedule P - Part 2S

NONE

Schedule P - Part 2T

NONE

SCHEDULE P - PART 3A - HOMEOWNERS/FARMOWNERS

	CUMUL	ATIVE PAID	NET LOSSES	S AND DEFE		ST CONTAIN MITTED)	IMENT EXPE	NSES REPO	RTED AT YEA	AR END	11	12 Number of
Years in Which Losses Were	1	2	3	4	5	6	7	8	9	10	Number of Claims Closed With Loss	Claims Closed Without Loss
Incurred	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	Payment	Payment
1. Prior	000	,										
2. 2012				l]				
3. 2013	XXX											
4. 2014	XXX	xxx			V							
5. 2015	XXX	XXX	xxx	_		_						
6. 2016	XXX	XXX	XXX	XXX								
7. 2017	XXX	XXX	XXX	XXX	xxx							
8. 2018	xxx	XXX	xxx	XXX	xxx	xxx						
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

SCHEDULE P - PART 3B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

1. Prior	000	317	365	428	447	449	453	453	453	453	202	42
2. 2012	553	601	900	901	899	911	911	911	911	911	3,984	2,512
3. 2013	XXX	480	883	1,079	1,108	1,120	1,120	1,120	1,120	1,120	2, 181	1,457
4. 2014	XXX	XXX	290	547	653	679	696	696	696	696	667	268
5. 2015	XXX	XXX	XXX	238	366	417	426	434	434	434	1,264	917
6. 2016	xxx	XXX	XXX	xxx	108	240	260	264	266	266	1,005	655
7. 2017	XXX	XXX	XXX	xxx	XXX	44	91	98	99	99	356	177
8. 2018	xxx	XXX	XXX	xxx	XXX	XXX	28	48	50	53	191	96
9. 2019	xxx	xxx	xxx	xxx	xxx	XXX	xxx			657	4 , 199	2,367
10. 2020	XXX	XXX	XXX	xxx	XXX	XXX	XXX	XXX	683	1,360	5, 137	3,053
11. 2021	XXX	XXX	XXX	XXX	xxx	XXX	XXX	xxx	XXX	1,213	5,415	4,523

SCHEDULE P - PART 3C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

1. Prior	000									 	
2. 2012										 	
3. 2013	xxx									 	
4. 2014	xxx	xxx					. 			 	
5. 2015	xxx	xxx	XXX			7.7				 	
6. 2016	xxx	xxx	XXX	XXX						 	
7. 2017	xxx	xxx	XXX	xxx	xxx					 	
8. 2018	xxx	xxx	XXX	XXX	XXX	xxx				 	
9. 2019	xxx	XXX	XXX	XXX	XXX	XXX	xxx			 	
10. 2020	xxx	xxx	XXX	XXX	XXX	xxx	xxx	XXX			
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

SCHEDULE P - PART 3D - WORKERS' COMPENSATION

(EXCLUDING EXCESS WORKERS' COMPENSATION)

			(ヒハン	LUDINU	LXCLCC	TTOITIE	NO COM	LINOAII	O14)		
1. Prior	000										
2. 2012										 	
3. 2013	xxx										
4. 2014	xxx	xxx								 	
5. 2015	xxx	xxx	XXX			1/		ļ		 	
6. 2016	xxx	xxx	xxx	XXX			\	ļ		 	
7. 2017	xxx	xxx	XXX	xxx.	- xxx					 	
8. 2018	xxx	xxx	xxx	XXX	xxx	xxx		ļ		 	
9. 2019	xxx	xxx	XXX	XXX	xxx	xxx	xxx	ļ		 	
10. 2020	xxx	xxx	XXX	XXX	xxx	XXX	xxx	xxx		 	
11. 2021	l xxx	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

SCHEDULE P - PART 3E - COMMERCIAL MULTIPLE PERIL

		OI ILD		1 / 111							
1. Prior	000										
2. 2012										 	
3. 2013	xxx	,				<u> </u>				 	
4. 2014	xxx	XXX								 	
5. 2015	xxx	XXX	XXX	N		1				 	
6. 2016	xxx	XXX	XXX	XXX	\					 	
7. 2017	xxx	XXX	XXX	XXX	XXX					 	
8. 2018	xxx	XXX	xxx	XXX	XXX	xxx				 	
9. 2019	xxx	XXX	XXX	XXX	XXX	xxx	XXX			 	
10. 2020	xxx	XXX	XXX	XXX	XXX	xxx	XXX	XXX		 	
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

SCHEDULE P - PART 3F - SECTION 1 - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE

	CUMUL	ATIVE PAID	NET LOSSES	S AND DEFE	NSE AND CO		MENT EXPE	NSES REPO	RTED AT YEA	AR END	11	12
	1	2	3	1	(\$000 0	MITTED)	7	8	0	10	Number of	Number of Claims
	'	_	3	_			'			'0	Claims	Closed
Years in Which											Closed With	Without
Losses Were											Loss	Loss
Incurred	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	Payment	Payment
1. Prior	000	,									ļ	
2. 2012				l		7.						
3. 2013	XXX											
4. 2014	xxx	xxx			V							
5. 2015	XXX	xxx	xxx			<u> </u>]				
6. 2016	xxx	xxx	xxx	xxx								
7. 2017	xxx	xxx	xxx	xxx	xxx							
8. 2018	XXX	xxx	XXX	xxx	xxx	xxx						
9. 2019	XXX	XXX	XXX	XXX	xxx	XXX	XXX	[
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

SCHEDULE P - PART 3F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE

1.	Prior	000										
2.	2012										 	
3.	2013	xxx									 	
4.	2014	xxx	XXX								 	
5.	2015	XXX	XXX	xxx			1				 	
6.	2016	XXX	XXX	XXX	XXX						 	
7.	2017	XXX	XXX	XXX	XXX.						 	
8.	2018	XXX	XXX	XXX	XXX	XXX	XXX				 	
9.	2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX			 	
10.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11.	2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

SCHEDULE P - PART 3G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER AND MACHINERY)

1. Prior	000									 XXX	XXX
2. 2012										 XXX	xxx
3. 2013	xxx									 XXX	xxx
4. 2014	xxx	XXX								 XXX	xxx
5. 2015	xxx	XXX	XXX							 XXX	xxx
6. 2016	xxx	XXX	XXX	XXX.						 XXX	xxx
7. 2017	xxx	xxx	XXX	xxx.	xxx					XXX	xxx
8. 2018	xxx	xxx	XXX	XXX	XXX	XXX				 XXX	xxx
9. 2019	xxx	xxx	XXX	XXX	xxx	XXX	xxx	,		 XXX	xxx
10. 2020	xxx	xxx	XXX	xxx	xxx	XXX	xxx	xxx		 XXX	XXX
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

SCHEDULE P - PART 3H - SECTION 1 - OTHER LIABILITY - OCCURRENCE

1. Pri	ior000										
2. 20	112									 	
3. 20	13XXX									 	
4. 20	114XXX	xxx		_						 	
5. 20	15XXX	xxx	xxx			11				 	
6. 20	116XXX	XXX	XXX	XXX.			(
7. 20	117XXX	XXX	XXX	XXX	kxx					 	
8. 20	118XXX	XXX	XXX	XXX	XXX	XXX				 	
9. 20	119XXX	XXX	XXX	XXX	XXX	XXX	XXX			 	
10. 20	20XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		 ļ	
11. 20	21 XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

SCHEDULE P - PART 3H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE

1. Prio	or000										
2. 201	2			ļ						 	
3. 201	3XXX			ļ						 	
4. 201	4XXX	xxx		ļ						 	
5. 201	5XXX	xxx	XXX			1				 	
6. 201	6xxx	xxx	xxx	xxx.						 	
7. 201	7XXX	xxx	XXX	xxx	xxx					 	
8. 201	8xxx	xxx	xxx	xxx	xxx	XXX				 	
9. 201	9xxx	XXX	XXX	xxx	XXX	xxx	xxx			 	
10. 202	0xxx	XXX	xxx	xxx	xxx	XXX	xxx	xxx		 	
11. 202	1 XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

SCHEDULE P - PART 3I - SPECIAL PROPERTY
(FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY, AND THEFT)

(1 11 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		D LINL	.0,		17-41-411-41	_,	11140	~:`-, -	70110L	-/		· · - · · <i>,</i>
	CUMUI	ATIVE PAID	NET LOSSES	S AND DEFEN	NSE AND CO	ST CONTAIN	MENT EXPE	NSES REPOR	RTED AT YEA	AR END	11	12
					(\$000 OI	MITTED)						Number of
	1	2	3	4	5	6	7	8	9	10	Number of	Claims
Years in Which Losses Were											Claims Closed With	Closed Without
Incurred	2012	2013	2014	2015	01	2017	2 10	2019	2020	2021	Loss Pavment	Loss Payment
1. Prior	XXX	XXX	XXX	XXX	XXX		XXX	000			XXX	XXX
2. 2020	xxx	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX

SCHEDULE P - PART 3J - AUTO PHYSICAL DAMAGE

xxx xxx

xxx xxx xxx

1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	xxx	000	15	15	166	48
	xxx		XXX	XXX	XXX	XXX	XXX	XXX	313			3,484
3. 2021	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	678	3,647	5.901

SCHEDULE P - PART 3K - FIDELITY/SURETY

1. Prior	xxx	xxx	xxx	xxx	XX	XX		000		XXX	XXX
2. 2020		xxx				XXX	XX	xxx		xxx	XXX
3. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

SCHEDULE P - PART 3L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)

1. Prior	VVV	VVV	XXX	XXX	VVV	VVV	VVV	000			XXX	VVV
1. FIIOI												
2. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		1	XXX	XXX
3. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

SCHEDULE P - PART 3M - INTERNATIONAL

1. Prior	000				-					 xxx	xxx
2. 2012	-				-					xxx	xxx
3. 2013	xxx									xxx	xxx
4. 2014	xxx	xxx			-					 xxx	xxx
5. 2015	xxx	xxx	xxx	N		1 1				 xxx	xxx
6. 2016	xxx	xxx	xxx	XXX	V	<i>)</i>)				 xxx	xxx
7. 2017	xxx	xxx	xxx	XXX	xxx					 xxx	xxx
8. 2018	xxx	xxx	xxx	XXX	xxx	xxx				xxx	xxx
9. 2019	xxx	xxx	xxx	XXX	xxx	xxx	xxx			xxx	xxx
10. 2020	xxx	xxx	xxx	XXX	xxx	xxx	xxx	xxx		 xxx	xxx
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	xxx

Schedule P - Part 3N

NONE

Schedule P - Part 3O

NONE

Schedule P - Part 3P

NONE

Schedule P - Part 3R - Prod Liab Occur

NONE

Schedule P - Part 3R - Prod Liab Claims

NONE

Schedule P - Part 3S

NONE

Schedule P - Part 3T

NONE

SCHEDULE P - PART 4A - HOMEOWNERS/FARMOWNERS

	BULK AND IE	BNR RESERVES	S ON NET LOSS	SES AND DEFE	NSE AND COST	CONTAINMEN	IT EXPENSES F	REPORTED AT	YEAR END (\$00	0 OMITTED)
Years in Which	1	2	3	4	5	6	7	8	9	10
Losses Were	2012	2012	2014	2015	2016	2017	2010	2010	2020	2024
Incurred	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior										
2. 2012										
3. 2013	XXX									
4. 2014	XXX	xxx								
5. 2015	XXX	XXX	XXX			N				
6. 2016	XXX	xxx	xxx	xxx						
7. 2017	XXX	xxx	XXX	XXX	xxx					
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2019	XXX	xxx	xxx	XXX	xxx	XXX	xxx			
10. 2020	XXX	xxx	xxx	XXX	xxx	XXX	xxx	XXX		
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P - PART 4B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

1. Prior	96	47	20	5	1					
2. 2012	215	176	37	23	5	2				
3. 2013	xxx	243	93	51	27	8				
				102	23	15	4	1		
5. 2015	xxx	XXX	xxx	153	45	26	6	3	1	2
6. 2016	xxx	XXX	xxx	XXX	115	48	21	6	1	1
7. 2017	xxx	XXX	xxx	xxx	xxx	61	18	6	2	1
8. 2018	xxx	XXX	xxx	XXX	xxx	XXX	27	8	2	1
9. 2019	xxx	XXX	xxx	xxx	xxx	XXX	xxx	306	61	23
10. 2020	xxx	XXX	xxx	XXX	xxx	XXX	xxx	XXX	615	136
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,040

SCHEDULE P - PART 4C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

_				_			_			
1. Prior										
2. 2012										
3. 2013	xxx									
4. 2014	xxx	XXX								
5. 2015	xxx	XXX	XXX							
6. 2016	xxx	XXX	xxx							
7. 2017	xxx		xxx	XX	XXX	N				
	l xxx			l xxx	xxx	XXX				
9. 2019	xxx	xxx	xxx	xxx	xxx	i	I			
10. 2020	XXX	XXX		xxx		XXX		XXX		
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P - PART 4D - WORKERS' COMPENSATION

(EXCLUDING EXCESS WORKERS' COMPENSATION)

1. Prior										
2. 2012										
3. 2013	xxx									
4. 2014	XXX	XXX								
•	XXX									
	XXX									
7. 2017	XXX	XXX	XXX	XX	XXX					
8. 2018	xxx	XXX	XXX	XXX	XXX	XXX				
9. 2019	xxx	XXX	XXX	XXX	XXX	XXX	xxx			
10. 2020	xxx	XXX	xxx	xxx	xxx	xxx	xxx	XXX		
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P - PART 4E - COMMERCIAL MULTIPLE PERIL

				~!`\ T					-1 <1-	
1. Prior										
2. 2012										
3. 2013	XXX									
4. 2014	xxx	xxx								
5. 2015	xxx	xxx	xxx							
6. 2016	xxx	xxx	xxx			<u> </u>				
7. 2017	xxx	xxx	xxx	XX	XXX					
8. 2018	XXX	xxx	xxx	xxx	xxx	XXX				
9. 2019	xxx	xxx	XXX	xxx	xxx	XXX	xxx			
10. 2020	xxx	XXX	XXX	xxx	XXX	XXX	xxx	XXX		
11. 2021	xxx	XXX	XXX	l xxx	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P - PART 4F - SECTION 1 - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE

	BULK AND IE	BNR RESERVES	ON NET LOSS	SES AND DEFE	NSE AND COST	CONTAINMEN	IT EXPENSES F	REPORTED AT	YEAR END (\$00	00 OMITTED)
Years in Which	1	2	3	4	5	6	7	8	9	10
Losses Were	0040	0040	0044	0045	0040	0047	0040	0040	0000	0004
Incurred	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior										
2. 2012										
3. 2013	XXX									
4. 2014	XXX	XXX								
5. 2015	XXX	XXX	XXX			V L				
6. 2016	XXX	XXX	XXX	xxx						
7. 2017	XXX	XXX	XXX	XXX	XXX					
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	xxx			
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	xxx	XXX	ļ	
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P - PART 4F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE

1.	Prior										
2.	2012										
3.	2013	XXX									
4.	2014	xxx	XXX								
5.	2015	XXX	XXX	xxx		7.7	<u></u>				
6.	2016	XXX	XXX	XXX							
7.	2017	xxx	XXX	xxx	XX	XXX					
8.	2018	XXX	XXX	XXX	XXX	XXX	XXX				
9.	2019	xxx	XXX	xxx	XXX	XXX	XXX	xxx			
10.	2020	XXX	XXX	xxx	XXX	XXX	XXX	xxx	XXX		
11.	2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P - PART 4G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER AND MACHINERY)

			•							_
1. Prior										
2 2012										
0. 0040	1000									
3. 2013	XXX						ļ			
4. 2014	XXX	XXX								
5. 2015	xxx	XXX	XXX	N <i> </i>						
1										
7. 2017	XXX	XXX	XXX	XX	XXX					
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2019	VVV		XXX			i				
9. 2019										
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P - PART 4H - SECTION 1 - OTHER LIABILITY - OCCURRENCE

1. Prior										
2. 2012										
3. 2013	XXX									
4. 2014	XXX	XXX								
5. 2015	XXX	XXX	XXX	$\Lambda \sqcup I$	17	<u></u>				
6. 2016	XXX	XXX	XXX							
7. 2017	XXX	XXX	XXX	XX	XXX	T				
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	xxx			
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	xxx	XXX		
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P - PART 4H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE

		,		0_0	O:1	, , , , , , , , , , , , , , , , , , , 			VIIVIO 1112	\ D
1. Prior										
2. 2012										
3. 2013	XXX									
4. 2014	XXX	XXX								
5. 2015	XXX	XXX	xxx			<u></u>				
6. 2016	XXX	XXX	xxx							
7. 2017	XXX	XXX	xxx	XX	XXX					
8. 2018	XXX	XXX	xxx	xxx	xxx	XXX				
9. 2019	XXX	XXX	XXX	xxx	XXX	XXX	XXX			
10. 2020	XXX	XXX	xxx	xxx	xxx			XXX		
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P - PART 4I - SPECIAL PROPERTY

	(FIRE,	ALLIED	LINES,	INLAN	D MARI	NE, EAF	RTHQUA	AKE, BU	JRGLAF	RY AND	IHEFI)
		BULK AND I	BNR RESERVE	S ON NET LOSS	SES AND DEFE	NSE AND COST	CONTAINMEN	IT EXPENSES F	REPORTED AT	YEAR END (\$00	0 OMITTED)
	Years in Which	1	2	3	4	5	6	7	8	9	10
	Losses Were Incurred	2012	2013	2014	201	016	017	2018	2019	2020	2021
- 1											

	BULK AND IE	SNR RESERVES	S ON NET LOSS	SES AND DEFE	NSE AND COST	CONTAINMEN	II EXPENSES F	REPORTED AT	YEAR END (\$00	0 OMITTED)	1
Years in Which	1	2	3	4	5	6	7	8	9	10	
Losses Were											
Incurred	2012	2013	2014	201	2016	017	2018	2019	2020	2021	
1. Prior	XXX	XXX	XXX	X	XX	(XX	XXX				
2. 2020	XXX	XXX	xxx	XXX	XXX	XXX	xxx	XXX			
3. 2021	xxx	XXX	xxx	xxx	xxx	XXX	xxx	XXX	xxx		

SCHEDULE P - PART 4J - AUTO PHYSICAL DAMAGE

1. F	Prior	XXX	XXX	xxx	XXX	xxx	XXX	xxx	13		
2. 2	2020	XXX	XXX	xxx	XXX	xxx	XXX	xxx	XXX	22	
3. 2	2021	XXX	xxx	xxx	XXX	xxx	XXX	xxx	XXX	xxx	28

SCHEDULE P - PART 4K - FIDELITY/SURETY

2 2020 XXX XXX XXX XXX XXX XXX XXX XXX	1. Prior	XXX	xxx	xxx	XXX	XXX	XX	xxx			
		xxx	xxx], ((XX		xxx		
3. 2021 XXX XX									VVV	VVV	

SCHEDULE P - PART 4L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)

1. Prior	xxx	xxx	xxx	xxx	xxx	xxx	xxx	1		
2. 2020	xxx	xxx	xxx	XXX	xxx	xxx	xxx	XXX	2	
3. 2021	XXX	XXX	XXX	XXX	xxx	xxx	xxx	XXX	xxx	2

SCHEDULE P - PART 4M - INTERNATIONAL

					** * * * * * * * * * * * * * * * * * * *					
1. Prior										
2. 2012										
3. 2013	xxx									
4. 2014	xxx	xxx								
5. 2015	xxx	xxx	XXX	NI/						
6. 2016	xxx	xxx	xxx							
7. 2017	xxx	xxx	xxx	xxx	xxx					
8. 2018	xxx	xxx	xxx	xxx	xxx	xxx				
9. 2019	xxx	xxx	xxx	xxx	xxx	xxx	xxx	-		
10. 2020	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx		
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

Schedule P - Part 4N

NONE

Schedule P - Part 40

NONE

Schedule P - Part 4P

NONE

Schedule P - Part 4R - Prod Liab Occur

NONE

Schedule P - Part 4R - Prod Liab Claims

NONE

Schedule P - Part 4S

NONE

Schedule P - Part 4T - Warranty

NONE

Schedule P - Part 5A- SN1

NONE

Schedule P - Part 5A- SN2

NONE

Schedule P - Part 5A- SN3

NONE

SCHEDULE P - PART 5B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

SECTION 1

		CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END												
Years in	1	2	3	4	5	6	7	8	9	10				
Which Premiums														
Were Earned														
and Losses	2040	2042	2014	2045	2046	2047	0040	2040	2020	2004				
Were Incurred	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021				
1. Prior	855	161	7	27	6	1								
2. 2012	2,908	3,761	3,880	3,951	3,976	3,983	3,984	3,984	3,984	3,984				
3. 2013	xxx	1 , 588	2,031	2,170	2,176	2,181	2,181	2,181	2,181	2,181				
4. 2014	xxx	XXX	396	627	655	662	666	667	667	667				
5. 2015	xxx	XXX	XXX	678	1 , 134	1,238	1,256	1,262	1,264	1,264				
6. 2016	xxx	XXX	XXX	XXX	648	961	995	1,004	1,005	1,005				
7. 2017	xxx	XXX	XXX	XXX	XXX	249	342	353	355	356				
8. 2018	xxx	XXX	XXX	XXX	XXX	XXX	131	179	187	191				
9. 2019	xxx	XXX	xxx	XXX	XXX	XXX	xxx	2,800	4,055	4 , 199				
10. 2020	xxx	xxx	xxx	XXX	xxx	XXX	xxx	XXX	3,594	5 , 137				
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,415				

SECTION 2

					SECTION 2					
			NUMBER	R OF CLAIMS O	UTSTANDING [DIRECT AND AS	SSUMED AT YE	AR END		
Years in	1	2	3	4	5	6	7	8	9	10
Which										
Premiums										
Were Earned and Losses										
Were Incurred	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	252	84	21	11	3	2				
2. 2012	1,127	242	71	65	9	1				
3. 2013	XXX	693	153	116	7					
4. 2014	xxx	XXX	199	28	10	1	1			
5. 2015	xxx	XXX	xxx	563	111	26	8	2	2	1
6. 2016	XXX	XXX	xxx	XXX	335	35	12	2	1	1
7. 2017	XXX	XXX	xxx	XXX	XXX	115	25	9	4	3
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	82	20	6	3
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,016	197	74
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,333	236
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,526

SECTION 3

					SECTION 3					
			CUMULATIVE	NUMBER OF C	LAIMS REPORT	TED DIRECT AN	ND ASSUMED A	T YEAR END		
Years in Which Premiums Were Earned and Losses	1	2	3	4	5	6	7	8	9	10
Were Incurred	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	386	5	(35)	21		1				
2. 2012	6,290	6,495	6,456	6,525	6,496	6,496	6,496	6,496	6,496	6,496
3. 2013	xxx	3,503	3,559	3,733	3,638	3,638	3,638	3,638	3,638	3,638
4. 2014	XXX	XXX	830	922	930	932	935	935	935	935
5. 2015	xxx	XXX	xxx	1,881	2,145	2,172	2,177	2,180	2,182	2,182
6. 2016	xxx	XXX	xxx	xxx	1,574	1,646	1,660	1,661	1,661	1,661
7. 2017	xxx	XXX	xxx	xxx	XXX	502	530	536	536	536
8. 2018	xxx	XXX	xxx	XXX	XXX	xxx	275	289	289	290
9. 2019	xxx	XXX	xxx	xxx	XXX	xxx	XXX	6,039	6,628	6,640
10. 2020	xxx	XXX	xxx	xxx	XXX	xxx	XXX	XXX	7,803	8,426
11. 2021	l xxx l	xxx	xxx	xxx	xxx	xxx	XXX	xxx	XXX	12,464

Schedule P - Part 5C- SN1

NONE

Schedule P - Part 5C- SN2

NONE

Schedule P - Part 5C- SN3

NONE

Schedule P - Part 5D- SN1

NONE

Schedule P - Part 5D- SN2

NONE

Schedule P - Part 5D- SN3

NONE

Schedule P - Part 5E- SN1

NONE

Schedule P - Part 5E- SN2

NONE

Schedule P - Part 5E- SN3

NONE

Schedule P - Part 5F- SN1A

NONE

Schedule P - Part 5F- SN2A

Schedule P - Part 5F- SN3A

NONE

Schedule P - Part 5F- SN1B

NONE

Schedule P - Part 5F- SN2B

NONE

Schedule P - Part 5F- SN3B

NONE

Schedule P - Part 5H- SN1A

NONE

Schedule P - Part 5H- SN2A

NONE

Schedule P - Part 5H- SN3A

NONE

Schedule P - Part 5H- SN1B

NONE

Schedule P - Part 5H- SN2B

NONE

Schedule P - Part 5H- SN3B

NONE

Schedule P - Part 5R- SN1A

Schedule P - Part 5R- SN2A

NONE

Schedule P - Part 5R- SN3A

NONE

Schedule P - Part 5R- SN1B

NONE

Schedule P - Part 5R- SN2B

NONE

Schedule P - Part 5R- SN3B

NONE

Schedule P - Part 5T- SN1

NONE

Schedule P - Part 5T- SN2

NONE

Schedule P - Part 5T- SN3

NONE

Schedule P - Part 6C - SN1

NONE

Schedule P - Part 6C - SN2

NONE

Schedule P - Part 6D - SN1

Schedule P - Part 6D - SN2

NONE

Schedule P - Part 6E - SN1

NONE

Schedule P - Part 6E - SN2

NONE

Schedule P - Part 6H - SN1A

NONE

Schedule P - Part 6H - SN2A

NONE

Schedule P - Part 6H - SN1B

NONE

Schedule P - Part 6H - SN2B

NONE

Schedule P - Part 6M - SN1

NONE

Schedule P - Part 6M - SN2

NONE

Schedule P - Part 6N - SN1

NONE

Schedule P - Part 6N - SN2

Schedule P - Part 60 - SN1

NONE

Schedule P - Part 6O - SN2

NONE

Schedule P - Part 6R - SN1A

NONE

Schedule P - Part 6R - SN2A

NONE

Schedule P - Part 6R - SN1B

NONE

Schedule P - Part 6R - SN2B

NONE

Schedule P - Part 7A - Section 1

NONE

Schedule P - Part 7A - Section 2

NONE

Schedule P - Part 7A - Section 3

NONE

Schedule P - Part 7A - Section 4

NONE

Schedule P - Part 7A - Section 5

Schedule P - Part 7B - Section 1

NONE

Schedule P - Part 7B - Section 2

NONE

Schedule P - Part 7B - Section 3

NONE

Schedule P - Part 7B - Section 4

NONE

Schedule P - Part 7B - Section 5

NONE

Schedule P - Part 7B - Section 6

NONE

Schedule P - Part 7B - Section 7

SCHEDULE PINTERROGATORIES

	SCHEDULL	PINILKKOGAI	JNILO				
1.	The following questions relate to yet-to-be-issued Extended Reporting Professional Liability Claims Made insurance policies. EREs provided	Endorsements (EREs) arising from Dea for reasons other than DDR are not to be	ath, Disability, or Retirement (DDR) pro e included.	ovision	s in M	1edica	al
1.1	Does the company issue Medical Professional Liability Claims Made in reporting endorsement, or "ERE") benefits in the event of Death, Disabcost?			Yes	1	1 No	[X]
	If the answer to question 1.1 is "no", leave the following questions blan questions:	nk. If the answer to question 1.1 is "yes",	please answer the following			,	
1.2	What is the total amount of the reserve for that provision (DDR Reserve dollars)?	ve), as reported, explicitly or not, elsewh	ere in this statement (in				
1.3	Does the company report any DDR reserve as Unearned Premium Re	eserve per SSAP No. 65?		Yes	[] No	. 1
1.4	Does the company report any DDR reserve as loss or loss adjustment	t expense reserve?		Yes	[] No	[]
1.5	If the company reports DDR reserve as Unearned Premium Reserve, Investment Exhibit, Part 1A – Recapitulation of all Premiums (Page 7)] No]] N/A	[]
1.6	If the company reports DDR reserve as loss or loss adjustment expensive these reserves are reported in Schedule P:	se reserve, please complete the following	g table corresponding to				
		Schedule P, Part 1F, Med	e Included in dical Professional Liability ses and Expenses Unpaid				
	Years in Which Premiums Were Earned and Losses Were Incurred	1 Section 1: Occurrence	2 Section 2: Claims-Made				
	1.601 Prior			l			
	1.602 2012			l			
	1.603 2013			1			
	1.604 2014			l			
	1.605 2015			l			
	1.606 2016						
	1.607 2017			l			
	1.608 2018			l			
	1.609 2019						
	1.610 2020						
	1.611 2021			l			
	1.612 Totals			I			
2.	The definition of allocated loss adjustment expenses (ALAE effective January 1, 1998. This change in definition applies "Defense and Cost Containment" and "Adjusting and Other"	to both paid and unpaid expenses. Are	e these expenses (now reported as		[X]] No	1
3.	The Adjusting and Other expense payments and reserves s the number of claims reported, closed and outstanding in th companies in a group or a pool, the Adjusting and Other ex and the claim counts. For reinsurers, Adjusting and Other ex	nose years. When allocating Adjusting a pense should be allocated in the same p	and Other expense between percentage used for the loss amounts				
	For Adjusting and Other expense incurred by reinsurers, or						
	Adjusting and Other expense should be allocated by a reasonable. Are they so reported in this Statement?:	conable method determined by the comp	any and described in Interrogatory 7,	Yes	[X]] No	[]
4.	Do any lines in Schedule P include reserves that are reported reported net of such discounts on Page 10?	ed gross of any discount to present valu	e of future payments, and that are	Yes	[] No	[X]
	If yes, proper disclosure must be made in the Notes to Fina be reported in Schedule P - Part 1, Columns 32 and 33.	incial Statements, as specified in the Ins	tructions. Also, the discounts must				
	Schedule P must be completed gross of non-tabular discou examination upon request.	inting. Work papers relating to discount	calculations must be available for				
	Discounting is allowed only if expressly permitted by the sta	ate insurance department to which this A	nnual Statement is being filed.				
5.	What were the net premiums in force at the end of the year (in thousands of dollars)	for:	E 4 Fidelik.				
			•				
			5.2 Surety \$.				
6.	Claim count information is reported per claim or per claimar If not the same in all years, explain in Interrogatory 7.	nt (indicate which)				CLA	4 I MANT

The information provided in Schedule P will be used by many persons to estimate the adequacy of the current loss and expense reserves, among other things. Are there any especially significant events, coverage, retention or accounting changes that have occurred that must be considered when making such analyses?

Yes [] No [X]

7.1

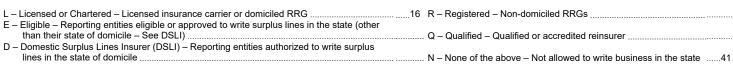
7.2

An extended statement may be attached.

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

				Alloc	ated By States	And Territories				
		1	Gross Premiu Policy and Mer Less Return P Premiums on Tak	ms, Including mbership Fees Premiums and Policies Not	4 Dividends Paid	5	6	7	8 Finance and	9 Direct Premium Written for Federal
	States etc	Active Status	2 Direct Premiums	3 Direct Premiums	or Credited to Policyholders on Direct	Direct Losses Paid (Deducting	Direct Losses	Direct Losses	Service Charges Not Included in	Purchasing Groups (Included in
1	States, etc. Alabama AL	(a)	Written 872,847	Earned1,030,372	Business	Salvage) 447 ,796	Incurred643,005	Unpaid 358,007	Premiums	Col. 2)
	Alaska AK	lL	012,041	1,030,372						
1	Arizona	L	6,303,717	5 ,574 , 117		4,308,120	6,771,449	3,033,134		
4.	ArkansasAR	N				ļ				
	California CA	N				ļ				
1	Colorado CO	N				 				
!	Connecticut CT Delaware DE	N N								
	Dist. ColumbiaDC	N								
10.	Florida FL	L								
	Georgia GA	ļL.	2,381,467	2,814,350		3,636,756	3,247,650	3,205,463		
	Hawaii HI	N				 	1			
	Idaho ID Illinois IL	N N								
	IndianaIN	L	218,320	145 . 567		50 005	115,528	61,843		
16.	lowaIA	N		- 7 - 2-						
	KansasKS	N								
	Kentucky KY Louisiana LA	∤ <u>-</u>	65,479,978	63,948,104		38.694.475	45 , 587 , 676	21,610,067		
	Maine ME	N	05,479,970	03,340,104			43,307,070	21,010,007		
	Maryland MD	N								
22.	Massachusetts MA	N								
	Michigan MI	N								
	Minnesota MN Mississippi MS	N N								
	Missouri MO	L								
27.	Montana MT	N								
1	Nebraska NE	N				ļ				
	Nevada NV New Hampshire NH	N N								
	New Jersey	N N								
	New MexicoNM	L								
	New York NY	N								
	No.Carolina NC	ļ				 				
	No.Dakota ND Ohio OH	lL.				†				
	Oklahoma OK	L	12,202,318	8,960,241		3,276,510	7 ,510 ,040	4,966,146		
	Oregon OR	N								
	Pennsylvania PA	N								
	Rhode Island RI So. Carolina SC	N	4,679	4,473		11,362	12,157	2.513		
	So. Dakota	N				11,002	12,107	2,010		
	TennesseeTN	ļL								
	Texas TX	<u>L</u>	0 200 252			0.000.070	4 400 400	0 404 004		
	UtahUT VermontVT	L N		5,412,624		2,820,272	4, 183, 139	2,181,221		
	VirginiaVA	N								
48.	Washington WA	N				ļ				
	West Virginia WV	N				 				
	Wisconsin WI Wyoming WY	N N				†	1			
	American Samoa AS	N								
53.	Guam GU	N				ļ				
	Puerto Rico PR U.S. Virgin Islands VI	lN N								
56.	Northern Mariana Islands MP	N								
	Canada CAN									
58.	Aggregate other	\ \v\v\				1				
59.	alienOT Totals	XXX	93,789,679	87,889,849		53,248,976	68,070,645	35,418,394		
58001.	LS OF WRITE-INS	XXX								
58002. 58003.		XXX				 				
	Sum. of remaining write-ins for Line 58									
58999.	from overflow page Totals (Lines 58001 through 58003 + 58998)									
	(Line 58 above)	XXX				I	<u> </u>			

(a) Active Status Counts



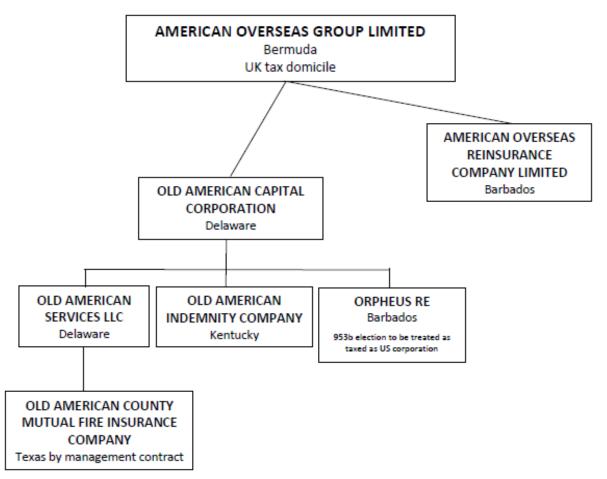
(b) Explanation of basis of allocation of premiums by states, etc.

The Company allocates premium by risk location.

SCHEDULE T – PART 2 INTERSTATE COMPACT – EXHIBIT OF PREMIUMS WRITTEN

				Direct Bu	siness Only		
States, Etc.		1 Life (Group and Individual)	2 Annuities (Group and Individual)	3 Disability Income (Group and Individual)	4 Long-Term Care (Group and Individual)	5 Deposit-Type Contracts	6 Totals
1. Alabama							-
2. Alaska	l l						
3. Arizona	AZ						
4. Arkansas	AR						
5. California							
6. Colorado	co						
7. Connecticut	l l						
8. Delaware	li li						
9. District of Columbia							
10. Florida							
11. Georgia	GA						
12. Hawaii	HI						
13. Idaho	ID						
14. Illinois	IL						
15. Indiana	IN						
16. lowa	JA						
17. Kansas	l l						
18. Kentucky	l l						
19. Louisiana	LA						
20. Maine							
21. Maryland							
22. Massachusetts	I						
23. Michigan	l l						
•	MN						
24. Minnesota							-
25. Mississippi							-
							-
27. Montana							-
28. Nebraska							-
29. Nevada							-
30. New Hampshire							
31. New Jersey							
32. New Mexico							
33. New York							
34. North Carolina	I						
35. North Dakota	ND						
36. Ohio	HO						
37. Oklahoma	OK						
38. Oregon	OR						
39. Pennsylvania	PA						
40. Rhode Island	RI						
41. South Carolina	sc				.	ļ	
42. South Dakota	SD						
43. Tennessee	TN						
	TX						
45. Utah							
46. Vermont	VT						
47. Virginia							
48. Washington	I						
49. West Virginia							
50. Wisconsin							
51. Wyoming							
51. wyorning 52. American Samoa							1
							1
53. Guam	I						1
54. Puerto Rico							·
55. US Virgin Islands					-		·
56. Northern Mariana Islands	I				-	·	-
57. Canada	I				-		
58. Aggregate Other Alien	OT			İ	1	1	1

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



SCHEDULE Y PART 1A – DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
	_	-				Name of		_			Type of Control			'	
						Securities					(Ownership,				
						Exchange if			Relationship		Board,	If Control is		Is an SCA	
		NAIC				Publicly	Names of		to		Management,	Ownership		Filing	
Group		Company	, ID	Federal		Traded (U.S. or	Parent, Subsidiaries	Domiciliary	Reporting	Directly Controlled by	Attorney-in-Fact,	Provide	Ultimate Controlling	Required?	
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	Location	Entity	(Name of Entity/Person)		Percentage	Entity(ies)/Person(s)	(Yes/No)	*
						Bermuda Stock							AMERICAN OVERSEAS		
00000		00000				Exchange	AMERICAN OVERSEAS GROUP LTD	BMU	UIP				GROUP LTD	NO	
													AMERICAN OVERSEAS		
00000		00000					AMERICAN OVERSEAS RE LTD	BRB	IA	AMERICAN OVERSEAS GROUP LTD	OWNERSHIP	100.0	GROUP LTD	NO	
							OLD AMERICAN CAPITAL						AMERICAN OVERSEAS		
00000		00000	27 - 2941857				CORPORATION	DE	UDP		OWNERSHIP	100.0	GROUP LTD	NO	
										OLD AMERICAN CAPITAL			AMERICAN OVERSEAS		
00000		00000	27 - 2941985				OLD AMERICAN SERVICES LLC	DE	NIA	CORPORATION	OWNERSHIP	100.0	GROUP LTD	NO	
											MANAGEMENT		AMERICAN OVERSEAS		
04762	ORPHEUS GRP	29378	75-0728676				OLD AMERICAN COUNTY MUTUAL	ТХ	IA	OLD AMERICAN SERVICES LLC	CONTRACT		GROUP LTD	N0	
										OLD AMERICAN CAPITAL			AMERICAN OVERSEAS		
04762	ORPHEUS GRP	11665	61-0533007				OLD AMERICAN INDEMNITY COMPANY	KY	RE	CORPORATION	OWNERSHIP	100 . 0	GROUP LTD	N0	
										OLD AMERICAN CAPITAL			AMERICAN OVERSEAS		
00000		00000	. 30-0708277				ORPHEUS RE LTD.	BRB		CORPORATION	OWNERSHIP	100.0	GROUP LTD	NO	
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Asterisk	Explanation

86

SCHEDULE Y

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

	2	3	4	5	6	7	8	9	10	11	12	13
1		· ·	7	J	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage	Incurred in Connection with Guarantees or Undertakings for the		Income/ (Disbursements) Incurred Under		Any Other Material Activity Not in the Ordinary Course of	12	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve
NAIC Company	/ ID		Shareholder	Capital	Loans or Other	Benefit of any	Agreements and	Reinsurance		the Insurer's		Credit
Code	Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Dividends	Contributions	Investments	Affiliate(s)	Service Contracts	Agreements	*	Business	Totals	Taken/(Liability)
11665	61-0533007	OLD AMERICAN INDEMNITY COMPANY	(750,000)	450,000			(1,779,501)	648,959			(1,430,542)	3,499,508
00000	. 27-2941985 75-0728676	OLD AMERICAN SERVICES LLC. OLD AMERICAN COUNTY MUTUAL.	\				9.006.404		l	<u> </u>	(7,147,787)	
29378	75-0728676	OLD AMERICAN COUNTY MUTUAL					(7,226,903)	79 , 115			(7 147 787)	6,673,530
00000	30-0708277	ORPHEUS RE LTD						513,718			513,718	
00000 29378 00000 00000	100 0100211	ORPHEUS RE LTD		•••••	†····			(1,241,793)	·		(1,241,793)	(10,173,038)
00000	27 - 2941857	OLD AMERICAN CAPITAL CORPORATION	750,000	(450,000)	†			(1,241,700)		<u> </u>	300,000	(10,170,000)
00000	. 21 -234 1037	OLD AMERICAN CALITAL CONTONATION	7 30 ,000	(450,000)								
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0000000	ontrol Totals		1						XXX			

SCHEDULE Y

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

1	1 2	3	Ι 4	T 5	6	7	Q
l l	2	3	Granted Disclaimer	3	0	'	Granted Disclaimer
		Ownership				Ownership	of Control\Affiliation
		Percentage				Percentage	
		Column 2 of			U.S. Insurance Groups or Entities	(Columns 5	Column 6
Incurare in Holding Company	Owners with Greater than 10% Ownership	Column 1	(Yes/No)	Ultimate Controlling Party	Controlled by Column 5	of Column 6)	(Yes/No)
Insurers in Holding Company OLD AMERICAN COUNTY MUTUAL FIRE INS CO	Owners with Greater than 1070 Ownership	Column	(Tes/NO)	Oitimate Controlling Farty	ORPHEUS GROUP LTD		(Tes/NO)
OLD AMERICAN COUNTY MUTUAL FIRE INS CO.	OLD INFOLONI OADITAL OODDODATION		NO	IMEDIANA OVERACIA ARAURI LER		100.000 %	J\U
OLD AMERICAN INDEMNITY COMPANY	OLD AMERICAN CAPITAL CORPORATION. OLD AMERICAN CAPITAL CORPORATION.		NO		ORPHEUS GROUP LTD	100.000 %	NO
ORPHEUS RE LTD.	OLD AMERICAN CAPITAL CORPORATION		NO	AMERICAN OVERSEAS GROUP LTD			
		%				%	
		%				%	
		%				%	l
		0/0				%	
		0/,				%	
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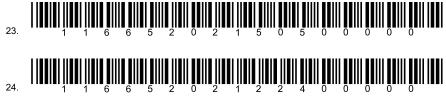
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

	MARCH FILING	RESPONSES
1.	Will an actuarial opinion be filed by March 1?	YES
2.	Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	YES
3.	Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?	YES
4.	Will the confidential Risk-based Capital Report be filed with the state of domicile, if required, by March 1?	YES
	APRIL FILING	
5.		YES
6.	Will Management's Discussion and Analysis be filed by April 1?	YES
7.	Will the Supplemental Investment Risks Interrogatories be filed by April 1?	YES
	MAY FILING	
8.		YES
	HINE EILING	
9.	JUNE FILING Will an audited financial report be filed by June 1?	YES.
0.	Will direct the lines by Galle 1.	
10.	Will Accountants Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	YES.
	The following supplemental reports are required to be filed as part of your statement filing if your company is engaged in the type of business covered by the supplement. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason, enter SEE EXPLANATION and provide an explanation following the interrogatory questions.	
	MARCH FILING	
11.	Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?	NO
12.	Will the Financial Guaranty Insurance Exhibit be filed by March 1?	N0
13.	Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	N0
14.	Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed by March 1?	N0
15.	Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?	N0
16.	Will the Premiums Attributed to Protected Cells Exhibit be filed by March 1?	N0
17.	Will the Reinsurance Summary Supplemental Filing for General Interrogatory 9 be filed with the state of domicile and the NAIC by March 1?	YES
18.		N0
19.	Will the confidential Actuarial Opinion Summary be filed with the state of domicile, if required, by March 15 (or the date otherwise specified)?	YES
20.	Will the Reinsurance Attestation Supplement be filed with the state of domicile and the NAIC by March 1?	YES
21.	Will the Exceptions to the Reinsurance Attestation Supplement be filed with the state of domicile by March 1?	N0
22.	Will the Bail Bond Supplement be filed with the state of domicile and the NAIC by March 1?	N0
23.	Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	N0
24.	Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1?	N0
25.	Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1?	N0
26.	Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?	N0
27.	Will the Supplemental Schedule for Reinsurance Counterparty Reporting Exception – Asbestos and Pollution Contracts be filed with the state of domicile and the NAIC by March 1?	N0

APRIL FILING

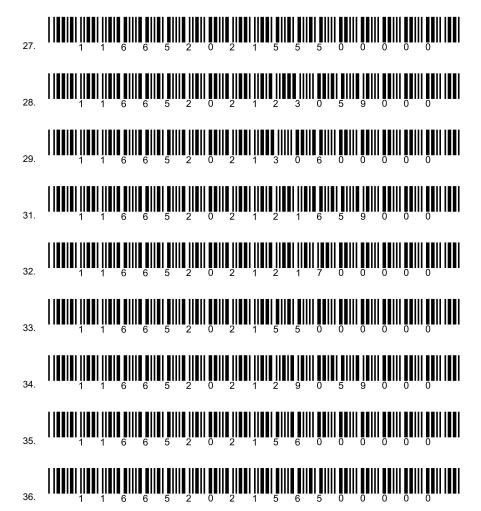
	SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES									
28.	Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1?	NO								
29.	Will the Long-term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?	N0								
30.	Will the Accident and Health Policy Experience Exhibit be filed by April 1?	YES								
31.	Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1?	N0								
32.	Will the regulator-only (non-public) Supplemental Health Care Exhibit's Allocation Report be filed with the state of domicile and the NAIC by April 1?	NO								
33.	Will the Cybersecurity and Identity Theft Insurance Coverage Supplement be filed with the state of domicile and the NAIC by April 1?	N0								
34.	Will the Life, Health & Annuity Guaranty Association Assessable Premium Exhibit – Parts 1 and 2 be filed with the state of domicile and the NAIC by April 1?	NO								
35.	Will the Private Flood Insurance Supplement be filed with the state of domicile and the NAIC by April 1?	N0								
36.	Will the Mortgage Guaranty Insurance Exhibit be filed with the state of domicile and the NAIC by April 1?	NO								
	AUGUST FILING									
37. Evalo	Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1? nation:	YES								
·										
Bar C										
11.										
12.										
13.										
10.										
14.										
15.										
16.										
10.										
18.										
21.										
22.										
44.	1 1 0 0 0 2 0 2 1 0 0 0 0 0 0 0 0 0									







SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES



OVERFLOW PAGE FOR WRITE-INS

SUMMARY INVESTMENT SCHEDULE

	Gross Inve			Admitted Assets a	ssets as Reported			
	1	2 Percentage	3	4 Securities Lending Reinvested	5 Total	6 Percentage of		
lavorator ant Oata marina	A 4	Column 1	A	Collateral	(Col. 3+4)	Column 5		
Investment Categories	Amount	Line 13	Amount	Amount	Amount	Line 13		
Long-Term Bonds (Schedule D, Part 1): 1.01 U.S. governments	1 004 271	6 227	1 004 271		1 004 271	6.237		
- I		1			1			
1.02 All other governments			1,500,000		1 500 000	1		
1.03 U.S. states, territories and possessions, etc. guaranteed	1,300,000	4.913	1,500,000		1,,1,500,000	4.913		
1.04 U.S. political subdivisions of states, territories, and possessions, guaranteed	1.021.064	3.344	1,021,064		1.021.064	3.344		
1.05 U.S. special revenue and special assessment obligations, etc.								
1.06 Industrial and miscellaneous			1			1		
1.07 Hybrid securities								
1.08 Parent, subsidiaries and affiliates						1		
1.09 SVO identified funds								
1.10 Unaffiliated bank loans								
1.11 Total long-term bonds	28,850,697	94 . 497	28,850,697		28,850,697	94 . 497		
2. Preferred stocks (Schedule D, Part 2, Section 1):								
2.01 Industrial and miscellaneous (Unaffiliated)								
2.02 Parent, subsidiaries and affiliates			i					
2.03 Total preferred stocks		i	i i					
Common stocks (Schedule D, Part 2, Section 2):								
3.01 Industrial and miscellaneous Publicly traded (Unaffiliated)								
3.02 Industrial and miscellaneous Other (Unaffiliated)		1						
3.03 Parent, subsidiaries and affiliates Publicly traded			1					
3.04 Parent, subsidiaries and affiliates Other								
3.05 Mutual funds		i						
3.06 Unit investment trusts		i	i					
3.07 Closed-end funds					1			
3.08 Total common stocks								
Mortgage loans (Schedule B):								
4.01 Farm mortgages								
4.02 Residential mortgages		1	i					
4.03 Commercial mortgages								
4.04 Mezzanine real estate loans								
4.05 Total valuation allowance								
4.06 Total mortgage loans								
5. Real estate (Schedule A):								
5.01 Properties occupied by company								
5.02 Properties held for production of income		1	1		1	1		
5.03 Properties held for sale		1			1			
5.04 Total real estate					1			
Cash, cash equivalents and short-term investments:								
6.01 Cash (Schedule E, Part 1)	1 680 272	5 503	1 680 272		1 680 272	5.503		
6.02 Cash equivalents (Schedule E, Part 2)			1		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
6.03 Short-term investments (Schedule DA)								
6.04 Total cash, cash equivalents and short-term investments		i	1		i	1		
7. Contract loans		1	1		1	1		
Contract loans Derivatives (Schedule DB)		1	1		1	1		
9. Other invested assets (Schedule BA)						1		
Other invested assets (scriedule bA) 10. Receivables for securities					1			
Receivables for securities Securities Lending (Schedule DL, Part 1)		I	1	XXX	XXX	1		
		·				^^^		
, , , , , , , , , , , , , , , , , , , ,	30,530,969	100.000	30 530 060		30,530,969	100.000		
13. Total invested assets	30,330,969	100.000	30,530,969		1 30,330,969	100.000		

SCHEDULE A - VERIFICATION BETWEEN YEARS

Real Estate

1.	Book/adjusted carrying value, December 31 of prior year.
	Cost of acquired:
	2.1 Actual cost at time of acquisition (Part 2, Column 6)
	2.2 Additional investment made after acquisition (Part 2, Column 9)
3.	Current year change in encumbrances:
	3.1 Totals, Part 1, Column 13
	3.2 Totals, Part 3, Column 11
4.	Total gain (loss) on disposals, Part 3, Column 18 Deduct amounts received on disposals, Part 3, Column 15
5.	Deduct amounts received on disposals, Part 3, Column 15
6.	Total foreign exchange change in book/adjusted carrying value.
	6.1 Totals, Part 1, Column 15
	6.2 Totals, Part 3, Column 13.
7.	Deduct current year's other-than-temporary impairment recognized:
	7.1 Totals, Part 1, Column 12
	7.2 Totals, Part 3, Column 10
8.	Deduct current year's depreciation:
	8.1 Totals, Part 1, Column 11
	8.2 Totals, Part 3, Column 9
9.	Book/adjusted carrying value at the end of current period (Lines 1+2+3+4-5+6-7-8)
	Deduct total nonadmitted amounts
11.	Statement value at end of current period (Line 9 minus Line 10)

SCHEDULE B - VERIFICATION BETWEEN YEARS

Mortgage Loans

1.	Book value/recorded investment excluding accrued interest, December 31 of prior year.
2.	Cost of acquired:
	2.1 Actual cost at time of acquisition (Part 2, Column 7)
	2.2 Additional investment made after acquisition (Part 2, Column 8)
3.	Capitalized deferred interest and other:
	3.1 Totals, Part 1, Column 12
	3.2 Totals, Part 3, Column 11
4.	Accrual of discount
5.	Unrealized valuation increase (decrease):
	5.1 Totals, Part 1, Column 9 5.2 Totals, Part 3, Column 8 Total gain (loss) on disposals, Part 3, Column 18
	5.2 Totals, Part 3, Column 8
6.	Total gain (loss) on disposals, Part 3, Column 18
7.	Deduct amounts received on disposals, Part 3, Column 15
8.	Deduct amortization of premium and mortgage interest points and commitment fees.
9.	Total foreign exchange change in book value/recorded investment excluding accrued interest:
	9.1 Totals, Part 1, Column 13
	9.1 Totals, Part 1, Column 13
10.	Deduct current year's other-than-temporary impairment recognized:
	10.1 Totals, Part 1, Column 11
	10.2 Totals, Part 3, Column 10
	Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-8+9-10).
12.	Total valuation allowance
13.	Subtotal (Line 11 plus Line 12)
14.	Deduct total nonadmitted amounts
15.	Statement value of mortgages owned at end of current period (Line 13 minus Line 14)

SCHEDULE BA - VERIFICATION BETWEEN YEARS

Other Long-Term Invested Assets

1.	Book/adjusted carrying value, December 31 of prior year
2.	Cost of acquired:
	2.1 Actual cost at time of acquisition (Part 2, Column 8)
3.	Capitalized deferred interest and other:
0.	3.1 Totals, Part 1, Column 16
	3.2 Totals, Part 3, Column 12
4.	Accrual of discount
5.	Unrealized valuation increase (decrease):
	5.1 Totals, Part 1, Column 13 5.2 Totals, Part 3, Column 9 Total gain (loss) on disposals, Part 3, Column 19
	5.2 Totals, Part 3, Column 9
6.	Total gain (loss) on disposals, Part 3, Column 19
	Deduct amounts received on disposals, Part 3, Column 16.
8.	Deduct amortization of premium and depreciation
9.	Total foreign exchange change in book/adjusted carrying value:
	9.1 Totals, Part 1, Column 17
10	9.2 Totals, Part 3, Column 14.
10.	Deduct current year's other-than-temporary impairment recognized:
	10.1 Totals, Part 1, Column 15
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10).
12.	Deduct total nonadmitted amounts
13.	Statement value at end of current period (Line 11 minus Line 12)
10.	enteriorit rette et ente et ente perse (Ente 11 mille Ente 12)

SCHEDULE D – VERIFICATION BETWEEN YEARS

Bonds and Stocks

1	Book/adjusted carrying value. December 31 of prior year	21 878 058
2.	Book/adjusted carrying value, December 31 of prior year	12 243 344
3.		
	7.cordar or discourit	1,377
4.	Unrealized valuation increase (decrease):	
	4.1 Part 1, Column 12	
	4.3 Part 2, Section 1, Column 13.	
	4.4 Part 4, Column 11	
5.		51 543
6.		5 260 010
7	Deduct amortization of premium.	
8.	Total foreign exchange change in book/adjusted carrying value:	
	8.1 Part 1, Column 15.	
	8.2 Part 2, Section 1, Column 19.	
	8.3 Part 2. Section 2. Column 16.	
	8.4 Part 4, Column 15	
9.		
	9.1 Part 1. Column 14.	
	9.2 Part 2, Section 1, Column 17	
	9.3 Part 2, Section 2, Column 14	
	9.4 Part 4, Column 13	
10.	Total investment income recognized as a result of prepayment penalties and/or acceleration fees, Note 5Q, Line (2)	
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10)	28 , 850 , 697
12.		
13.	Statement value at end of current period (Line 11 minus Line 12)	28 , 850 , 697

SCHEDULE D - SUMMARY BY COUNTRY

	Lo	ng-Term Bonds and Stocks	OWNED December 31 of	Current Year		
Description			1 Book/Adjusted Carrying Value	2 Fair Value	3 Actual Cost	4 Par Value of Bonds
BONDS	1.	United States		1,918,371	1.907.561	1.903.000
Governments (including all obligations	2.	Canada				, ,
guaranteed by governments)	3.	Other Countries				
,	4.	Totals	1,904,271	1,918,371	1,907,561	1,903,000
U.S. States, Territories and Possessions						
(direct and guaranteed)	5.	Totals	1,500,000	1,487,040	1,500,000	1,500,000
U.S. Political Subdivisions of States, Territories						
and Possessions (direct and guaranteed)	6.	Totals	1,021,064	1,034,238	1,052,073	1,010,000
U.S. Special Revenue and Special Assessment						
Obligations and all Non-Guaranteed						
Obligations of Agencies and Authorities of						
Governments and their Political Subdivisions	7.	Totals	24,425,362	24,217,312	24,477,874	24,279,754
Industrial and Miscellaneous, SVO Identified	8.	United States				
Funds, Unaffiliated Bank Loans and Hybrid	9.	Canada				
Securities (unaffiliated)	10.	Other Countries				
	11.	Totals				
Parent, Subsidiaries and Affiliates	12.	Totals				
	13.	Total Bonds	28,850,697	28,656,961	28,937,509	28,692,754
PREFERRED STOCKS	14.	United States				
Industrial and Miscellaneous (unaffiliated)	15.	Canada				
	16.	Other Countries				
	17.	Totals				
Parent, Subsidiaries and Affiliates	18.	Totals				
	19.	Total Preferred Stocks				
COMMON STOCKS	20.	United States				
Industrial and Miscellaneous (unaffiliated)	21.	Canada				
	22.	Other Countries				
	23.	Totals				
Parent, Subsidiaries and Affiliates	24.	Totals				
	25.	Total Common Stocks				
	26.	Total Stocks				
	27.	Total Bonds and Stocks	28,850,697	28,656,961	28,937,509	

SCHEDULE D - PART 1A - SECTION 1

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

	1	2	3	4	5	6	7	8	9	10	11	12
NAIC Designation	4 //	Over 1 Year Through 5 Years	Over 5 Years Through 10 Years	Over 10 Years Through 20 Years	Over 20 Years	No Maturity Date	Total Current Year	Col. 7 as a	Total from Col. 7 Prior Year	% From Col. 8 Prior Year	Total Publicly Traded	Total Privately Placed
1. U.S. Governments	1 Year or Less	5 Years	Inrough 10 Years	Inrough 20 Years	Over 20 Years	Date	Current Year	% of Line 11.7	Prior Year	Prior Year	Traded	(a)
1.1 NAIC 1	899,921	1,004,350				XXX	1,904,271	6.6	2,818,592	12.9	1,904,271	1
1.2 NAIC 2		, ,004,000				XXX	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0.0		12.5	1,504,27	
1.3 NAIC 3						XXX						
1.4 NAIC 4						XXX						
1.5 NAIC 5						XXX						
1.6 NAIC 6						XXX						
1.7 Totals	899,921	1,004,350				XXX	1,904,271	6.6	2,818,592	12.9	1,904,271	
2. All Other Governments	000,021	1,001,000				7,7,7	1,001,211	0.0	2,0.0,002	1210	1,001,27	
2.1 NAIC 1						XXX						
2.2 NAIC 2						XXX						
2.3 NAIC 3						XXX						
2.4 NAIC 4						XXX						
2.5 NAIC 5						XXX						
2.6 NAIC 6						XXX						
2.7 Totals						XXX						
3. U.S. States, Territories ar	nd Possessions, etc., (Guaranteed										
3.1 NAIC 1	[1,500,000				XXX	1,500,000	5.2	1,789,194	8.2	1,500,000	ا
3.2 NAIC 2						XXX					<u> </u>	
3.3 NAIC 3						XXX						
3.4 NAIC 4						XXX						
3.5 NAIC 5						XXX						
3.6 NAIC 6						XXX						
3.7 Totals		1,500,000				XXX	1,500,000	5.2	1,789,194	8.2	1,500,000)
4. U.S. Political Subdivisions	s of States, Territories											
4.1 NAIC 1	201,853	503,873	315,338			XXX	1,021,064	3.5	3, 137, 616	14.3	1,021,064	ł
4.2 NAIC 2						XXX						
4.3 NAIC 3						XXX						
4.4 NAIC 4						XXX						
4.5 NAIC 5						XXX						
4.6 NAIC 6						XXX						
4.7 Totals	201,853		315,338			XXX	1,021,064	3.5	3,137,616	14.3	1,021,064	ł
5. U.S. Special Revenue & S	Special Assessment C											
5.1 NAIC 1		2,473,526	8,899,674	9,227,161	3,825,000	XXX	24,425,362	84.7	14,132,653	64.6	24 , 425 , 362	!
5.2 NAIC 2						XXX						
5.3 NAIC 3						XXX						
5.4 NAIC 4						XXX						
5.5 NAIC 5						XXX	ļ					
5.6 NAIC 6	=	0 470		0.007	0.005.000	XXX	04 405 555		44 400		0, 40	
5.7 Totals		2,473,526	8,899,674	9,227,161	3,825,000	XXX	24,425,362	84.7	14,132,653	64.6	24,425,362	1

SCHEDULE D - PART 1A - SECTION 1 (Continued) Quality and Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Types of Issues and NAIC Designations

	1	2	3	4	5	6	7	8	9	10	11	12
		Over 1 Year Through	Over 5 Years	Over 10 Years		No Maturity	Total	Col. 7 as a	Total from Col. 7	% From Col. 8	Total Publicly	Total Privately Place
NAIC Designation	1 Year or Less	5 Years	Through 10 Years	Through 20 Years	Over 20 Years	Date	Current Year	% of Line 11.7	Prior Year	Prior Year	Traded	(a)
6. Industrial and Miscellaned	ous (unaffiliated)											
6.1 NAIC 1						ХХХ						
6.2 NAIC 2						XXX						
6.3 NAIC 3						XXX						
6.4 NAIC 4						XXX						
6.5 NAIC 5						ХХХ						
6.6 NAIC 6						XXX						
6.7 Totals						XXX						
7. Hybrid Securities												
7.1 NAIC 1						XXX						
7.2 NAIC 2						XXX						
7.3 NAIC 3						XXX						
7.4 NAIC 4						XXX						
7.5 NAIC 5						XXX						
7.6 NAIC 6						XXX						
7.7 Totals						XXX						
8. Parent, Subsidiaries ar	nd Affiliates											
8.1 NAIC 1						XXX						
8.2 NAIC 2						XXX						
8.3 NAIC 3						XXX						
8.4 NAIC 4						XXX						
8.5 NAIC 5						XXX						
8.6 NAIC 6						XXX						
8.7 Totals						XXX						
9. SVO Identified Funds						AAA						
9.1 NAIC 1	ХХХ	XXX	XXX	XXX	XXX							
9.2 NAIC 2	XXX	XXX	XXX	ХХХ	XXX							
9.3 NAIC 3	XXX	XXX	XXX	XXX	XXX							
9.4 NAIC 4	XXX	XXX	XXX	XXX	XXX							
9.5 NAIC 5	XXX	XXX	XXX	XXX	XXX							
9.6 NAIC 6	XXX	XXX	XXX	XXX	XXX							
9.7 Totals	XXX	XXX	XXX	XXX	XXX							
10. Unaffiliated Bank Loans		۸۸۸	۸۸۸	۸۸۸	۸۸۸							
10.1 NAIC 1						XXX						
10.1 NAIC 1						XXX						
10.2 NAIC 2						XXX		†	·			
						XXX			-			
10.4 NAIC 4									-			
10.5 NAIC 5						XXX		 	-			
10.6 NAIC 6						XXX						
10.7 Totals		1	1			XXX	l		1		1	

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

T.			Maturity Distribution of	of All Bonds Owned De		usted Carrying Value	es by Major Types of Iss	sues and NAIC Desigr				
NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 No Maturity Date	7 Total Current Year	8 Col. 7 as a % of Line 11.7	9 Total from Col. 7 Prior Year	10 % From Col. 8 Prior Year	11 Total Publicly Traded	12 Total Privately Placed (a)
11. Total Bonds Current Year												
11.1 NAIC 1	^(d) 1, 101, 774	5,481,749	9,215,012	9,227,161	3,825,000		28,850,697	100.0	ХХХ	ХХХ	28,850,697	
11.2 NAIC 2	(d)								ХХХ	ХХХ		
11.3 NAIC 3	(d)								ХХХ	ХХХ		
11.4 NAIC 4	(d)								ХХХ	XXX		
11.5 NAIC 5	(d)						(c)		ХХХ	XXX		
11.6 NAIC 6	(d)						(c)		XXX	XXX		
11.7 Totals	1, 101, 774	5,481,749	9,215,012	9,227,161	3,825,000		(b)28,850,697	100.0	ХХХ	XXX	28,850,697	
11.8 Line 11.7 as a % of Col. 7	3.8	19.0	31.9	32.0	13.3		100.0	XXX	XXX	XXX	100.0	
12. Total Bonds Prior Year												
12.1 NAIC 1	1,667,097	8,289,459	4,986,070	5,119,305	1,816,124		ХХХ	XXX	21,878,056	100.0	21,878,056	
12.2 NAIC 2							ХХХ	XXX				
12.3 NAIC 3							ХХХ	XXX				
12.4 NAIC 4							ХХХ	XXX				
12.5 NAIC 5							ХХХ	XXX	(c)			
12.6 NAIC 6							XXX	XXX	(c)			
12.7 Totals	1,667,097	8,289,459	4,986,070	5,119,305	1,816,124		XXX	XXX	(b)21,878,056	100.0	21,878,056	
12.8 Line 12.7 as a % of Col. 9	7.6		22.8	23.4	8.3		XXX	XXX	100.0	XXX	100.0	
13. Total Publicly Traded Bonds		0.10	22.0	2011	0.0		7	7001	10010	7001	10010	
13.1 NAIC 1	1,488,679	5,792,161	10,253,963	7 , 490 , 894	3,825,000		28,850,697	100.0	21,878,056	100.0	28,850,697	XXX
13.2 NAIC 2	, , , , , , , , , , , , , , , , ,	, 752, 101	10,200,000	, , 450 , 054			20,000,007	100.0		100.0	20,000,007	XXX
13.3 NAIC 3							1					XXX
13.4 NAIC 4												XXX
13.5 NAIC 5												XXX
13.6 NAIC 6												XXX
13.7 Totals	1,488,679	5,792,161	10,253,963	7,490,894	3,825,000		28,850,697	100.0	21,878,056	100.0	28,850,697	XXX
13.8 Line 13.7 as a % of Col. 7	5.2	20.1	35.5	26.0	13.3		100.0	XXX	XXX	XXX	100.0	
13.9 Line 13.7 as a % of Line				20.0			100.0	J////				
11.7, Col. 7, Section 11	5.2	20.1	35.5	26.0	13.3		100.0	XXX	XXX	XXX	100.0	XXX
14. Total Privately Placed	0.2	20.1	00.0	20.0	10.0		100.0	7////	7077	7////	100.0	7000
Bonds												
14.1 NAIC 1											XXX	
14.2 NAIC 2											XXX	
14.3 NAIC 3											XXX	
14.4 NAIC 4											XXX	
14.5 NAIC 5											XXX	
14.6 NAIC 6											XXX	
14.7 Totals											XXX	
14.8 Line 14.7 as a % of Col. 7								XXX	XXX	XXX	XXX	
14.9 Line 14.7 as a % of Line												
11.7, Col. 7, Section 11								XXX	XXX	XXX	XXX	
i i.i., coi. i, decuoli i i								////	AAA	ΛΛΛ	MM	1

١	Includes 9	freely	tradable under SEC Rule	144 or qualified for resale under	SEC Rule 144A.

⁽b) Includes \$ current year of bonds with Z designations, and \$ current year of bonds with Z designations and \$ current year of bonds with Z designations. The letter "Z" means the NAIC designation was not assigned by the Securities Valuation Office (SVO) at the date of the statement.

(c) Includes \$ current year, \$ prior year of bonds with 5GI designations and \$ current year, \$ prior year of bonds with 6* designations. "5GI" means the NAIC designation was assigned by the SVO in reliance on the insurer's certification that the issuer is current in all principal and interest payments. "6*" means the NAIC designation was assigned by the SVO due to inadequate certification of principal and interest payments.

(d) Includes the following amount of short-term and cash equivalent bonds by NAIC designation: NAIC 1\$ NAIC 2\$ NAIC 4\$ NAIC 5\$ NAIC 6\$

SCHEDULE D - PART 1A - SECTION 2

	Ma	aturity Distribution	of All Bonds Owned	December 31, At B	ook/Adjusted Carry	ing Values by Maio	or Type and Subtype	of Issues				
Distribution by Type	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 No Maturity Date	7 Total Current Year	8 Col. 7 as a % of Line 11.08	9 Total from Col. 7 Prior Year	10 % From Col. 8 Prior Year	11 Total Publicly Traded	12 Total Privately Placed
1. U.S. Governments 1.01 Issuer Obligations	899,921	1,004,350				XXX	1,904,271	6.6	2,818,592	12.9	1,904,271	
1.02 Residential Mortgage-Backed Securities						XXX	ļ					
1.03 Commercial Mortgage-Backed Securities						XXX						
1.04 Other Loan-Backed and Structured Securities						XXX						
1.05 Totals	899,921	1,004,350				XXX	1,904,271	6.6	2,818,592	12.9	1,904,271	
All Other Governments 2.01 Issuer Obligations						XXX						
2.02 Residential Mortgage-Backed Securities						XXX	ļ					
2.03 Commercial Mortgage-Backed Securities						XXX						
2.04 Other Loan-Backed and Structured Securities						XXX						
2.05 Totals						XXX						
3. U.S. States, Territories and Possessions, Guaranteed 3.01 Issuer Obligations		1,500,000				XXX	1,500,000	5.2	1 ,789 , 194	8.2	1,500,000	
3.02 Residential Mortgage-Backed Securities						XXX						
3.03 Commercial Mortgage-Backed Securities						XXX						
3.04 Other Loan-Backed and Structured Securities						XXX						
3.05 Totals		1,500,000				XXX	1,500,000	5.2	1,789,194	8.2	1,500,000	
U.S. Political Subdivisions of States, Territories and Possess 4.01 Issuer Obligations	sions, Guaranteed 201,853	503,873	315,338			XXX	1,021,064	3.5	3,137,616	14.3	1,021,064	
4.02 Residential Mortgage-Backed Securities						XXX						
4.03 Commercial Mortgage-Backed Securities						XXX						
4.04 Other Loan-Backed and Structured Securities						XXX						
4.05 Totals	201,853	503,873	315,338			XXX	1,021,064	3.5	3,137,616	14.3	1,021,064	
U.S. Special Revenue & Special Assessment Obligations, etc. 5.01 Issuer Obligations	, Non-Guaranteed	2,473,526	8,899,674	9,227,161	3,825,000	XXX	24,425,362	84.7	14,132,653	64.6	24,425,362	
5.02 Residential Mortgage-Backed Securities						XXX				.		
5.03 Commercial Mortgage-Backed Securities						XXX						
5.04 Other Loan-Backed and Structured Securities		0 470 500	2 222 274	0.007.404	0.005.000	XXX	04 405 000	0.1.7	44 400 050		0.4 405 000	
5.05 Totals		2,473,526	8,899,674	9,227,161	3,825,000	XXX	24,425,362	84.7	14,132,653	64.6	24,425,362	
6. Industrial and Miscellaneous 6.01 Issuer Obligations						XXX						
6.02 Residential Mortgage-Backed Securities						XXX	ļ					
6.03 Commercial Mortgage-Backed Securities						XXX	ļ					
6.04 Other Loan-Backed and Structured Securities						XXX						
6.05 Totals						XXX						
7. Hybrid Securities 7.01 Issuer Obligations						XXX						
7.02 Residential Mortgage-Backed Securities						XXX				.		
7.03 Commercial Mortgage-Backed Securities						XXX				.		
7.04 Other Loan-Backed and Structured Securities						XXX						
7.05 Totals						XXX						
Parent, Subsidiaries and Affiliates 8.01 Issuer Obligations						XXX						
8.02 Residential Mortgage-Backed Securities						XXX				.		
8.03 Commercial Mortgage-Backed Securities						XXX				ļ		
8.04 Other Loan-Backed and Structured Securities						XXX	ļ	.		.		
8.05 Affiliated Bank Loans – Issued						XXX	ļ	.		.		
8.06 Affiliated Bank Loans – Acquired						XXX						
8.07 Totals		l	l			XXX						

SCHEDULE D - PART 1A - SECTION 2 (Continued) Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Type and Subtype

		Maturity Distribution	n of All Bonds Owne	ed December 31, at E	Book/Adjusted Carry	ring Values by Majo	or Type and Subtype	of Issues				
Distribution by Type	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 No Maturity Date	7 Total Current Year	8 Col. 7 as a % of Line 11.08	9 Total from Col. 7 Prior Year	10 % From Col. 8 Prior Year	11 Total Publicly Traded	12 Total Privately Placed
9. SVO Identified Funds												
9.01 Exchange Traded Funds Identified by the SVO	XXX	XXX	XXX	XXX	XXX							1
10. Unaffiliated Bank Loans												
10.01 Bank Loans - Issued						XXX						
10.02 Bank Loans – Acquired						XXX						
10.03 Totals						XXX						
11. Total Bonds Current Year												
11.01 Issuer Obligations	1,101,774	5,481,749	9,215,012	9,227,161	3,825,000	XXX	28,850,697	100.0	XXX	XXX	28,850,697	
11.02 Residential Mortgage-Backed Securities						XXX			XXX	XXX		
11.03 Commercial Mortgage-Backed Securities						XXX			XXX	XXX		
11.04 Other Loan-Backed and Structured Securities						XXX			XXX	XXX		
11.05 SVO Identified Funds	XXX	XXX	XXX	XXX	XXX				XXX	XXX		
11.06 Affiliated Bank Loans						XXX			XXX	XXX		
11.07 Unaffiliated Bank Loans						XXX			XXX	XXX		
11.08 Totals	1,101,774	5,481,749	9,215,012	9,227,161	3,825,000		28,850,697	100.0	XXX	XXX	28,850,697	
11.09 Lines 11.08 as a % Col. 7	3.8	19.0	31.9	32.0	13.3		100.0	XXX	XXX	XXX	100.0	
12. Total Bonds Prior Year												
12.01 Issuer Obligations	1,667,097	8,289,459	4,986,070	5,119,305	1,816,124	XXX	XXX	ДХХХ	21,878,056	100.0	21,878,056	
12.02 Residential Mortgage-Backed Securities						XXX	XXX	XXX				
12.03 Commercial Mortgage-Backed Securities						XXX	ДХХХ	ДХХХ				
12.04 Other Loan-Backed and Structured Securities						XXX	ДХХХ	ДХХХ				
12.05 SVO Identified Funds	XXX	XXX	XXX	XXX	XXX		XXX	ДХХХ				
12.06 Affiliated Bank Loans						XXX	XXX	XXX				
12.07 Unaffiliated Bank Loans						XXX	XXX	XXX				
12.08 Totals	1,667,097	8,289,459	4,986,070	5,119,305	1,816,124		ХХХ	XXX	21,878,056	100.0	21,878,056	
12.09 Line 12.08 as a % of Col. 9	7.6	37.9	22.8	23.4	8.3		XXX	XXX	100.0	XXX	100.0	
13. Total Publicly Traded Bonds												1
13.01 Issuer Obligations	1,101,774	5,481,749	9,215,012	9,227,161	3,825,000	XXX	28,850,697	100.0	21,878,056	100.0	28,850,697	XXX
13.02 Residential Mortgage-Backed Securities						XXX						XXX
13.03 Commercial Mortgage-Backed Securities						XXX	ļ					XXX
13.04 Other Loan-Backed and Structured Securities						XXX	ļ					XXX
13.05 SVO Identified Funds	XXX	XXX	XXX	XXX	XXX							XXX
13.06 Affiliated Bank Loans						XXX						XXX
13.07 Unaffiliated Bank Loans						XXX						XXX
13.08 Totals	1,101,774	5,481,749	9,215,012	9,227,161	3,825,000		28,850,697	100.0	21,878,056	100.0	28,850,697	XXX
13.09 Line 13.08 as a % of Col. 7	3.8	19.0	31.9	32.0	13.3		100.0	XXX	XXX	XXX	100.0	XXX
13.10 Line 13.08 as a % of Line 11.08, Col. 7, Section 11	3.8	19.0	31.9	32.0	13.3		100.0	XXX	XXX	XXX	100.0	XXX
14. Total Privately Placed Bonds						WWW					VVV	
14.01 Issuer Obligations						XXX	·	-			XXX	·····
14.02 Residential Mortgage-Backed Securities						XXX	·	-			XXX	t
14.03 Commercial Mortgage-Backed Securities						XXX	 	-		-	XXX	t
14.04 Other Loan-Backed and Structured Securities	XXX	XXX	XXX	XXX	XXX	XXX	<u> </u>	-			XXX	İ
14.05 SVO Identified Funds	XXX	XXX	łXXX	XXX	XXX	XXX		-			XXXXXX	İ
14.06 Affiliated Bank Loans							·	-				İ
14.07 Unaffiliated Bank Loans						XXX					XXX	
14.08 Totals		ļ	ļ	ļ			ļ	XXX	XXX	vvv	XXX	ł
14.09 Line 14.08 as a % of Col. 7							 		XXX	XXX	XXX XXX	İ
14.10 Line 14.08 as a % of Line 11.08, Col. 7, Section 11								XXX	ХХХ	XXX	λλλ	

Schedule DA - Verification Between Yrs

NONE

Schedule DB - Part A - Verification

NONE

Schedule DB - Part B - Verification

NONE

Schedule DB - Part C - Section 1

NONE

Schedule DB - Part C - Section 2

NONE

Schedule DB - Verification

NONE

Schedule E - Part 2 - Verification Between Yrs

NONE

Schedule A - Part 1

NONE

Schedule A - Part 2

NONE

Schedule A - Part 3

NONE

Schedule B - Part 1

Schedule B - Part 2

NONE

Schedule B - Part 3

NONE

Schedule BA - Part 1

NONE

Schedule BA - Part 2

NONE

Schedule BA - Part 3

SCHEDULE D - PART 1 Showing All Long-Term BONDS Owned December 31 of Current Year		
1 2 Codes 6 7 Fair Value 10 11 Change in Book / Adjusted Carrying Value Interest		Dates
3 4 5 NAIC 8 9 1 12 13 14 15 16 17 18	19 20	21 22
F Designation o , NAIC r Designation e Modifier Rate Used Book/ Unrealized Current Year's Total Other Foreign Than Exchange A	Admitted Amount	Stated
	Amount Rec. Due & During	Contractual Maturity
	Accrued Year	Acquired Date
Bonds - U.S. Governments - Issuer Obligations		
912828-4D-9. UNITED STATES TREASURY NOTE. SD	2,89311,325	03/25/201903/31/2023
912828-6C-9. UNITED STATES TREASURY NOTE. SD. 1.A	4,72112,500 5,250	03/06/2019
912828-2M-5 UNITED STATES TREASURY NOTE SD 1 A 399,517 100.0000 400,000 399,920 244 0.125 0.186 A0	86 500	05/05/202004/30/2022
91282C-CN-9. UNITED STATES TREASURY NOTE SD. 1.A 249,454 99.2030 248,008 250,000 249,561 108 0.125 0.236 JJ	131	08/10/202107/31/2023
0199999 - Bonds - U.S. Governments - Issuer Obligations 1,907,561 XXX 1,918,371 1,903,000 1,904,271 (1,054) XXX XXX XXX XXX XXX	8,512 29,575	XXX XXX
Bonds - U.S. Governments - Residential Mortgage-Backed Securities		
Bonds - U.S. Governments - Commercial Mortgage-Backed Securities Bonds - U.S. Governments - Other Loan-Backed and Structured Securities		
O599999 - Bonds - U.S. Governments - Subtotals - U.S. Governments 1,907,561 XXX 1,918,371 1,903,000 1,904,271 (1,054) XXX	8,512 29,575	T XXX T XXX
Bonds - All Other Governments - Issuer obligations	0,012 20,010	AAA AAA
Bonds - All Other Governments - Residential Mortgage-Backed Securities		
Bonds - All Other Governments - Commercial Mortgage-Backed Securities		
Bonds - All Other Governments - Other Loan-Backed and Structured Securities		
Bonds - U.S. States, Territories and Possessions (Direct and Guaranteed) - Issuer Obligations 546417-DQ-6, LOUISIANA ST	1,050 12,600	10/02/2020 06/01/2025
1199999 - Bonds - U.S. States, Territories and Possessions (Direct and	1,00012,000	1070272020
Guaranteed) - Issuer Obligations 1,500,000 XXX 1,487,040 1,500,000 1,500,000 XXX XXX XXX	1,050 12,600	XXX XXX
Bonds - U.S. States, Territories and Possessions (Direct and Guaranteed) - Residential Mortgage-Backed Securities	•	
Bonds - U.S. States, Territories and Possessions (Direct and Guaranteed) - Commercial Mortgage-Backed Securities		
Bonds - U.S. States, Territories and Possessions (Direct and Guaranteed) - Other Loan-Backed and Structured Securities 1799999 - Bonds - U.S. States, Territories and Possessions (Direct and		
Guaranteed) - Subtotals - U.S. States, Territories and		
Possession's (Direct and Guaranteed) 1,500,000 XXX 1,487,040 1,500,000 1,500,000 XXX XXX XXX XXX XXX XXX XXX XXX	1,050 12,600	XXX XXX
Bonds - U.S. Political Subdivisions of States, Territories and Possessions (Direct and Guaranteed) - Issuer Obligations		
CALCAS IEU PARISH LA SCH DIST 1.0 FE 322,930 102.0230 331,575 325,000 323,729 388 2.200 2.331 FA.	7 , 150	10/23/201902/15/2025
647636 - QL - 6 NEW ORLEANS LA 1 1, F FE 208, 692 102, 1210 204, 242 200, 000 201, 853 (2, 731) 3, 692 2, 282 MS	2,4617,130	06/11/201909/01/2022
64763F-QQ-5. NEW ORLEANS LA	5,12615,379	06/24/2019
SAINT TAMMANY LA PARISHWIDE 1.C FF	4 750	00/02/2000
793572-YM-4_SC	1,7505,250	09/23/202003/01/2023
Possessions (Direct and Guaranteed) - Issuer (Dirigations 1,052,073 XXX 1,034,238 1,010,000 1,021,064 (14,591) XXX XXX XXX XXX	12.038 35.163	XXX XXX
Bonds - U.S. Political Subdivisions of States, Territories and Possessions (Direct and Guaranteed) - Residential Mortgage-Backed Securities	.=,	
Bonds - U.S. Political Subdivisions of States, Territories and Possessions (Direct and Guaranteed) - Commercial Mortgage-Backed Securities		
Bonds - U.S. Political Subdivisions of States, Territories and Possessions (Direct and Guaranteed) - Other Loan-Backed and Structured Securities		
2499999 - Bonds - U.S. Political Subdivisions of States, Territories and Possessions (Direct and Guaranteed) - Subtotals - U.S.		
Political Subdivisions of States, Territories and Possessions		
(Direct and Guaranteed) 1,052,073 XXX 1,034,238 1,010,000 1,021,064 (14,591) XXX XXX XXX XXX XXX	12,038 35,163	XXX XXX
Bonds - U.S. Special Revenue and Special Assessment Obligations and all Non-Guaranteed Obligations of Agencies and Authorities of Governments and Their Political Subdivisions - Issuer Obligations		
BOSSIER CITY LA UTILITIES 100216-GJ-3, REVE	2.5003.833	06/28/202110/01/2035
100210-03-5. REVE	2,000	0/20/202110/01/2035
100216-GK-0, REVE. 1.0. FE 1.0. 810,800 1.101.5780 812,624 800,000 810,331 (469) 2.600 2.450 A.	5,2007,973	06/29/202110/01/2036
114876-HA-6. BROUSSARD LA SALES & USE TAX	4,549	06/28/202105/01/2033
E BATON ROUGE PARISH LA SWR 270618-DR-9. [CO	2,6676,400	06/11/201902/01/2023
E BATON ROUGE PARISH LA SWR		
270618-GR-6. CO	6,031	12/17/202102/01/2030
506498-B3-7. REVENUE	1 , 194	10/20/202111/01/2027
506498-B4-5, REVENUE	4,778	12/29/202111/01/2028

Bonds: SVO Identified Funds - Exchange Traded Funds - as Identified by the SVO
Bonds - Unaffiliated Bank Loans - Unaffiliated Bank Loans - Issued

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE OLD AMERICAN INDEMNITY COMPANY

SCHEDULE D - PART 1

								Showing All L	ong-Term BON	IDS Owned Dece	ember 31 of Current	Year								
1	2	Co	odes	6	7	Fair	Value	10	11	CI	nange in Book / Adjuste	ed Carrying Value				Interes	st		Da	ates
		3 4 F o r	5	NAIC Designation , NAIC Designation		8	9			12	13	14 Current Year's Other	15 Total Foreign	16	17	18	19	20	21	22
CUSIP Identification	Description LAFAYETTE PARISH LA SCH BRD	e i g Code n	Bond CHAR	Modifier and SVO Administrat- ive Symbol	Actual Cost	Rate Used to Obtain Fair Value	Fair Value	Par Value	Book/ Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amortization)/ Accretion	Than Temporary Impairment Recognized	Exchange Change In B./A.C.V.	Rate of	Effective Rate of	When Paid	Admitted Amount Due & Accrued	Amount Rec. During Year	Acquired	Stated Contractual Maturity Date
506624-TU-9	SA	<u> </u>	2	1.B FE	1,000,000	100.5790	1,005,790	1,000,000	1,000,000					2.830	2.830	A0	7,075	27 , 199	09/18/2020	04/01/2048
54627R-AK-6	LOUISIANA ST LOCAL GOVT ENVRNM			1.A FE	385,236	104.2560	390,704	374,754	381,978		(2,811)			3.240	2.462	FA	5,059	12,142	08/27/2019	08/01/2028
54628C-WD-0		ļ	2	1.E FE	994 , 170	96 . 1350	961,350	1,000,000	994,350		180			1.945	2.009	A0	6,483		08/10/2021	10/01/2031
	LOUISIANA ST LOCAL GOVT ENVRNMLOUISIANA ST PUBLIC FACS AUTH	ļ	2	1.E FE 1.D FE	1,975,440 1,825,000	96.5770 100.0000	1,931,540 1,825,000	2,000,000 1,825,000	1,975,828 1.825.000		376			2.475	2.574	AO	16,500 103,849		09/22/2021 12/22/2021	10/01/2036 07/01/2047
546398-C7-1	LOUISIANA ST PUBLIC FACS AUTH. LOUISIANA ST ENERGY & PWR		2	1.D FE	1,000,000	100.0000	1,000,000	1,000,000	1,000,000					0.050	0.050	MON	55,819	326	03/22/2021	07/01/2047
546462 -EL -2	AUTHLOUISIANA ST GAS & FUELS TAX		11	1.C FE	300,000	97 . 1440	291,432	300,000	300,000					1.982	1.982	JD	496	1,470	08/19/2021	06/01/2029
	LOUISIANA ST GAS & FUELS TAX	ļ	1	1.D FE	1,446,546	98.3410	1,401,359	1,425,000	1,444,098		(2,441)			1.598	1.405	MN	3,795	22,772	12/30/2020	05/01/2029
546475-TV-6 546540-RE-7	LOUISIANA ST UNIV & AGRIC &	·····	. 1	1.D FE	4,825,612	99.5170	4,741,985		4 ,820 ,066		(4,509)			1.998 2.596	2.596	MN	15,867	95,205	12/30/2020	05/01/2032 07/01/2027
64763H-FR-1	NEW ORLEANS LA AVIATION BRD PLAQUEMINE LA SALES & USE TAX.			1.E FE 1.F FE 1.C FE	2,032,130	102.4970	2,028,109	175,000 1,990,000 270,000	2,002,345 269,482		(12,064)			2.596	2.318	JJ JJ	2,272 29,343 225	4,543 58,685 2,700	06/25/2019 06/25/2019 09/23/2020	01/01/2023 12/01/2025
	SAINT TAMMANY PARISH LA SALES. TANGIPAHOA PARISH LA WTR			1.B FE	500,000	97.3690	486,845		500,000		129			1.671	1.671	JD	696	7,868	12/02/2020	06/01/2028
875682-GL-4	DISTRTERREBONNE LA LEVEE & CONSV	 	ļ	1.C FE	103,759	102.6170	102,617	100,000	103,576		(183)		<u> </u>	2.440	2.000	JD	203	1,220	06/28/2021	12/01/2030
881182-BK-4	TERREBONNE LA LEVEE & CONSV			1.E FE	1,644,611	100 .7030	1,616,283	1,605,000	1,639,329		(4,234)			2.188	1.878	JD	2,926	43,116	09/28/2020	06/01/2029
881182-BR-9_ 2599999 - B	Bonds - U.S. Special Revenue ar				522,545	102.4840	512,420	500,000	520,428		(2,117)			2.788	2.252	JD	1 , 162	17 , 115	01/04/2021	06/01/2035
	and all Non-Guaranteed Obliga Authorities of Governments ar Issuer Obligations				24.477.874	XXX	24.217.312	24 279 754	24.425.362		(29,998)			XXX	XXX	XXX	276.897	317.116	XXX	XXX
	Special Revenue and Special A				-Guaranteed Obl	igations of Age	encies and Auth	norities of Gove	rnments and The		visions – Residential			7001	7000	7001	270,007	011,110	7000	7001
	Special Revenue and Special Associal Revenue and Special Association																			
	Bonds - U.S. Special Revenue ar and all Non-Guaranteed Obliga Authorities of Governments ar Subtotals - U.S. Special Reve Obligations and all Non-Guara	nd Special ations of A nd Their Po enue and Sp anteed Obli	Assessment Agencies an Diitical Su Decial Asse gations of	Obligations d bdivisions - ssment						Tribur Casar		sakkou unu otriuote								
Bonds - Indu	Governments and Their Politic strial and Miscellaneous (Unaf			ligations	24,477,874	XXX	24,217,312	24,279,754	24,425,362		(29,998)			XXX	XXX	XXX	276,897	317,116	XXX	XXX
	strial and Miscellaneous (Unaf																			
	strial and Miscellaneous (Unaf strial and Miscellaneous (Unaf																			
Bonds - Hybr	id Securities - Issuer Obligat	ions			otractarea 000	ui 1 t 100														
	id Securities - Residential Mo																			
	id Securities - Commercial Mor id Securities - Other Loan-Back																			
	nt, Subsidiaries and Affiliate																			
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	nt, Subsidiaries and Affiliate																			
	dentified Funds - Exchange Tra																			

SCHEDULE D - PART 1 Showing All Long-Term BONDS Owned December 31 of Current Year

												ember 31 of Current									
1	2		Cod	les	_ 6	7	Fair	Value	10	11		hange in Book / Adjust	ted Carrying Value				Interest			Da	ates
			4 F o r e	5	NAIC Designation , NAIC Designation Modifier		8 Rate Used	9		Book/	12 Unrealized	13	14 Current Year's Other Than	15 Total Foreign Exchange	16	17	18	19 Admitted	20 Amount	21	22 Stated
CUSIP			i q	Bond	and SVO Administrat-	Actual	to Obtain Fair	Fair	Par	Adjusted Carrying	Valuation Increase/	Current Year's (Amortization)/	Temporary Impairment	Change In	Rate	Effective Rate	When	Amount Due &	Rec. During		Contractual Maturity
Identification	Description	Code			ive Symbol		Value	Value	Value	Value	(Decrease)	Accretion	Recognized	B./A.C.V.	of	of	Paid	Accrued	Year	Acquired	Date
Bonds - Unaff	filiated Bank Loans - Unaffilia	ted Ba	nk Lo	ans - Acq	uired						, ,										
	Bonds - Total Bonds - Subtotals					28,937,509	XXX	28,656,961	28,692,754	28,850,697		(45,643)			XXX	XXX	XXX	298,497	394,455	XXX	XXX
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<u> </u>					<u> </u>	<u> </u>	<u> </u>			<u> </u>			<u></u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>				
8399999 S	Subtotals - Total Bonds					28,937,509	XXX	28,656,961	28,692,754	28,850,697		(45,643)			XXX	XXX	XXX	298,497	394,455	XXX	XXX

1. Line Number	·Book/	Adi	usted Carrying Value b	v NAIC	Designation Category Fo	ootnote	÷.										
1A	1A	\$	3 2,286,249	1B	\$ 1,500,000	1C	\$	3,087,770	1D	,	\$ 11,634,104	1E	 7 ,823,037	1F	\$ 2,519,536	1G	\$
1B	2A	\$	3	2B	\$	2C	\$										
					\$												
1D	4A	\$	S	4B	\$	4C	\$										
1E	5A	\$	S	5B	\$	5C	\$										
1F	6	\$															

Schedule D - Part 2 - Section 1

NONE

Schedule D - Part 2 - Section 2

SCHEDULE D - PART 3

Showing All Long-Term Bonds and Stocks **ACQUIRED** During Current Year

1	2	3	4	nowing All Long-Term Bonds and Stocks ACQUIRED During Current Year	6	7	8	l q
	_	Ü		v		·	Ŭ	
CUSIP					Number of	Actual		Paid for Accrued
Identification	Description	Foreign	Date Acquired	Name of Vendor	Shares of Stock	Cost	Par Value	Interest and Dividends
Bonds - U.S. Governm						<u> </u>		•
	UNITED STATES TREASURY NOTE		08/.10/.2021	BARCLAYS CAPITAL INC	XXX	249,454	250,000	9
0599999 - Bonds -						249,454	250,000	9
Bonds - All Other Go								
	, Territories and Possessions (Direct and Guaranteed)							
	cal Subdivisions of States, Territories and Possessions (D							
	I Revenue and Special Assessment and all Non-Guaranteed Ob	ligations of Agenci						
100216-GJ-3	BOSSIER CITY LA UTILITIES REVE.			HEADLANDS TECH GLOBAL MARKETS LLC.	XXX	405,760	400,000	1,306
100216 - GK - 0 114876 - HA - 6	BOSSIER CITY LA UTILITIES REVE			OPPENHEIMER & CO. INC	XXXXXX	810,800 695.000	800,000 695,000	2,716
270618-GR-6	LE BATON ROUGE PARISH LA SWR CO.			PIPER SANDLER & CO.	XXX	843,201	855,000	5.629
506498-B3-7	LAFAYETTE LA UTILITIES REVENUE.		10/20/2021	STIFEL NICOLAUS & COMPANY INCORPORATED		505,615	500,000	
506498-B4-5	LAFAYETTE LA UTILITIES REVENUE		12/29/2021	KEYBANC CAPITAL MARKETS INC.	XXX	2,012,600	2,000,000	4.778
54628C-WD-0	LOUISIANA ST LOCAL GOVT ENVRNM			RBC CAPITAL MARKETS LLC	XXX	994.170	1,000,000	1,170
54628C - WJ - 7	LOUISIANA ST LOCAL GOVT ENVRNM		09/22/2021	FHN FINANCIAL SECURITIES CORP.	XXX	1.975.440	2,000,000	3,163
546398-C6-3	LOUISIANA ST PUBLIC FACS AUTH			BNY MELLON CAPITAL MARKETS LLC	XXX	1,825,000	1,825,000	66
546398-C7-1	LOUISIANA ST PUBLIC FACS AUTH		03/22/2021	J.P. MORGAN SECURITIES LLC.	XXX	1,000,000	1,000,000	19
546462-EL-2	LOUISIANA ST ENERGY & PWR AUTH			RAYMOND JAMES & ASSOCIATES INC.	XXX	300,000	300,000	
875682-GL-4	TANGIPAHOA PARISH LA WTR DISTR			PIPER SANDLER & CO.	XXX	103,759	100,000	197
881182-BR-9	TERREBONNE LA LEVEE & CONSV DI			RAYMOND JAMES & ASSOCIATES INC.	XXX	522,545	500,000	4,531
		Guaranteed Obligati	ons of Agencies and A	Authorities of Governments and Their Political Subdivisions		11,993,890	11,975,000	22,403
	and Miscellaneous (Unaffiliated)							
Bonds - Hybrid Secur								
	sidiaries, and Affiliates							
Bonds - SVO Identifi								
	Unaffiliated Bank Loans					10.010.011	40.005.000	
	Subtotals - Bonds - Part 3					12,243,344	12,225,000	22,413
8399999 - Bonds -						12,243,344	12,225,000	22,413
	Industrial and Miscellaneous (Unaffiliated) Perpetual Prefe							
	Industrial and Miscellaneous (Unaffiliated) Redeemable Pre	terred						
	Parent, Subsidiaries and Affiliates Perpetual Preferred							
	Parent, Subsidiaries and Affiliates Redeemable Preferred							
	ustrial and Miscellaneous (Unaffiliated) Publicly Traded							
	ustrial and Miscellaneous (Unaffiliated) Other							
	ent, Subsidiaries, and Affiliates Publicly Traded ent, Subsidiaries and Affiliates Other							
Common Stocks - Pare								
Common Stocks - Mutt								
Common Stocks - Unit								
9999999 Totals	ocu-Liiu i uiiuo				T	12.243.344	XXX	22.413
9999999 Totals						12,243,344	λλλ	22,413

SCHEDULE D - PART 4

					OI : II								.,						
		<u> </u>		1 0	Snowing all	Long-Term I			REDEEMED	or Otherwise DI			Year	1 40	4-	1 40			1 04 1
1	2	3 4	5	6	'	8	9	10	11		look/Adjusted Ca 13	rrying Value	15	16	17	18	19	20	21
		-							11	12	13	14	15						
CUSIP		r e i g		Number of				Prior Year Book/ Adjusted	Unrealized Valuation	Current Year	Current Year's Other-Than- Temporary	Total Change in	Total Foreign Exchange	Book/ Adjusted Carrying Value	Foreign Exchange Gain		Total Gain	Bond Interest/Stock Dividends	Stated Contractual
Identi-	D in ti	n Disposal	Name of Bondhaman	Shares of	0	D)/	A -41 O4	Carrying	Increase/	(Amortization)/	Impairment	B./A.C.V.	Change in	at	(Loss) on	(Loss) on	(Loss) on	Received	Maturity
fication Bonds - U.S.	Description	Date	Name of Purchaser	Stock	Consideration	Par value	Actual Cost	Value	(Decrease)	Accretion	Recognized	(11+12-13)	B./A.C.V.	Disposal Date	Disposal	Disposal	Disposal	During Year	Date
912828-3X-6	UNITED STATES TREASURY NOTE	02/15/2021	MATURITY 100.0000.	LXXX	315.000	315,000	313,524	314,937		63		63		315,000				3,544	02/15/2021
912828-4D-9	UNITED STATES TREASURY NOTE		BARCLAYS CAPITAL INC	XXX	48,234	47,000	47,555	47 ,316		(134)		(134)		47,182		1,052	1,052	1,436	03/31/2023
912828-70-8	UNITED STATES TREASURY NOTE	03/18/2021_		XXX	255,468	250,000	250,479	250,254		(35)		(35)		250,219		5,249	5,249	2,949	07/15/2022
	UNITED STATES TREASURY NOTE		BARCLAYS CAPITAL INC	XXX	203,562	200,000	200,149	200,093		(38)		(38)		200,056		3,506	3,506	3,838	05/15/2023
912828-Y2-0 912828-7M-5	UNITED STATES TREASURY NOTE		VARIOUS	XXX	250,000	250,000 100.000	250,880 99.879	250,200 99,919		(200)		(200)		250,000 99,958		96		6,563	07/15/2021
	Bonds - U.S. Governments	100/20/2021	. HOBE SECURITIES (USA) INC	.	1,172,317	1,162,000	1,162,467	1,162,719		(304)		(304)		1,162,415		9.903	9.903	18.432	XXX
	ther Governments				1,112,011	1,102,000	1,102,401	1,102,710		(004)		(004)		1,102,410		0,000	0,000	10,402	AAA
	States, Territories and Possessions (D	irect and Guara	nteed)																
	PENNSYLVANIA ST		BOK FINANCIAL SECURITIES	XXX	286.850	275.000	297.011	289 . 194		(4.953)		(4.953)		284.242		2,608	2,608	7.983	06/04/2020
	Bonds - U.S. States, Territories and Po	06/28/2021	1110		286.850	275,000	297,011	289 . 194		(4,953)		(4,953)		284,242		2,608	2,608	7,983	06/01/2028 XXX
	Political Subdivisions of States, Terr			teed)	200,030	275,000	237,011	209,194		(4,333)		(4,555)		204,242		2,000	2,000	7,300	^^^
043519-ZF-7	ASCENSION PARISH LA PARISHWIDE	01/22/2021_	IFIFTH THIRD SECURITIES	XXX	1,011,530	1,000,000	1,000,000	1,000,000						1,000,000		11,530	11,530	2,040	03/01/2025
64763F-XE-4	NEW ORLEANS LA		MATURITY 100.0000	XXX	100,000	100,000	100,000	100,000						100,000				2.050	12/01/2021
68666P-AA-4	ORLEANS PARISH LA SCH BRD REVE.		MATURITY 100.0000.	XXX	1,000,000	1,000,000	1,033,980	1,001,961		(1,961)		(1,961)		1,000,000				22,000	02/01/2021
2499999 - E	Sonds - U.S. Political Subdivisions of	States, Territo	ories and Possessions (Direct	t and								· · · · · ·							
	Guaranteed)				2,111,530	2,100,000	2,133,980	2,101,961		(1,961)		(1,961)		2,100,000		11,530	11,530	26,090	XXX
	Special Revenue and Special Assessment													T					
186352-QD-5	CLEVELAND OH ARPT SYS REVENUE	06/28/2021	BOFA SECURITIES INC	XXX	153,504	150,000	160,070	155,648		(2,800)		(2,800)		152,848		656	656	7,479	01/01/2030
38611T-AD-9	GRAND PARKWAY TRANSPRTN CORP T	01/25/2021_	INCORPORATED		337,848	300,000	320,412	316,124		(375)		(375)		315,748		22,100	22,100	4,750	04/01/2053
47770V - AK - 6	JOBSOHIO BEVERAGE SYS STWD LIQ			. LXXX	294,550	275,000	302,005	294 , 458		(4,787)		(4,787)		289,671		4,879	4,879	13,712	
506498-YM-0	LAFAYETTE LA UTILITIES REVENUE	01/22/2021	SUMRIDGE PARTNERS LLC	. XXX	335,420	310,000	340,287	336,557		(1,003)		(1,003)				(133)	(133)	3,660	11/01/2025
54627R-AK-6	LOUISIANA ST LOCAL GOVT ENVRNM	08/01/2021	SINKING FUND REDEMPTION 100.0000BNY MELLON CAPITAL MARKETS	XXX	67,989	67 ,989	69,891	68 , 136		(147)		(147)						1,611	08/01/2028
546398-C6-3	LOUISIANA ST PUBLIC FACS AUTH.	01/22/2021_	LLC	xxx	500,000	500,000	500,000	500,000						500,000				66	07/01/2047
3199999 - E	Bonds - U.S. Special Revenue and Specia			tions of															
	Agencies and Authorities of Governm		Political Subdivisions		1,689,312	1,602,989	1,692,665	1,670,923		(9,112)		(9,112)		1,661,810		27,502	27,502	31,278	XXX
	trial and Miscellaneous (Unaffiliated)																		
Bonds - Hybri	t. Subsidiaries, and Affiliates																		
	dentified Funds																		
	tals - Unaffiliated Bank Loans																		
	Bonds - Subtotals - Bonds - Part 4				5,260,010	5,139,989	5,286,122	5,224,797		(16,330)		(16,330)		5,208,466		51,543	51,543	83,782	XXX
8399999 - E	Bonds - Subtotals - Bonds				5,260,010	5,139,989	5,286,122	5,224,797		(16,330)		(16,330)		5,208,466		51,543	51,543	83,782	XXX
	cks - Industrial and Miscellaneous (Un																		
	cks - Industrial and Miscellaneous (Un																		
	cks - Parent, Subsidiaries and Affilia																		
	cks - Parent, Subsidiaries and Affilia																		
	- Industrial and Miscellaneous (Unaff - Industrial and Miscellaneous (Unaff		iy iraded																
	- Industrial and Miscellaneous (Unatt		ed h																
	- Parent, Subsidiaries, and Affiliates		ou																
	- Mutual Funds	7 (1101																	
	- Unit Investment Trusts																		
	- Closed-End Funds																		
9999999 T	otals				5,260,010	XXX	5,286,122	5,224,797		(16,330)		(16,330)		5,208,466		51,543	51,543	83,782	XXX

Schedule D - Part 5

NONE

Schedule D - Part 6 - Section 1

NONE

Schedule D - Part 6 - Section 2

NONE

Schedule DA - Part 1

NONE

Schedule DB - Part A - Section 1

NONE

Schedule DB - Part A - Section 2

NONE

Schedule DB - Part B - Section 1

NONE

Schedule DB - Part B - Section 2

NONE

Schedule DB - Part D - Section 1

NONE

Schedule DB - Part D - Section 2

NONE

Schedule DB - Part E

Schedule DL - Part 1

NONE

Schedule DL - Part 2

SCHEDULE E - PART 1 - CASH

Amount of Interest Received Depository Code Interest Rate of Interest Interest Park Pear Plant		SHEDULE E			OAUII			
Amount of Interest Received December 31 of Current Year Balance	1		2	3	4	5	6	7
Rate of Depository Depository Depository December 31 of December 31 of December 31 of Current Year December 31 of Current Year December 31 of Current Year December 31 of Current Year December 31 of Current Year December 31 of Current Year December 31 of Current Year December 31 of Current Year December 31 of Current Year December 31 of Decembe								
Rate of Depository Rate of During December 31 of December 31 of Current Year Balance					Amount of Interest	Amount of Interest		
Depository Code Rate of Interest During Year December 31 of Current Year Balance								
Depository Code Interest Year Current Year Balance								
Depository Code Interest Year Current Year Balance				Rate of	Durina	December 31 of		
OPEN DEPOSITORIES	Denository		Code		Vear	Current Year	Ralance	*
CIT BANK	ODEN DEDOCITORIES		Oode	IIICICS	i cai	Current real	Balarice	1
CITIBANK	OLT IDANIC	IZ ANZ					0.000	1 1/1/1/
COMMONWEALTH BANK & TRUST. LOUISVILLE, KY	ULLIDAWA NEW YOR	N, NY					8,863	XXX
IBC BANK	CTITBANK	ONTO, IX					942,028	XXX
IBC BANK	COMMONWEALTH BANK & TRUSTLOUISV	LLE, KY					71,984	XXX
0199998 Deposits in	IBC BANK	ONIO, TX					657 , 397	XXX XXX XXX
allowable limit in any one depository - Open Depositories	0100008 Danasits in danas	itarias that do not avecad the						
allowable with it any one depository - Upen Depositories	0.199990 Debosits III	itories triat do not exceed trie	VVV	VVV				VVV
019999 Totals - Open Depositories	allowable limit in any one depository - Open	Depositories						XXX
	0199999 Totals - Open Depositories		XXX	XXX			1,680,272	XXX
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0399999 Total Cash on Deposit XXX XXX XXX 1,680,27	USARARA LOTAL CARL OU DEBORIT						1,680,272	XXX
0499999 Cash in Company's Office XXX XXX XXX XXX XXX	0499999 Cash in Company's Office		XXX	XXX	XXX	XXX		XXX
0599999 Total Cash XXX XXX 1,680,27							1,680,272	XXX

TOTALS	OF DEPOSITORY I	BALANCES ON THE LA	ST DAY OF EACH MO	NTH DURING THE CU	IRRENT YEAR

1. January	3,130,645	4. April	2,524,277	7. July	2,550,388	10. October	2,254,389
2. February	4,244,444	5. May	3,644,624	8. August	2,901,809	11. November	1,926,355
3. March	2,373,544	6. June	3,243,948	September	2,379,843	12. December	1,680,272

SCHEDULE E - PART 2 - CASH EQUIVALENTS

		Show I	Investments Owi	ned December 31 of Current Y	'ear			
1	2	3	4	5	6	7	8	9
			Date	Rate of	Maturity	Book/Adjusted Carrying Value	Amount of Interest	Amount Received
CUSIP	Description	Code	Acquired	Interest	Date	Carrying Value	Due & Accrued	During Year
00011	Description	Code	Acquired	interest	Date	Carrying value	Due & Accided	Dulling Teal
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9999999 Total Cas	sh Equivalents							

1.											
Line											
Number	Book/A	Adjusted Carrying Value b	y NAI	C Designation Category Fo	ootnot	e:					
1A	1A	\$	1B	\$	1C	\$	 1D	\$ 1E	\$ 1F	\$ 1G	\$
1B	2A	\$	2B	\$	2C	\$					
1C	3A	\$	3B	\$	3C	\$					
1D	4A	\$	4B	\$	4C	\$					
1E	5A	\$	5B	\$	5C	\$					
4-		· ·									

SCHEDULE E - PART 3 - SPECIAL DEPOSITS

		1	2	Deposits	For		
				the Benefit of All I	Policyholders 4	All Other Spec	ial Deposits 6
	States, etc.	Type of Deposits	Purpose of Deposits	Book/Adjusted Carrying Value	Fair Value	Book/Adjusted Carrying Value	Fair Value
1.	Alabama	AL					
	Alaska	i					
	Arizona	i					
	Arkansas						
	California	CO L					
	Connecticut						
	Delaware						
	District of Columbia	i					
			For the benefit and protection of all	000,000	000 000		
10.	Florida	FLST	policyholders and creditors For the protection of policyholders or others entitled to the proceeds of	200,000	200,000		
11.	Georgia	GAB	policies			84,983	85,000
12.	Hawaii	ні					
	Idaho						
	Illinois						
	Indiana						
	lowa	i					
	Kansas Kentucky	_	For the benefit and protection of all policyholders and creditors	1,000.505	1,005,469		
	Louisiana						
	Maine			ļŢ.			
21.	Maryland	мр					
22.	Massachusetts	ма		ļ			
23.	Michigan	мі					
24.	Minnesota	MN					
25.	Mississippi	MS					
	Missouri						
27.	Montana	MT					
	Nebraska	i					
	Nevada						
	New Hampshire						
31.	New Jersey	NJ	For the benefit and protection of all				
32.	New Mexico	NMB	policyholders and creditors			314,937	315,000
33.	New York	NY					
34	North Carolina	NCB	For the benefit and protection of all policyholders and creditors		304,922		
	North Dakota		porroynordoro dila orodittoro				
	Ohio						
	Oklahoma						
38.	Oregon	OR					
	Pennsylvania	PA					
40.	Rhode Island	RI					
41	South Carolina	scB.	For the benefit and protection of all policyholders and creditors	203.765	207,980		
	South Dakota	i	porreynorders and creditors	203,703	201,300		
	Tennessee						
	Texas	i					
	Utah						
	Vermont	i i					
	Virginia			.			
48.	Washington	WA					
49.	West Virginia	wv					
50.	Wisconsin	wı					
51.	Wyoming	WY					
52.	American Samoa	AS					
	Guam						
	Puerto Rico						
	US Virgin Islands			-			
	Northern Mariana Islands						
	Canada		VVV				
	Aggregate Alien and Other		XXX	4 704 054	4 740 070	200 000	400.000
	Total	XXX	XXX	1,704,351	1,718,370	399,920	400,000
	OF WRITE-INS						
5801.				-			
5802.				-			
5803. 5898.	Sum of remaining write-ins for	Line		-			
	58 from overflow page	XXX	XXX				
5899.				i l			